

# 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  
National Association of Insurance and Financial Advisors Political Action Comm

ADDRESS (number and street) 2901 Telearstar Ct.  
Check if different than previously reported. (ACC) Falls Church VA 22042

2. **FEC IDENTIFICATION NUMBER** C00005249 **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 07 01 2011 through 07 31 2011

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 Randy L. Scritchfield

Signature of Treasurer Electronically Filed by Randy L. Scritchfield Date 08 19 2011

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**

Write or Type Committee Name  
National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		536889.88
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	588236.92									
(c) Total Receipts (from Line 19) .....	154104.72	675957.35								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	742341.64	1212847.23								
7. Total Disbursements (from Line 31) .....	83019.88	553525.47								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	659321.76	659321.76								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	30758.44									

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

National Association of Insurance and Financial Advisors Political Action Comm

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) .....	66702.36	218594.77
(ii) Unitemized .....	82402.36	441862.58
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	149104.72	660457.35
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	154104.72	670457.35
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	5500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	154104.72	675957.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	154104.72	675957.35

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.....	35435.88	185398.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	35435.88	185398.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	47500.00	368000.00
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 .....	84.00	126.50
(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)) .....	84.00	126.50
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))..	83019.88	553525.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	83019.88	553525.47

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) .....	154104.72	670457.35
34. Total Contribution Refunds (from Line 28(d)) .....	84.00	126.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	154020.72	670330.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	35435.88	185398.97
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	35435.88	185398.97

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 192	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial) CC Services Inc Country PAC		Date of Receipt
Mailing Address 1705 Towanda Avenue		<input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2011"/>
City	State	Zip Code
Bloomington	IL	61701
FEC ID number of contributing federal political committee.		Transaction ID: 10173898
<input type="text" value="C"/> <input type="text" value="C00390971"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="5000.00"/>
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="5000.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Gary Lee Eckelkamp

Mailing Address 6940 Houser Rd

City Paducah State KY Zip Code 42003-8793

FEC ID number of contributing federal political committee. C

Name of Employer Allstate Life Insurance Company  
Occupation Exclusive Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10200450

Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Frank R. Nolimal

Mailing Address 2017 Grafton Ave

City Henderson State NV Zip Code 89074-0626

FEC ID number of contributing federal political committee. C

Name of Employer Assurance Ltd  
Occupation AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10200456

Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Jeff L. Holland

Mailing Address 200 Matthew Dr

City Paducah State KY Zip Code 42001-6162

FEC ID number of contributing federal political committee. C

Name of Employer HollandStivers & Assoc., LLC  
Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10200477

Amount of Each Receipt this Period 30.00

**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 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Henry L Prien

Mailing Address PO Box 9101

City State Zip Code  
Fargo ND 58106-9101

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

Name of Employer American Family Life Insurance Co. Occupation District Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 386.40

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200479

Amount of Each Receipt this Period  
50.40

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Edwin R. Hamilton

Mailing Address 4318 Council Circle

City State Zip Code  
Jackson MS 39206-5819

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

Name of Employer American General Occupation General Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200480

Amount of Each Receipt this Period  
42.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Daniel J. Scholz

Mailing Address 3619 S 55th St

City State Zip Code  
Omaha NE 68106-4415

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

Name of Employer Ameritas Life Insurance Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2176.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200484

Amount of Each Receipt this Period  
417.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **509.40**

**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 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roy W. Kern

Mailing Address 642 S. Rilynn Ave.

City State Zip Code  
Republic MO 65738-7540

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

Name of Employer Occupation  
Kern Insurance Services, LLC OWNER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 487.20

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200486

Amount of Each Receipt this Period  
84.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Barry K. Rake

Mailing Address 1004 Dawne Dr

City State Zip Code  
Williamsport PA 17701

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

Name of Employer Occupation  
Kent A. Bennett & Associates AGENT

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200491

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Laurie A. Adams

Mailing Address 609 E. Jefferson

City State Zip Code  
Washington IL 61571-1551

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

Name of Employer Occupation  
Country Financial Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 378.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200503

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **176.00**

**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 10 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Frank H. Briggs, Jr.	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 2610 Bohler Rd NW	<b>Transaction ID:</b> 10200518
	City State Zip Code Atlanta GA 30327-1418	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: Briggs & Associates/AXA Advisors, LLC Occupation: Financial Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Ronald T. Staebell	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 4309 Town Park Pl.	<b>Transaction ID:</b> 10200522
	City State Zip Code Sioux Falls SD 57105-7116	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: The Principal Financial Group Occupation: Senior Financial Services Representati Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 231.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Bob C. Buxman	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 12690 NW Lorraine Dr	<b>Transaction ID:</b> 10200529
	City State Zip Code Portland OR 97229	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: NAIFA - Oregon Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>122.00</b>
<b>TOTAL</b> 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 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Don E. Hensley		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 3209 Twisted Oak Rd		<b>Transaction ID:</b> 10200545
	City Oklahoma City	State OK	Zip Code 73120
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer Centennial Marketing Group	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Kathy Z. Smithson		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address PO Box 256		<b>Transaction ID:</b> 10200550
	City Monitor	State WA	Zip Code 98836-0256
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 21.00
	Name of Employer Smithson Insurance Services	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 239.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Ray E. Smith		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 2810 N Crescent Dr.		<b>Transaction ID:</b> 10200561
	City Stillwater	State OK	Zip Code 74075-2603
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 45.00
	Name of Employer Ray Smith Wealth Management, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 261.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	116.00
<b>TOTAL</b> 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 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Paul R. Decker

Mailing Address Box 1832

City State Zip Code  
Idaho Falls ID 83403-1832

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

Name of Employer Beneficial Life Occupation Insurance Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 487.20

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2 0 1 1

**Transaction ID:** 10200562

Amount of Each Receipt this Period  
84.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ronald D. Brant

Mailing Address 10234 Hoffman

City State Zip Code  
Maybee MI 48159-9777

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

Name of Employer Lincoln Financial Network Occupation AGENT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2 0 1 1

**Transaction ID:** 10200564

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Matthew S. Huntington

Mailing Address 2598 S. Oswego Street

City State Zip Code  
Aurora CO 80014-1814

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

Name of Employer Farmers Ins. Group Occupation Insurance Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2 0 1 1

**Transaction ID:** 10200566

Amount of Each Receipt this Period  
42.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► **226.50**

**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 13 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Martin P. Peters

Mailing Address 120 10th St

City State Zip Code  
del Mar CA 92014-2307

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

Name of Employer Occupation  
Peters Financial Services, Inc President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 05 / 2011

Transaction ID: 10200575

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Paul E. Eisen

Mailing Address 10000 Stony Point

City State Zip Code  
Waco TX 76712-3172

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

Name of Employer Occupation  
Ohio National Representative

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 209.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10200580

Amount of Each Receipt this Period

38.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Walter C. Sprye, Jr.

Mailing Address 1305 Portside Dr

City State Zip Code  
Wilmington NC 28405-4133

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

Name of Employer Occupation  
AXA Advisors, LLC Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 375.90

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10200586

Amount of Each Receipt this Period

23.10

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

311.10

**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 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Randy A. Dabb	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 316 E. Cedar Street	<b>Transaction ID:</b> 10200600
	City State Zip Code Rawlins WY 82301	Amount of Each Receipt this Period 22.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Farmers Insurance Group Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 202.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. William J. Lynch	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 5075 SW Griffith Dr. #200	<b>Transaction ID:</b> 10200604
	City State Zip Code Beaverton OR 97005	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Farmers Insurance Occupation General Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Eric S. Roth	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 2 Mckinley Ct.	<b>Transaction ID:</b> 10200605
	City State Zip Code Monroe Twp NJ 08831-4055	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Smith Barney Occupation Vice President- Investments Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 467.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	157.50
<b>TOTAL</b> 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 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Elwood B. Syverson	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 509 Loomis Drive	<b>Transaction ID:</b> 10200612
	City State Zip Code Mauston WI 53948-1522	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer The Rural Insurance Co's	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Walter C. Sprye, Jr.	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 1305 Portside Dr	<b>Transaction ID:</b> 10200619
	City State Zip Code Wilmington NC 28405-4133	Amount of Each Receipt this Period 23.10
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer AXA Advisors, LLC	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Randall C. Wimsatt	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 4400 Hannon Dr	<b>Transaction ID:</b> 10200622
	City State Zip Code Farmington NM 87402-8718	Amount of Each Receipt this Period 31.20
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer ING Financial Partners	Occupation District Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.20	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>84.30</b>
<b>TOTAL</b> 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 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. William J. Brannon	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 5215 Mockingbird Road	<b>Transaction ID:</b> 10200623
	City State Zip Code Greensboro NC 27406	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Group U.S., Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 237.30	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Steven M. Daniel	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 2600 Meadowbrook Dr	<b>Transaction ID:</b> 10200628
	City State Zip Code Butte MT 59701-4028	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Daniel Financial Services, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 243.60	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Bryon A. Holz	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 207 Cindy Ln	<b>Transaction ID:</b> 10200635
	City State Zip Code Brandon FL 33510-3905	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Bryon Holz & Associates Occupation Independent Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 378.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>126.00</b>
<b>TOTAL</b> 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 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Mark V. Snider		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 44 Elmwood Place		<b>Transaction ID:</b> 10200662		
	City Athens	State OH	Zip Code 45701-1904	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Snider, Fuller & Associates	Occupation President	Aggregate Year-to-Date 336.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Vincent M. D'Addona		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 141 Greenway Road		<b>Transaction ID:</b> 10200669		
	City Lido Beach	State NY	Zip Code 11561-4828	Amount of Each Receipt this Period 208.33	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer D'Addona Rosenbaum	Occupation General Agent	Aggregate Year-to-Date 1873.32		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Stewart E. Meyers, Jr.		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address P.O. Box 18205		<b>Transaction ID:</b> 10200676		
	City Oklahoma City	State OK	Zip Code 73154-0205	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Meyers Life Agency, Inc.	Occupation President	Aggregate Year-to-Date 290.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.33</b>
<b>TOTAL</b> 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 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas H. Rausch

Mailing Address 619 Guinette Avenue

City State Zip Code  
Fond du Lac WI 54935-5723

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

Name of Employer  
Rausch Insurance Agency LLC

Occupation  
Agent/Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10200678

Amount of Each Receipt this Period  
25.20

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lanny D. Levin

Mailing Address 313 Laurel

City State Zip Code  
Highland Park IL 60035-2619

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

Name of Employer  
Lanny D. Levin Agency, Inc.

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
462.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10200680

Amount of Each Receipt this Period  
84.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. W. Randall Keng

Mailing Address 111 Bridgepointe Blvd.

City State Zip Code  
Brandon MS 39047-7006

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

Name of Employer  
John Hancock Financial Network

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 05 / 2011

**Transaction ID:** 10200701

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **409.20**

**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 19 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Howard D. Catchings		Date of Receipt MM / DD / YYYY 07 / 05 / 2011		
	Mailing Address 6027 Woodlea Rd		<b>Transaction ID:</b> 10200704		
	City Jackson	State MS	Zip Code 39206-2145	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Catchings Ins. Agcy.	Occupation General Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Judy B. Morgan		Date of Receipt MM / DD / YYYY 07 / 05 / 2011		
	Mailing Address 1008 Windsor		<b>Transaction ID:</b> 10200713		
	City Hattiesburg	State MS	Zip Code 39402-2844	Amount of Each Receipt this Period 1109.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer State Farm Insurance Companies	Occupation AGENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1109.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Gaylord W. Mussman		Date of Receipt MM / DD / YYYY 07 / 05 / 2011		
	Mailing Address 634 E Military Ave		<b>Transaction ID:</b> 10200717		
	City Fremont	State NE	Zip Code 68025-5181	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer State Farm Ins.	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2409.00
<b>TOTAL</b> 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 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. W. Randall Keng

Mailing Address 111 Bridgepointe Blvd.

City State Zip Code  
Brandon MS 39047-7006

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

Name of Employer Occupation  
John Hancock Financial Network Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
07 / 05 / 2011

**Transaction ID:** 10200718

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. John Jay Fletcher

Mailing Address 4003 Willow St

City State Zip Code  
Pascagoula MS 39567-2146

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

Name of Employer Occupation  
Nationwide Insurance Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 05 / 2011

**Transaction ID:** 10200720

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Carol A. Anderson

Mailing Address 717 N. 87th St.

City State Zip Code  
Omaha NE 68114

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

Name of Employer Occupation  
Sharp Anderson Arena Curnes & Assoc Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10200731

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

**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 21 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial) Mrs. Nora Vaden Holmes		Date of Receipt MM / DD / YYYY 07 / 05 / 2011
Mailing Address 824 Joe Yenni Blvd Apt 5		Transaction ID: 10200743
City Kenner	State Zip Code LA 70065-1220	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Nora Vaden Ins Agency	Occupation AGENT	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Mr. Stephen G. Summerlin		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
Mailing Address 4014 N. W. 15th Street		Transaction ID: 10200758
City Gainesville	State Zip Code FL 32605-1912	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Summerlin Financial Advisors, Inc.	Occupation Certified Financial Planner	Aggregate Year-to-Date 378.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) Mr. Gary A. Bramon		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
Mailing Address 269 San Felipe Way		Transaction ID: 10200761
City Novato	State Zip Code CA 94945-1687	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Alders Financial Solutions	Occupation General Agent	Aggregate Year-to-Date 450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	342.00
<b>TOTAL</b> 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 22 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Leslie T. Hoshide

Mailing Address 4999 Kahala Ave # 363

City Honolulu State HI Zip Code 96816

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

Name of Employer Highland Capital Brokerage Occupation V.P. Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 07 / 2011  
Transaction ID: 10200768  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James W. Oglesby

Mailing Address 800-E FAIRVIEW RD.  
Box 136

City Asheville State NC Zip Code 28803

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

Name of Employer J.W. Oglesby & Associates Occupation Senior Sales Associate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt 07 / 06 / 2011  
Transaction ID: 10200774  
Amount of Each Receipt this Period 165.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John M. Root

Mailing Address 1759 NW Riverview Dr

City Roseburg State OR Zip Code 97471

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

Name of Employer Bill Moats and Associates Occupation AGENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 07 / 2011  
Transaction ID: 10200785  
Amount of Each Receipt this Period 600.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1015.00

**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 23 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Brian P. Winfield

Mailing Address 1348 Harris Rd

City State Zip Code  
Virginia Beach VA 23452-6208

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

Name of Employer Occupation  
Winfield & Associates Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10200795

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David Burstin

Mailing Address 1435 Bennington Avenue

City State Zip Code  
Pittsburgh PA 15217-1138

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

Name of Employer Occupation  
Brand, Burstin, Runnette General Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 05 / 2011

**Transaction ID:** 10200805

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald L. Compton

Mailing Address 712 Forrest Dr South

City State Zip Code  
Sellersburg IN 47172-1717

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

Name of Employer Occupation  
State Farm Insurance Companies AGENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 06 / 2011

**Transaction ID:** 10200807

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **550.00**

**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 24 / 192  
(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

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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. William V. Irons

Mailing Address 150 Prospect Rd

City State Zip Code  
Wakefield RI 02879-7044

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

Name of Employer Irons & Associates Occupation President/Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 243.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200816

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Marcus T. Henderson, Sr.

Mailing Address 109 Barrington Court East

City State Zip Code  
Franklin TN 37067

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

Name of Employer Henderson Financial Group, Inc. Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200821

Amount of Each Receipt this Period  
84.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Kenneth P. Gross, II

Mailing Address 8201 Sharonway Ct.

City State Zip Code  
Glen Allen VA 23060-3264

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

Name of Employer Capitol Financial Solution Occupation Senior Financial Advisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 07 / 2011

**Transaction ID:** 10200840

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **626.00**

**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 25 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Richard Lee Harlow

Mailing Address 12250 Angel Wing Ct

City Reston State VA Zip Code 20191-1102

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

Name of Employer The Harlow Group, LLC Occupation Managing Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt 07 / 10 / 2011

Transaction ID: 10200852

Amount of Each Receipt this Period 84.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Daryl W. Broberg

Mailing Address 1531 3rd St.

City Sutherland State NE Zip Code 69165

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

Name of Employer Life Investor Ins. G. of America Occupation Areas Sales Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 10 / 2011

Transaction ID: 10200853

Amount of Each Receipt this Period 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Gordon E. Kagawa

Mailing Address 555 Ahakea St

City Honolulu State HI Zip Code 96816

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

Name of Employer Occidental Underwriters of Hawaii, Ltd Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 07 / 2011

Transaction ID: 10200859

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **634.00**

**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 26 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Steven Paul Cassel

Mailing Address 12706 Fowler Cir

City

Omaha

State

NE

Zip Code

68164-1725

FEC ID number of contributing federal political committee.

C

Name of Employer  
Lincoln Financial Advisors

Occupation  
Insurance Agent

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10200867

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Martin Montefel

Mailing Address 16932 SW 5th Way

City

Weston

State

FL

Zip Code

33326-1564

FEC ID number of contributing federal political committee.

C

Name of Employer  
Marty Montefel

Occupation  
General Agent

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10200869

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Dennis C. H. Kim

Mailing Address 94-309 Maialohe Place

City

Mililani

State

HI

Zip Code

96789-2167

FEC ID number of contributing federal political committee.

C

Name of Employer  
Dennis C.H. Kim & Assoc.

Occupation  
Financial Consultant

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2011

Transaction ID: 10200882

Amount of Each Receipt this Period

300.00

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

392.00

**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 27 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael P. Victorino

Mailing Address 840 Alua St., #103

City State Zip Code  
Wailuku HI 96793

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

Name of Employer Occupation  
Mutual Underwriters Insurance Consultant

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 362.50

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2011

Transaction ID: 10200884

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Douglas B. Massey

Mailing Address PO Box 60707

City State Zip Code  
San Angelo TX 76906

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

Name of Employer Occupation  
Doug Massey Financial Services Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10200886

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Katherine M A Forrester-Wirth

Mailing Address 6453 Oxford Rd N

City State Zip Code  
Shakopee MN 55379

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

Name of Employer Occupation  
NMFN Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 07 / 2011

Transaction ID: 10200894

Amount of Each Receipt this Period

300.00

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

600.00

**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 28 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Jan R. Yamasaki

Mailing Address 1340 Laukahi Street

City State Zip Code  
Honolulu HI 96821-1408

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

Name of Employer Occupation  
Pacific Century Life Insurance Corp. President

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 07 / 2011

Transaction ID: 10200902

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Adelia C. Chung

Mailing Address 190 Dowsett Avenue

City State Zip Code  
Honolulu HI 96817-1108

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

Name of Employer Occupation  
Spectrum Wealth Management Agent General

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 08 / 2011

Transaction ID: 10200931

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Duane W. Biede

Mailing Address 1705 Highland Dr.

City State Zip Code  
Hasting NE 68901-2426

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

Name of Employer Occupation  
self employed AGENT

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 247.50

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10200939

Amount of Each Receipt this Period

45.00

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

795.00

**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 29 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Robert D. Thunselle

Mailing Address 4020 Gannett #3

City Casper State WY Zip Code 82609-2351

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

Name of Employer Thrivent Financial Occupation District Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 07 / 10 / 2011

Transaction ID: 10200942

Amount of Each Receipt this Period 30.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Lawrence L. Kitts

Mailing Address 10842 Mount CurveRd

City Eden Prairie State MN Zip Code 55347-2908

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

Name of Employer Horizon Agency Inc. Occupation Agency Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 07 / 10 / 2011

Transaction ID: 10200954

Amount of Each Receipt this Period 42.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Stephen D. Estler

Mailing Address 2177 NE 63 St.

City Fort Lauderdale State FL Zip Code 33308-1330

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

Name of Employer Mass Mutual Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 10 / 2011

Transaction ID: 10200963

Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 222.00

**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 30 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas R. Clark

Mailing Address 1603 22nd St Ste 202

City State Zip Code  
West Des Moines IA 50266-1410

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

Name of Employer Compensation Designs Occupation General Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200970

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. R. Art Lubomski

Mailing Address 4137 Beech Ave

City State Zip Code  
Erie PA 16508-3118

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

Name of Employer Lincoln Financial Network Occupation Registered Rep.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200974

Amount of Each Receipt this Period  
21.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joseph S. Pantozzi

Mailing Address PO Box 95063

City State Zip Code  
Las Vegas NV 89193

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

Name of Employer Alpha & Omega Financial Svcs. Occupation Brokerage Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 243.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10200984

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 163.00

**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 31 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steven R. Markham

Mailing Address 4 Alae St.

City State Zip Code  
Hilo HI 96720

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

Name of Employer Markham Insurance Services      Occupation OWNER

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
MM / DD / YYYY  
07 / 07 / 2011

**Transaction ID:** 10200993

Amount of Each Receipt this Period  
125.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steven Marc Dugal

Mailing Address 12238 E Millburn Ave

City State Zip Code  
Baton Rouge LA 70815-6742

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

Name of Employer Northwestern Mutual      Occupation Managing Partner

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 08 / 2011

**Transaction ID:** 10200997

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. George B. Bryce

Mailing Address 2730 Ardon Ln

City State Zip Code  
Casper WY 82609-3902

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

Name of Employer The Insurance Agency      Occupation General Agent

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10201005

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **667.00**

**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 32 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Michael O. Brown

Mailing Address 6512 NE 113

City Edmond State OK Zip Code 73013-8351

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

Name of Employer MassMutual Financial Group Occupation AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201012

Amount of Each Receipt this Period 75.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. David L. Stratton

Mailing Address 13115 Beach Cir.

City Anchorage State AK Zip Code 99515-3748

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

Name of Employer StrattonTurner LLC Occupation Managing Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1155.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201013

Amount of Each Receipt this Period 210.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Byron Hyatt Erstad, Jr.

Mailing Address 2510 S Nantucket Way

City Boise State ID Zip Code 83706-5095

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

Name of Employer Erstad & Company Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 487.20

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201029

Amount of Each Receipt this Period 84.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **369.00**

**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 33 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Joel K. Williamson

Mailing Address 1750 Cord 16

City State Zip Code  
Tulia TX 79088

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

Name of Employer Financial Solutions Occupation Financial Solutions

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201040

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth E. Knox

Mailing Address Unit 9, 10 East St

City State Zip Code  
Providence RI 02906-3069

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

Name of Employer Penn Mutual Occupation Regional Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201044

Amount of Each Receipt this Period  
50.40

**C.** Full Name (Last, First, Middle Initial)  
Mr. Charles W. Potts

Mailing Address 12725 St. Andrews Ter

City State Zip Code  
Oklahoma City OK 73120-8807

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

Name of Employer MassMutual Financial Group Occupation Financial Advisor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 379.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201046

Amount of Each Receipt this Period  
51.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **131.40**

**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 34 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Debbie K. Paul	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 4001 MacArthur Blvd Suite 300	<b>Transaction ID:</b> 10201059
	City State Zip Code Newport Beach CA 92660-2510	Amount of Each Receipt this Period 42.50
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Securian Financial Network	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 382.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Richard D. Vonderlage	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 15202 Sprague St	<b>Transaction ID:</b> 10201075
	City State Zip Code Omaha NE 68116	Amount of Each Receipt this Period 84.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Heritage Financial Svcs.	Occupation Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Theodore H. Heidrich	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 2 Acorn Ln	<b>Transaction ID:</b> 10201079
	City State Zip Code Scarborough ME 04074-7518	Amount of Each Receipt this Period 90.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Modern Woodmen of America	Occupation Agency Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 522.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>216.50</b>
<b>TOTAL</b> 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 35 / 192  
(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

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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Melvin H. Saiki

Mailing Address 95-745 Lauaki St.

City Mililani State HI Zip Code 96789-2909

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

Name of Employer John Hancock Life Insurance  
Occupation Regional Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 08 / 2011  
**Transaction ID: 10201089**  
Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Miles K. Moriyama

Mailing Address 907 Birch Street #301

City Honolulu State HI Zip Code 96814

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

Name of Employer Miles K. Moriyama  
Occupation Agent/Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 08 / 2011  
**Transaction ID: 10201093**  
Amount of Each Receipt this Period 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. James O. Geitgey

Mailing Address 279 Glenmore Dr.

City Springfield State OH Zip Code 45503

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

Name of Employer Geitgey Financial Services  
Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.25

Date of Receipt 07 / 10 / 2011  
**Transaction ID: 10201116**  
Amount of Each Receipt this Period 22.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 522.50

**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 36 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. David S. Dickenson, II

Mailing Address 7535 Brigham Road

City State Zip Code  
Gates Mills OH 44040-9782

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

Name of Employer Occupation  
Dickenson & Associates General Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 462.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201121

Amount of Each Receipt this Period  
84.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Troy J. Shreve

Mailing Address 7100 S 45th Street

City State Zip Code  
Lincoln NE 68516-3016

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

Name of Employer Occupation  
Benefit Management Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 462.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201127

Amount of Each Receipt this Period  
84.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Darren Scott Mason

Mailing Address 178 Shorecliff Rd

City State Zip Code  
Corona del Mar CA 92625-2648

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

Name of Employer Occupation  
Advanced Benefit Systems General Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 374.96

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201129

Amount of Each Receipt this Period  
41.66

**SUBTOTAL** of Receipts This Page (optional) ..... ► 209.66

**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 37 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Glen L. Baecker

Mailing Address 6607 Brodie Lane #1124

City Austin State TX Zip Code 78745

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

Name of Employer National Farm Life Occupation Insurance Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 10 / 2011  
**Transaction ID:** 10201149  
 Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gary T. Wolff

Mailing Address 131 Barstow Lane

City Tolland State CT Zip Code 06084-2547

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

Name of Employer Valmark Securities, Inc. Occupation Insurance Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 07 / 10 / 2011  
**Transaction ID:** 10201166  
 Amount of Each Receipt this Period 40.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ben Kronish

Mailing Address 205 W 89th St #2H

City New York State NY Zip Code 10024-1829

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

Name of Employer Kronish Associates Occupation AGENT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 07 / 10 / 2011  
**Transaction ID:** 10201172  
 Amount of Each Receipt this Period 50.00

**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 38 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. H. Larry Fortenberry

Mailing Address 123 Northshore Pt

City State Zip Code  
Madison MS 39110-7272

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

Name of Employer Executive Planning Group  
Occupation President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201176

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Arthur Ivan Swanson

Mailing Address 2270 E. 24TH PL

City State Zip Code  
Yuma AZ 85365-3245

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

Name of Employer New York Life  
Occupation AGENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 243.60

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201182

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Donald T. Fulton

Mailing Address 43 Bridleshire Rd

City State Zip Code  
Newark DE 19711-6217

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

Name of Employer New York Life  
Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 562.50

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201184

Amount of Each Receipt this Period

62.50

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

179.50

**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 39 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Wayne E. Thomas

Mailing Address 29 Cycas Drive

City State Zip Code  
Kenner LA 70065

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

Name of Employer: Thomas Financial Group  
Occupation: Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10201216  
Amount of Each Receipt this Period: 42.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Angelo Assad Haddad

Mailing Address 354 Garnsey Ave

City State Zip Code  
Bakersfield CA 93309-1849

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

Name of Employer: New York Life  
Occupation: Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 467.50

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10201228  
Amount of Each Receipt this Period: 85.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Aldous Kawaiiani Paalani

Mailing Address 2219 Kaululaau Street

City State Zip Code  
Honolulu HI 96813

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

Name of Employer: Equity Insurance Services, Inc  
Occupation: Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10201236  
Amount of Each Receipt this Period: 62.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 189.50

**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 40 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Robert C. Rockett, Jr.

Mailing Address 1221 Willapa First St

City State Zip Code  
Raymond WA 98577

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

Name of Employer R & S Financial Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201247

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffery J. Johnston

Mailing Address 1425 Lakeside Ct

City State Zip Code  
Yakima WA 98902-7354

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

Name of Employer New York Life Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201252

Amount of Each Receipt this Period  
42.50

**C.**

Full Name (Last, First, Middle Initial)  
Mr. James R. Coviello

Mailing Address 3412 Valley Road

City State Zip Code  
Winston Salem NC 27106-2529

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

Name of Employer Northwestern Mutual Occupation Financial Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.10

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201268

Amount of Each Receipt this Period  
27.50

**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 41 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Anthony D. Miller		Date of Receipt	
	Mailing Address 4502 Hi-Line Dr		M M / D D / Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10201269
	Billings	MT	59106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		84.00	
Name of Employer Retirement Solutions		Occupation Financial Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 487.20		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Robert M. Roach		Date of Receipt	
	Mailing Address 1287 Harrison Pond Drive		M M / D D / Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10201283
	Columbus	OH	43215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		125.00	
Name of Employer NMFN - Kemelgor Fin. Group		Occupation Wealth Management Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Richard A. Koob		Date of Receipt	
	Mailing Address 301 Frederick Street		M M / D D / Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10201285
	Waukesha	WI	53186-8116	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.40	
Name of Employer The Holter Financial Group		Occupation Financial Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 386.40		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	259.40
<b>TOTAL</b> 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 42 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gregory M. Telge

Mailing Address 1655 North River Road

City State Zip Code  
Manchester NH 03104

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

Name of Employer Occupation  
Northwestern Mutual OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201298

Amount of Each Receipt this Period  
42.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Matthew S. Tassej

Mailing Address 5 Reggio Ave.

City State Zip Code  
Old Orchard Beach ME 04064-2709

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

Name of Employer Occupation  
Burwell & Burwell Sales Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 696.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201312

Amount of Each Receipt this Period  
120.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peter Fulchiron

Mailing Address 411 San Andreas Drive

City State Zip Code  
Novato CA 94945-1237

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

Name of Employer Occupation  
Allstate Life Insurance Company Agency Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201314

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **212.00**

**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 43 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Neil M. Cubberley

Mailing Address P.O. BOX 5109

City State Zip Code  
SEVIERVILLE TN 37864-5109

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

Name of Employer Occupation  
Cubberley Agency, Inc. OWNER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201316

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kent A. Bennett

Mailing Address 280 Hollow Road

City State Zip Code  
Muncy PA 17756-5789

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

Name of Employer Occupation  
Kent A. Bennett & Assoc., Inc. General Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201318

Amount of Each Receipt this Period  
87.50

**C.** Full Name (Last, First, Middle Initial)  
Ms. Iris H. Kuwaye

Mailing Address 9 Lei St.

City State Zip Code  
Hilo HI 96720-4202

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

Name of Employer Occupation  
State Farm Insurance Companies Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 08 / 2011

**Transaction ID:** 10201322

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 367.50

**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 44 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Kevin J. Leahy	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 2141 Llewellyn Pkwy	<b>Transaction ID:</b> 10201325
	City State Zip Code Forked River NJ 08731-3818	Amount of Each Receipt this Period 21.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Allstate Life Ins. Co.	Occupation Financial Services Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.60	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Mark B. Schwendeman	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 427 4th St	<b>Transaction ID:</b> 10201346
	City State Zip Code Marietta OH 45750-2004	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer The Schwendeman Agency IN-C.	Occupation PRESIDENT\oWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Garry S. Burry	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 622 Woodlake Drive	<b>Transaction ID:</b> 10201362
	City State Zip Code Louisville KY 40245-5121	Amount of Each Receipt this Period 85.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Northwestern Mutual	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 493.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>166.00</b>
<b>TOTAL</b> 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 45 / 192

(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

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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. John W. Bounds

Mailing Address 1434 South Lamar Blvd.

City State Zip Code  
Oxford MS 38655-4738

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

Name of Employer Occupation  
Bounds & Associates Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 378.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201368

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert M. Nelson

Mailing Address 14712 Shirley Street

City State Zip Code  
Omaha NE 68144-2144

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

Name of Employer Occupation  
Grace-Mayer Ins. Agency Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1155.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201381

Amount of Each Receipt this Period  
210.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Carl James Maus

Mailing Address 432 Fort Saratoga

City State Zip Code  
Saint Charles MO 63303

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

Name of Employer Occupation  
Insurance and Investment Services Career Development Supervisor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 487.20

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201386

Amount of Each Receipt this Period  
84.00

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

336.00

**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 46 / 192  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Richard L. Hill

Mailing Address 2611 Alvo Road

City State Zip Code  
Seward NE 68434-8049

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

Name of Employer self employed Occupation  
Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10201396

Amount of Each Receipt this Period  
42.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Randy L. Scritchfield

Mailing Address 10105 Nightingale St.

City State Zip Code  
Gaithersburg MD 20882-4019

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

Name of Employer Montgomery Financial Group, Inc. Occupation  
Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10201399

Amount of Each Receipt this Period  
105.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gary M. Lane

Mailing Address 925 Highland Terrace NE

City State Zip Code  
Atlanta GA 30306

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

Name of Employer Northwestern Mutual Occupation  
Financial Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10201411

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 197.00

**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 47 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Lawrence E. Lounds

Mailing Address 2477 Valley Oaks Circle

City State Zip Code  
Flint MI 48532

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

Name of Employer Occupation  
Security 1st Benefits Corp. CEO

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1155.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201414

Amount of Each Receipt this Period

210.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Donald L. Schleicher

Mailing Address 2408 N Elinor St

City State Zip Code  
Appleton WI 54914-2010

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

Name of Employer Occupation  
Lifetime Retirement Planning President/Owner

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 288.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201416

Amount of Each Receipt this Period

36.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. John R. Dean

Mailing Address 1700 S.W. 15th Ave.

City State Zip Code  
Willmar MN 56201

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

Name of Employer Occupation  
The Managed Assets Group Insurance Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201423

Amount of Each Receipt this Period

50.00

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

296.00

**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 48 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Edward A. Zabielski, Jr.

Mailing Address 104 Clay Ct.

City Landenberg State PA Zip Code 19350

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

Name of Employer Edward A. Zabielski Jr & Co. Occupation President/Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1155.00

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10201427

Amount of Each Receipt this Period 210.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Laurene B. Prevette

Mailing Address 741 Romany Road

City Charlotte State NC Zip Code 28203-4849

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

Name of Employer Equity Brokerage, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 237.50

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10201429

Amount of Each Receipt this Period 27.50

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Eugene H. Burkett

Mailing Address PO Box 921

City Felton State CA Zip Code 95018-0921

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

Name of Employer Insurance Link Occupation Sales Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10201442

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 262.50

**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 49 / 192  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. David V. Dellinger

Mailing Address 6444 Pretty Girl Court

City State Zip Code  
Citrus Heights CA 95621

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

Name of Employer Occupation  
NAIFA - California Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10201444

Amount of Each Receipt this Period  
42.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Rae Lee Olson

Mailing Address 218 N El Monte Ave

City State Zip Code  
Los Altos CA 94022-2354

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

Name of Employer Occupation  
The Vita Companies Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 467.50

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10201445

Amount of Each Receipt this Period  
85.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Kelli J. Carmichael

Mailing Address 2914 S Coffman

City State Zip Code  
Casper WY 82604-4733

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

Name of Employer Occupation  
Lincoln Financial Advisors Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 227.50

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10201460

Amount of Each Receipt this Period  
22.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► **149.50**

**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 50 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Brian R. Phares

Mailing Address 1420 Hackberry Road

City State Zip Code  
North Platte NE 69101-6841

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

Name of Employer: Phares Financial Services  
Occupation: Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10201466**  
Amount of Each Receipt this Period: 75.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Bob E. Geis

Mailing Address 907 Franklin St

City State Zip Code  
Rapid City SD 57701-4522

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

Name of Employer: Western Dakota Insurors, Inc  
Occupation: Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.50

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10201484**  
Amount of Each Receipt this Period: 22.50

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Karl Erik Hansen

Mailing Address 900 North Shoreline Boulevard

City State Zip Code  
Mountain View CA 94043-1933

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

Name of Employer: The Vita Companies  
Occupation: Brokerage Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 467.50

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10201499**  
Amount of Each Receipt this Period: 85.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **182.50**

**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 51 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Michael P. Victorino

Mailing Address 840 Alua St., #103

City State Zip Code  
Wailuku HI 96793

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

Name of Employer Occupation  
Mutual Underwriters Insurance Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201501

Amount of Each Receipt this Period  
12.50

**B.**

Full Name (Last, First, Middle Initial)

Mr. Johnny Jon Johnson

Mailing Address 3770 N Frandon Avenue

City State Zip Code  
Meridian ID 83646

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

Name of Employer Occupation  
Regence BlueShield of Idaho Boise District Sales Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 261.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201502

Amount of Each Receipt this Period  
45.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Bruce H. Kantor

Mailing Address 2901 Cross Country Rd

City State Zip Code  
Charlotte NC 28270-0600

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

Name of Employer Occupation  
Kantor & Associates BROKER

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 237.30

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201505

Amount of Each Receipt this Period  
42.00

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

99.50

**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 52 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Jack H. Curtis

Mailing Address 1508 Morning Glory Cr.

City State Zip Code  
Tupelo MS 38801

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

Name of Employer Occupation  
Jack Curtis Agency Branch Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201508

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Johanna Margaret-Mary Raisch

Mailing Address 7864 Highlander Dr

City State Zip Code  
Anchorage AK 99518

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

Name of Employer Occupation  
NAIFA - Alaska Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201512

Amount of Each Receipt this Period  
42.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Sally A. Bisgard

Mailing Address 529 N. Main

City State Zip Code  
Waubay SD 57273

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

Name of Employer Occupation  
Thrivent Financial for Lu-therans District Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201523

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **126.00**

**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 53 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. David E. Smithkey

Mailing Address 9451 Heddy Drive

City State Zip Code  
Flushing MI 48433-1051

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

Name of Employer Security First Benefits Corp. Occupation President/Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201532

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Hollis O. Inglett, Jr.

Mailing Address 31 Cone Rd

City State Zip Code  
Ormond Beach FL 32174-7903

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

Name of Employer Hayward Brown Inc. Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201544

Amount of Each Receipt this Period  
42.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Harold A. Gillet

Mailing Address 8711 Mashie Lane

City State Zip Code  
Missoula MT 59808-5412

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

Name of Employer Hal Gillet Agency, LLC Occupation General Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 334.20

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201550

Amount of Each Receipt this Period  
36.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **128.00**

**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 54 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Thomas R. Laster

Mailing Address 1713 Elmhurst Ave

City Nichols Hills State OK Zip Code 73120

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

Name of Employer Rogers Benefit Group Occupation Regional Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201556

Amount of Each Receipt this Period  
50.40

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Russell A. Smith

Mailing Address 22928 San Joaquin Drive East

City Canyon Lake State CA Zip Code 92587-7831

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

Name of Employer Torimax Financial Group, Inc. Occupation President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201560

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. John C. Johns

Mailing Address 5141 Lilly Rd.

City Hazlehurst State MS Zip Code 39083

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

Name of Employer Southern Farm Bureau Life Insurance Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 995.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201565

Amount of Each Receipt this Period  
120.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **220.40**

**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 55 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles E. Jackson, Jr.  
Mailing Address 53 Jordan Lane

City State Zip Code  
Mobile AL 36608-2624

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

Name of Employer Occupation  
Guardian Financial Representative

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 382.50

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10201576  
Amount of Each Receipt this Period: 42.50

**B.** Full Name (Last, First, Middle Initial)  
Ms. Laura P. DeGolier  
Mailing Address 114 S. Main Street  
PMB 301

City State Zip Code  
Fond Du Lac WI 54935-4229

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

Name of Employer Occupation  
DeGolier Insurance Services, LLC OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 431.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10201583  
Amount of Each Receipt this Period: 57.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gregory S. Anderson  
Mailing Address 2187 Eagle Trace Ln.

City State Zip Code  
Woodbury MN 55129

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

Name of Employer Occupation  
NMFN/The Bohannon Group Financial Representative

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10201588  
Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 149.50

**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 56 / 192

(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Wayne Miles Eckman

Mailing Address 701 W 2350 N

City State Zip Code  
Woods Cross UT 84087-1070

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

Name of Employer Occupation  
State Farm Insurance Companies AGENT

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201594

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. James A. Buchan

Mailing Address 5716 W Orlando Cir

City State Zip Code  
Broken Arrow OK 74011-1149

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

Name of Employer Occupation  
Northwestern Mutual AGENT

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 580.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201601

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. D. Neal Smith

Mailing Address 3321 Avenue I #1

City State Zip Code  
Scottsbluff NE 69361-4586

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

Name of Employer Occupation  
State Farm Insurance Companies Insurance Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 206.25

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201612

Amount of Each Receipt this Period  
37.50

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

179.50

**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 57 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Russell D. Jenkins

Mailing Address 1988 Burlingame Rd.

City State Zip Code  
Emporia KS 66801

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

Name of Employer Occupation  
Northwestern Mutual Fin. Network Financial Representative

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 386.40

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201613

Amount of Each Receipt this Period

84.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Paul A. Hagemann

Mailing Address 19800 S.W. Tile Flat Road

City State Zip Code  
Beaverton OR 97007-8700

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

Name of Employer Occupation  
State Farm Insurance Companies Insurance Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 340.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201616

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Carl F. Mehlhop

Mailing Address 89 Van Ripper Ln

City State Zip Code  
Orinda CA 94563-1129

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

Name of Employer Occupation  
Northwestern Mutual Special Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201621

Amount of Each Receipt this Period

42.00

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

168.50

**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 58 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Mitchell B. Glover	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 6700 Old Darby Trail	<b>Transaction ID:</b> 10201622
	City State Zip Code Ada MI 49301-8360	Amount of Each Receipt this Period 84.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Northwestern Mutual Financial Network Occupation Managing Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 462.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Paul E. Budke	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 20045 SW Aten Rd	<b>Transaction ID:</b> 10201642
	City State Zip Code Beaverton OR 97007-9784	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Paul E. Budke Insurance Services Occupation AGENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Shannon J. Enders	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 5677 Westwood Drive	<b>Transaction ID:</b> 10201644
	City State Zip Code Muskegon MI 49441	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Lakeshore Employee Benefits Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 336.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	156.00
<b>TOTAL</b> 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 59 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. David M. Koll		Date of Receipt	
	Mailing Address 1612 S. 152nd Street		M M / D D / Y Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10201653
	Omaha	NE	68144-5121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		208.00	
Name of Employer Mutual of Omaha		Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1664.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. William D. Burke		Date of Receipt	
	Mailing Address 2216 Nelda Way		M M / D D / Y Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10201655
	Alamo	CA	94507	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		42.00	
Name of Employer Pacific Life		Occupation Regional Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 231.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Steven R. Markham		Date of Receipt	
	Mailing Address 4 Alae St.		M M / D D / Y Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10201663
	Hilo	HI	96720	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer Markham Insurance Services		Occupation OWNER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 625.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> 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 60 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial) Mr. Lawrence Edward Sneed		Date of Receipt
Mailing Address 5005 Woodminster		<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
City State Zip Code Oakland CA 94601		<input type="text"/> 07 / <input type="text"/> 10 / <input type="text"/> 2011
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10201665
Name of Employer State Farm Insurance Companies		Amount of Each Receipt this Period
Occupation Agent		<input type="text"/> 42.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 231.00

**B.**

Full Name (Last, First, Middle Initial) Mr. John J. Bradley		Date of Receipt
Mailing Address 148 Grove 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
City State Zip Code Westwood MA 02090		<input type="text"/> 07 / <input type="text"/> 10 / <input type="text"/> 2011
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10201666
Name of Employer Bradley Insurance Agency, Inc		Amount of Each Receipt this Period
Occupation President		<input type="text"/> 83.33
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 458.30

**C.**

Full Name (Last, First, Middle Initial) Mr. Daniel L. Rust		Date of Receipt
Mailing Address 114 W. Arnold		<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
City State Zip Code Bozeman MT 59715-6129		<input type="text"/> 07 / <input type="text"/> 10 / <input type="text"/> 2011
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10201669
Name of Employer State Farm Insurance Companies		Amount of Each Receipt this Period
Occupation General Agent		<input type="text"/> 90.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text"/> 990.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 215.33
<b>TOTAL</b> 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 61 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Dale F. Mamele

Mailing Address 410 Steeple Crest North

City Irmo State SC Zip Code 29063-8244

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

Name of Employer Summer Insurance Agency, LLC Occupation PRINCIPAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 10 / 2011

Transaction ID: 10201674

Amount of Each Receipt this Period 30.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Alan J. Cyr

Mailing Address 1253 w Rudisill Blvd

City Fort Wayne State IN Zip Code 46807-2144

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

Name of Employer Cyr & Cyr Insurance Services Occupation PARTNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 07 / 10 / 2011

Transaction ID: 10201679

Amount of Each Receipt this Period 60.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Michael J. Ables

Mailing Address 237 N Beechnut

City Nipomo State CA Zip Code 93444

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

Name of Employer Michael Ables Insurance Services Occupation AGENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 07 / 10 / 2011

Transaction ID: 10201696

Amount of Each Receipt this Period 42.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 132.50

**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 62 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Walter J. Scott

Mailing Address 1022 Washington Ave

City State Zip Code  
Oshkosh WI 54901-5354

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

Name of Employer Occupation  
W. F. Coe & Associates, LLC Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 420.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201701

Amount of Each Receipt this Period  
50.40

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mitchell W. Ostrove

Mailing Address 4 New King Street

City State Zip Code  
White Plains NY 10604-1202

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

Name of Employer Occupation  
The Ostrove Group Inc. General Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 462.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201710

Amount of Each Receipt this Period  
84.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Peter K. Howard

Mailing Address 326 Rosemary Lane

City State Zip Code  
Danville VA 24541-4526

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

Name of Employer Occupation  
Tower Square Securities Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 214.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201717

Amount of Each Receipt this Period  
21.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **155.40**

**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 63 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Terry M. Kaltenbach

Mailing Address 1358 Ahlrich Ave

City State Zip Code  
Encintas CA 92024-4029

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

Name of Employer Occupation  
Best Practices of America VP of Recruiting and Life Sales

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201719

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Teresa L. Seefeldt

Mailing Address 643 Gaelic Court

City State Zip Code  
Apopka FL 32712

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

Name of Employer Occupation  
Rogers Benefit Group Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201727

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. David T. Koppa

Mailing Address 1105 Via Bolzano

City State Zip Code  
Santa Barbara CA 93111-1053

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

Name of Employer Occupation  
Cornerstone Insurance Services Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201733

Amount of Each Receipt this Period

50.00

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

225.00

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

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

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

FOR LINE NUMBER: PAGE 64 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert Eddy, Jr.  
Mailing Address 203 Autumn Oak Bend  
City State Zip Code  
Lafayette LA 70508-8004  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Prudential Financial DBA - The Pinnacle Occupation Financial Planner  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 467.50  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10201768  
Amount of Each Receipt this Period 85.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sandra E. Henderson  
Mailing Address 207 E Moody Ave  
City State Zip Code  
Fresno CA 93720-1506  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Plan Financial Occupation Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10201798  
Amount of Each Receipt this Period 25.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gary H. Pendleton  
Mailing Address 2607 Oberlin Rd #100  
City State Zip Code  
Raleigh NC 27608-1319  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pendleton Fin. Consulting, Inc. Occupation President/Owner  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 470.81  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10201804  
Amount of Each Receipt this Period 83.33

**SUBTOTAL** of Receipts This Page (optional) ..... ► 193.33  
**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 65 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Peter D. Holler

Mailing Address 112 Evergreen Pl

City State Zip Code  
Bristol TN 37620

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

Name of Employer Occupation  
SBS Services President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201823

Amount of Each Receipt this Period  
42.50

**B.** Full Name (Last, First, Middle Initial)  
Mr. Leonard Martin

Mailing Address 98 Tennyson Rd

City State Zip Code  
Warwick RI 02888-1818

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

Name of Employer Occupation  
Leonard Martin & Associates Inc OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 487.20

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201830

Amount of Each Receipt this Period  
84.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Angela S. Envick

Mailing Address 1223 Pamela

City State Zip Code  
Holdrege NE 68949

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

Name of Employer Occupation  
Principal Financial Group Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.50

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10201842

Amount of Each Receipt this Period  
22.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► **149.00**

**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 66 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. F. Nicholas Kelley	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 1323 S. 174 St.	<b>Transaction ID:</b> 10201863
	City State Zip Code Omaha NE 68130	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Kelley Financial Services, Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 428.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Jack P. Dewald, Jr.	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 10305 W Shrewsbury Rn	<b>Transaction ID:</b> 10201868
	City State Zip Code Collierville TN 38017-0237	Amount of Each Receipt this Period 12.50
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Agency Services Incorporated	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Lawrence J. Stack	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 28411 Northwestern Hgwy Suite 1300	<b>Transaction ID:</b> 10201870
	City State Zip Code Southfield MI 48034	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Michigan Financial	Occupation Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>304.50</b>
<b>TOTAL</b> 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 67 / 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Randall D. Kaufmann		Date of Receipt
	Mailing Address 356 Equus Drive		<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 07 / 10 / 2011
	City	State	Zip Code
	Camp Hill	PA	17011-8357
	FEC ID number of contributing federal political committee.		Transaction ID: 10201872
Name of Employer Kaufmann & Associates, LLC		Occupation Special 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"/> 60.00
		<input type="text"/> 480.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Jeri L. Regan		Date of Receipt
	Mailing Address 2616 No. 100th Avenue		<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 07 / 10 / 2011
	City	State	Zip Code
	Omaha	NE	68134-5510
	FEC ID number of contributing federal political committee.		Transaction ID: 10201881
Name of Employer MassMutual Financial Group		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"/> 27.50
		<input type="text"/> 220.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Amy K. Byrne		Date of Receipt
	Mailing Address 900 N Shoreline Blvd		<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 07 / 10 / 2011
	City	State	Zip Code
	Mountain View	CA	94043-1933
	FEC ID number of contributing federal political committee.		Transaction ID: 10201897
Name of Employer Vita Insurance Associates, Inc.		Occupation Insurance 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"/> 50.00
		<input type="text"/> 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 137.50
<b>TOTAL</b> 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 68 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Queenie M. Chee

Mailing Address 833 Waika Place

City State Zip Code  
Honolulu HI 96825-1061

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

Name of Employer Occupation  
John Hancock Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 378.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201905

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Daniel D. Duren

Mailing Address 6537 S. 34th Street

City State Zip Code  
Lincoln NE 68516-5428

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

Name of Employer Occupation  
Benefit Management Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201906

Amount of Each Receipt this Period  
42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Delford G. Britton

Mailing Address 1736 Jefferson Street

City State Zip Code  
Napa CA 94559-1703

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

Name of Employer Occupation  
MassMutual Financial Group AGENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10201919

Amount of Each Receipt this Period  
42.00

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

126.00

**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 69 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Donald T. Brown		Date of Receipt	
	Mailing Address 40 Fayette St. Unit #5		M M / D D / Y Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10201934
	Perth Amboy	NJ	08861-4207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer MetLife		Occupation Agency Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Joseph G. Marrazzo, Jr.		Date of Receipt	
	Mailing Address 505 S. Arlington Ave.		M M / D D / Y Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10201949
	Harrisburg	PA	17109	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		45.00	
Name of Employer Marrazzo and Associates Financial Grou		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 247.50		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Daniel L. Lawrence		Date of Receipt	
	Mailing Address 5553 Peters Drive		M M / D D / Y Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10201970
	West Bend	WI	53095-8301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		60.00	
Name of Employer Modern Woodmen of America		Occupation Agency Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	130.00
<b>TOTAL</b> 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 70 / 192  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Fred Kazmierski

Mailing Address 1116 Grand Ave  
Suite 204

City State Zip Code  
Billings MT 59102-4282

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

Name of Employer Occupation  
MMA Financial Services Insurance Agent

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10201976

Amount of Each Receipt this Period  
45.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas W. Dzik

Mailing Address 530 Dodge Lane

City State Zip Code  
St. Paul MN 55118-4802

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

Name of Employer Occupation  
North Star Resource Group Insurance Agent

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10201981

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark A. Chandik

Mailing Address 42 Ritz Cove Drive

City State Zip Code  
Dana Point CA 92629-4228

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

Name of Employer Occupation  
FDP Wealth Management Agent/Owner

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
462.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202007

Amount of Each Receipt this Period  
84.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **179.00**

**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 71 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Casey C. Knake	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 2902 Mach I Dr.	<b>Transaction ID:</b> 10202008
	City Norfolk State NE Zip Code 68701-3238	Amount of Each Receipt this Period 84.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Heritage Financial Services, LLC	Occupation Investment Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Timothy J. Brungardt	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 314 N. 5th.	<b>Transaction ID:</b> 10202009
	City Norfolk State NE Zip Code 68701-4093	Amount of Each Receipt this Period 84.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Heritage Financial Services	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Dennis L. Helgeson	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 2601 Bel Air Drive	<b>Transaction ID:</b> 10202014
	City Minot State ND Zip Code 58703-1749	Amount of Each Receipt this Period 25.20
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer North American Company	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>193.20</b>
<b>TOTAL</b> 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 72 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Michael J. Milburn		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 2332 Flagstaff Dr.		<b>Transaction ID:</b> 10202019		
	City Longmont	State CO	Zip Code 80501	Amount of Each Receipt this Period 45.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Mutual of Omaha Companies	Occupation AGENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 247.50			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Albert T. Hurst, Jr.		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 1901 S. Broadway St.		<b>Transaction ID:</b> 10202027		
	City Little Rock	State AR	Zip Code 72206-1351	Amount of Each Receipt this Period 84.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Modern Woodmen of America	Occupation Agency Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 487.20			

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Katharine F. Clark		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 110 Cross Creek Circle		<b>Transaction ID:</b> 10202031		
	City Macon	State GA	Zip Code 31210	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Peachtree Planning	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	179.00
<b>TOTAL</b> 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 73 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Brenda D. Doty		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 107 Topaz		<b>Transaction ID:</b> 10202056		
	City Horseshoe Bend	State AR	Zip Code 72512	Amount of Each Receipt this Period 51.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Doty Group	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 391.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Curtis L. Matlin		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 707 Skokie Blvd. #700		<b>Transaction ID:</b> 10202067		
	City Northbrook	State IL	Zip Code 60062-2842	Amount of Each Receipt this Period 21.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer self employed	Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Thomas D. McNeil		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 49 Hagen Oaks Ct		<b>Transaction ID:</b> 10202072		
	City Alamo	State CA	Zip Code 94507-2206	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Midland National Life	Occupation Regional Vice President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	122.00
<b>TOTAL</b> 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 74 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Steven Dwayne Gifford

Mailing Address PO Box 5027

City

Ashland

State

KY

Zip Code

41105-5027

FEC ID number of contributing federal political committee.

C

Name of Employer  
Mutual of Omaha Companies

Occupation  
General Manager

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

243.60

Date of Receipt

MM / DD / YYYY  
07 / 10 / 2011

Transaction ID: 10202076

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jaford D. Burgad

Mailing Address 3842 N. 10th St.

City

Fargo

State

ND

Zip Code

58102-1044

FEC ID number of contributing federal political committee.

C

Name of Employer  
Mutual of Omaha Companies

Occupation  
Investment Representative

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

MM / DD / YYYY  
07 / 10 / 2011

Transaction ID: 10202078

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Keith M. Gillies

Mailing Address 109 W. Lakeview Dr.

City

La Place

State

LA

Zip Code

70068-2427

FEC ID number of contributing federal political committee.

C

Name of Employer  
River Parishes Advisors  
Group, LLC

Occupation  
Managing Director

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2288.00

Date of Receipt

MM / DD / YYYY  
07 / 10 / 2011

Transaction ID: 10202083

Amount of Each Receipt this Period

416.00

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

488.00

**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 75 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Douglas Austin

Mailing Address Suite 9 Kite Hill Rd

City State Zip Code  
Santa Cruz CA 95060-1418

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

Name of Employer Occupation  
Austin Ins & Financial Se- AGENT  
rv

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 340.00

Date of Receipt  

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

**Transaction ID:** 10202085

Amount of Each Receipt this Period  
42.50

**B.** Full Name (Last, First, Middle Initial)  
Mr. Thomas F. Levasseur

Mailing Address 8 Harvest Dr

City State Zip Code  
Dover NH 03820-4959

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

Name of Employer Occupation  
The Beacon Retirement Gro- Insurance Agent  
up

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 432.50

Date of Receipt  

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

**Transaction ID:** 10202102

Amount of Each Receipt this Period  
84.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael William Gray

Mailing Address 4401 NW Honeysuckle

City State Zip Code  
Corvallis OR 97330-3356

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

Name of Employer Occupation  
Northwest Financial Group, President  
Inc.

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 231.00

Date of Receipt  

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

**Transaction ID:** 10202109

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **168.50**

**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 76 / 192

(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

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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Roger W. Garrett

Mailing Address 23 Buckburst Circle

City State Zip Code  
Bloomington IL 61704

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

Name of Employer Occupation  
R. W. Garrett Agency Inc. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202117

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Jim Humphrey

Mailing Address 19065 Walden

City State Zip Code  
Spring Lake MI 49456-1172

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

Name of Employer Occupation  
Farm Bureau Life Ins Co/MI AGENT

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202168

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Richard L. Miller

Mailing Address 1214 Karr Ave.

City State Zip Code  
Yakima WA 98902-5026

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

Name of Employer Occupation  
Northwestern Mutual Financial Network Financial Representative

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202187

Amount of Each Receipt this Period

50.00

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

142.00

**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 77 / 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Juli Y. McNeely		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address S764 Hanson Road		<b>Transaction ID:</b> 10202190		
	City Spencer	State WI	Zip Code 54479	Amount of Each Receipt this Period 90.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer McNeely Financial Services Inc	Occupation Insurance Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼ 720.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. John Everett		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 531 Daniel		<b>Transaction ID:</b> 10202211		
	City Santa Maria	State CA	Zip Code 93454-7898	Amount of Each Receipt this Period 84.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Allstate Life Insurance Company	Occupation AGENT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼ 462.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Rick D. Elhart		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 3130 Saddle Drive, Ste.6		<b>Transaction ID:</b> 10202213		
	City Helena	State MT	Zip Code 59601	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Thrivent Financial for Lutherans	Occupation Insurance Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		Aggregate Year-to-Date ▼ 290.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	224.00
<b>TOTAL</b> 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 78 / 192

(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mrs. Sherry K. Flynn

Mailing Address #58 C R 5151

City State Zip Code  
Bloomfield NM 87413-9700

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

Name of Employer Occupation  
ING Reg. Rep.

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 239.20

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202217

Amount of Each Receipt this Period

31.20

**B.**

Full Name (Last, First, Middle Initial)

Mr. Gregory J. Corrente

Mailing Address 3901 Clifford Drive

City State Zip Code  
Metairie LA 70002

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

Name of Employer Occupation  
Corrente & Associates Agent/Broker

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202244

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael J. Hiller

Mailing Address W267 S7930 Stony Pt. Ct.

City State Zip Code  
Mukwonago WI 53149-9687

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

Name of Employer Occupation  
Central Financial Services General Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 243.60

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202260

Amount of Each Receipt this Period

42.00

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

123.20

**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 79 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Rosie J. Harrington

Mailing Address P. O. Box 178

City State Zip Code  
Huron SD 57350-0178

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

Name of Employer  
American Family Life Insurance Company

Occupation  
AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202271

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Dwain K. Betten

Mailing Address 1604 Timberlane Dr.

City State Zip Code  
Boone IA 50036-5231

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

Name of Employer  
Betten Associates

Occupation  
General Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202275

Amount of Each Receipt this Period  
45.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Scott Johnson

Mailing Address 533 West, 2600 South Suite 135

City State Zip Code  
Bountiful UT 84010

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

Name of Employer  
American National Insurance Company

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202277

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **112.00**

**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 80 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

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

Mailing Address 1405 Blackberry Lane

City State Zip Code  
Stevens Point WI 54481-9140

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

Name of Employer Occupation  
Planning Concepts Inc. Sales Representative

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 391.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202299

Amount of Each Receipt this Period

51.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Allen L. Dennis

Mailing Address 3145 Heatheridge Lane

City State Zip Code  
Reno NV 89509-3021

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

Name of Employer Occupation  
American National Insurance Company AGENT

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 207.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202308

Amount of Each Receipt this Period

27.00

**C.**

Full Name (Last, First, Middle Initial)  
Gregory G Braden

Mailing Address 933 E 1938th Rd.

City State Zip Code  
Eudora KS 66025-9101

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

Name of Employer Occupation  
self employed Owner/Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 243.60

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202313

Amount of Each Receipt this Period

42.00

**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: PAGE 81 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. M. Steven Brotherton

Mailing Address 558 Brianton Lane

City State Zip Code  
Lawrenceville GA 30045-9435

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

Name of Employer Occupation  
New England Financial - Atlanta Agency Advanced Underwriting Specialist

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202332

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lines Robert Ferguson, Jr.

Mailing Address 104 Hillview Drive

City State Zip Code  
Charleston WV 25314

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

Name of Employer Occupation  
New York Life AGENT

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202372

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James L. McConathy, Jr.

Mailing Address 706 Trenton St., Apt. 6

City State Zip Code  
West Monroe LA 71291

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

Name of Employer Occupation  
MetLife Financial Services MANAGER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202374

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 125.00

**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 82 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Bernard M. Baudin

Mailing Address 632 Hesper Ave.

City State Zip Code  
Metairie LA 70005-2659

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

Name of Employer Occupation  
New York Life Assistant Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202376

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Curtis Lowell Eskew, Jr.

Mailing Address 1680 Keely Lane

City State Zip Code  
Sarasota FL 34232

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

Name of Employer Occupation  
New York Life Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
294.50

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202383

Amount of Each Receipt this Period  
84.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Terry A. Boulter

Mailing Address 40 N. State Street #7B

City State Zip Code  
Salt Lake City UT 84103

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

Name of Employer Occupation  
Cambridge Financial Center Branch Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202399

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **139.00**

**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 83 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Albert W. Blake, Jr.

Mailing Address 48 Sleepy Hollow Dr.

City State Zip Code  
Greenland NH 03840

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

Name of Employer Seacoast Financial Network, LLC  
Occupation Financial Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202422

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffery J. King

Mailing Address 36135 Alligator Bayou Rd

City State Zip Code  
Prairieville LA 70769-3052

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

Name of Employer Northwestern Mutual  
Occupation AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202437

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Kenneth T. Begneaud

Mailing Address 324 Silverbell Pwky

City State Zip Code  
Lafayette LA 70508

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

Name of Employer Northwestern Mutual  
Occupation Financial Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
247.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202445

Amount of Each Receipt this Period  
45.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **170.00**

**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 84 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Donald A. Frost

Mailing Address 612 N Pageant Dr #A

City State Zip Code  
Orange CA 92869-2572

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

Name of Employer Don Frost Insurance Agency, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 231.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10202477  
Amount of Each Receipt this Period: 42.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James R. Goodrich

Mailing Address 1860 Beech

City State Zip Code  
Mt. Pleasant MI 48858-1280

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

Name of Employer Northwestern Mutual Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 945.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10202487  
Amount of Each Receipt this Period: 105.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert M. Burd

Mailing Address 22 Cedarwood Dr

City State Zip Code  
Watseka IL 60970-9740

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

Name of Employer Country Financial Occupation AGENT

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 462.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10202491  
Amount of Each Receipt this Period: 84.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 231.00

**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 85 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Lawrence P. Decker

Mailing Address 14480st, Rt 64

City State Zip Code  
Metamora OH 43540

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

Name of Employer Occupation  
GORKOWSKI, DECKER & BROWN Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202495

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert J. Hollander

Mailing Address 2107 Preamble Court

City State Zip Code  
Lincoln NE 68521-1155

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

Name of Employer Occupation  
Bob Hollander Insurance AGENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202496

Amount of Each Receipt this Period  
105.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steven B. Heinz

Mailing Address 1341 E 600 N

City State Zip Code  
Orem UT 84097

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

Name of Employer Occupation  
S. B. HEINZ & ASSOCIATES, INC. Financial Rep

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202502

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **255.00**

**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 86 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. George M. Dudikoff

Mailing Address 12897 Quail Hollow Dr

City State Zip Code  
Fairfield CA 94534

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

Name of Employer Farmers Insurance Group Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202533

Amount of Each Receipt this Period  
42.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Jill M. Douglass

Mailing Address 2932 Sunstone St.

City State Zip Code  
Las Vegas NV 89128-7742

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

Name of Employer Country Financial Occupation District\_Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202535

Amount of Each Receipt this Period  
45.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard L. Hoover

Mailing Address 2920 S. Jones Blvd., #110

City State Zip Code  
Las Vegas NV 89146

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

Name of Employer SagePoint Financial Occupation Agency Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
487.20

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202537

Amount of Each Receipt this Period  
84.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **171.00**

**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: <span style="float: right;">PAGE 87 / 192</span>
	(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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Charles H. Craddock, Jr.	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 161 Cordelia Dr	<b>Transaction ID:</b> 10202543
	City State Zip Code Ruckersville VA 22968-3600	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Craddock Insurance Services Inc Occupation President/CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 247.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Bobby L. Layman	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 2200 Thunderbird Trail	<b>Transaction ID:</b> 10202566
	City State Zip Code Maitland FL 32751-3745	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer GenAmerica Financial Corp. Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 231.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Philip W. McCarty	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 1225 Breckenridge #210	<b>Transaction ID:</b> 10202582
	City State Zip Code Little Rock AR 72205-1500	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Executive Benefits of Arkansas, Inc. Occupation Career Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>117.00</b>
<b>TOTAL</b> 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 88 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Howard S. Clark

Mailing Address 4519 Sleeping Indian Road

City State Zip Code  
Fallbrook CA 92028

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

Name of Employer Occupation  
Ohio National Fin. Svcs. Regional Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202585

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Eleanor B. Blaylock

Mailing Address 9439 Gay Lane

City State Zip Code  
Oil City LA 71061

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

Name of Employer Occupation  
Burke & Burke Insurance Agency Owner  
Mrktg. Inc.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 945.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202593

Amount of Each Receipt this Period  
105.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Elwyn D. Guernsey

Mailing Address 618 Lakewood Road

City State Zip Code  
Pensacola FL 32507-2434

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

Name of Employer Occupation  
Guernsey & Associates Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 382.50

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10202597

Amount of Each Receipt this Period  
42.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► **172.50**

**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 89 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. James D. Hutchison

Mailing Address 3260 Cox Rd

City State Zip Code  
Louisville TN 37777-3700

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

Name of Employer Capital Financial Group Occupation Assistant General Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202599

Amount of Each Receipt this Period  
12.50

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Lance P. Franczyk

Mailing Address 3009 Alyssum Ct.

City State Zip Code  
Edmond OK 73034

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

Name of Employer Oklahoma City Group Occupation Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202600

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. O. Taylor Davis

Mailing Address 104 Hanover Square

City State Zip Code  
Lafayette LA 70508

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

Name of Employer The Louisiana Group Occupation Financial Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202601

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **212.50**

**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 90 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gregory Lynn Grimes  
Mailing Address 4604 Shale Oaks Ave.  
City Columbia State MO Zip Code 65203  
FEC ID number of contributing federal political committee. **C**

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011  
Transaction ID: 10202626  
Amount of Each Receipt this Period  
60.00

Name of Employer: Financial Resource Group, LLC  
Occupation: Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
442.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kevin K. Burckhard  
Mailing Address 413-25th Ave NW  
City Minot State ND Zip Code 58703-0726  
FEC ID number of contributing federal political committee. **C**

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011  
Transaction ID: 10202633  
Amount of Each Receipt this Period  
45.00

Name of Employer: Northwestern Mutual  
Occupation: AGENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
261.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas C. Besselman  
Mailing Address 6421 Perkins Rd #2B  
City Baton Rouge State LA Zip Code 70808-4125  
FEC ID number of contributing federal political committee. **C**

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011  
Transaction ID: 10202634  
Amount of Each Receipt this Period  
100.00

Name of Employer: The Besselman & Little Agency  
Occupation: President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
550.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **205.00**

**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 91 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. A. Christopher Engle

Mailing Address 4485 Orchard Creek Ct S E

City State Zip Code  
Kentwood MI 49546

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

Name of Employer Argus Financial Consultants  
Occupation Certified Financial Planner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202636

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey D. Kowal

Mailing Address N55W34867 W Lake Dr

City State Zip Code  
Oconomowoc WI 53066

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

Name of Employer Kowal Investment Group, LLC  
Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 243.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202638

Amount of Each Receipt this Period  
42.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James H. Hampton

Mailing Address 3601 North Classen #201a

City State Zip Code  
Oklahoma City OK 73118-3231

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

Name of Employer Birchall & Hampton  
Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202643

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **127.00**

**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 92 / 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. James J. Dinsmore	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 104 Lehman Drive	<b>Transaction ID:</b> 10202686
	City State Zip Code Cogan Station PA 17728-9228	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Liberty Mutual Insurance Co Exec. Sales Rep. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Joseph J. Maltese	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 4176 Arikakee Court	<b>Transaction ID:</b> 10202690
	City State Zip Code Jacksonville FL 32223	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation John Hancock Della Porta Agency Investment Advisor Rep. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 336.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Tom L. Hamby	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 1115 E Elm	<b>Transaction ID:</b> 10202731
	City State Zip Code El Reno OK 73036-3911	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation New York Life Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>122.00</b>
<b>TOTAL</b> 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 93 / 192  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. James T. Bardin

Mailing Address 4226 Fairway Circle

City Tampa State FL Zip Code 33624-4640

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

Name of Employer The Principal Financial Group Occupation Business Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.50

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10202752  
Amount of Each Receipt this Period: 45.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Sergio J. Acuna

Mailing Address 1856 Bob Murphy Drive

City El Paso State TX Zip Code 79936

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

Name of Employer Lincoln Financial Network Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10202754  
Amount of Each Receipt this Period: 84.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard B. Jacobs

Mailing Address 5396 Painted Sunrise Dr.

City Las Vegas State NV Zip Code 89149-6443

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

Name of Employer Principal Financial Group Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10202759  
Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 179.00

**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 94 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Terry K. Headley

Mailing Address 20704 Meadow Ridge Dr

City State Zip Code  
Springfield NE 68059-7086

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

Name of Employer Headley Financial Group  
Occupation President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2750.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202761

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Mark A. Kolterman

Mailing Address 2577 Waverly Road

City State Zip Code  
Seward NE 68434-8030

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

Name of Employer Kolterman Agency, Inc.  
Occupation President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202774

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. James John Silbernagel

Mailing Address W 2329 Capital Drive

City State Zip Code  
Campbellsport WI 53010-3010

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

Name of Employer Silbernagel & Jäsen Financial  
Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 580.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202793

Amount of Each Receipt this Period

100.00

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

650.00

**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 95 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Larry R. Lee

Mailing Address 25106 Cineria

City State Zip Code  
Lake Forest CA 92630-3307

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

Name of Employer: Financial Diligence Partners  
Occupation: President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
453.50

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10202824**  
 Amount of Each Receipt this Period: 42.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Henry Donaghy

Mailing Address 400 North Church Street # 208

City State Zip Code  
Charlotte NC 28203

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

Name of Employer: Mass Mutual  
Occupation: Supervisor

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237.30

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10202829**  
 Amount of Each Receipt this Period: 42.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard D. Kimmel

Mailing Address 6525 Bellaire Drive S

City State Zip Code  
Ft Worth TX 76132-1138

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

Name of Employer: Principal Financial Group  
Occupation: Regional Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10202831**  
 Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **184.00**

**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 96 / 192

(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Therese M. Dickey

Mailing Address P. O. Box 7036

City State Zip Code  
Billings MT 59103-7036

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

Name of Employer Occupation  
Payne Financial Group Account Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202848

Amount of Each Receipt this Period  
60.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Kim L. Christenson

Mailing Address 180 SW Gibson Lane

City State Zip Code  
Issaquah WA 98027-4123

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

Name of Employer Occupation  
Pacific Life Insurance Co- Field Vice President  
mpany

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202866

Amount of Each Receipt this Period  
22.50

**C.**

Full Name (Last, First, Middle Initial)

Mr. Gregory P. Daigle

Mailing Address 500 Dover Blvd #215

City State Zip Code  
Lafayette LA 70503

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

Name of Employer Occupation  
The Pinnacle Group Financial Advisor

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 462.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10202889

Amount of Each Receipt this Period  
84.00

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

166.50

**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 97 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John B. Kearns

Mailing Address 1802 First Ave

City State Zip Code  
Scottsbluff NE 69361

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

Name of Employer Jolliffe Capital, Inc. Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 467.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202902

Amount of Each Receipt this Period  
85.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Glen R. Greathouse

Mailing Address 1452 E Lincoln Rd

City State Zip Code  
Lake Charles LA 70605-0767

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

Name of Employer Farm Bureau Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202921

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Richard N. Anderson

Mailing Address 112 Margie Dr.

City State Zip Code  
West Monroe LA 71291

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

Name of Employer Southern Farm Bureau Life Insurance Occupation Agency Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10202926

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **160.00**

**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 98 / 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial) Mr. William A. Hume		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
Mailing Address 1075 Woodfield Lane		<b>Transaction ID:</b> 10202961
City Libertyville	State IL	Zip Code 60048
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer State Farm Insurance Companies	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. Craig K. Duncan		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
Mailing Address 3428 Aspen Trail		<b>Transaction ID:</b> 10202963
City Clearwater	State FL	Zip Code 33761-1101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer State Farm Ins. Co.	Occupation AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. Richard W. Downes		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
Mailing Address 126 Sheridan Lane		<b>Transaction ID:</b> 10202973
City Smyrna	State DE	Zip Code 19977-1736
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 42.00
Name of Employer State Farm Insurance Companies	Occupation AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	122.00
<b>TOTAL</b> 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 99 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. James W. Brown

Mailing Address 6334 Deveron Drive

City State Zip Code  
Charlotte NC 28211-4612

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

Name of Employer State Farm Occupation Owner/Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 237.30

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10202985  
Amount of Each Receipt this Period: 42.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Darrel V. Hovde

Mailing Address 1001 19th Ave SW

City State Zip Code  
Minot ND 58701-6139

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

Name of Employer State Farm Ins. Occupation General Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 295.80

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10202995  
Amount of Each Receipt this Period: 51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Irv Wiese

Mailing Address 318 Stamford Bridge Rd

City State Zip Code  
Columbia SC 29212

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

Name of Employer MW Group Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10203023  
Amount of Each Receipt this Period: 52.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 145.00

**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 100 / 192  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ronald L. Gay

Mailing Address 1106 Deacon Dr.

City State Zip Code  
College Station TX 77845

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

Name of Employer Occupation  
Lariat Financial Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203024

Amount of Each Receipt this Period  
84.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Clinton J. Parks

Mailing Address 4848 Rivervale St Rt

City State Zip Code  
Soquel CA 95073-9727

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

Name of Employer Occupation  
Clinton J. Parks Ins. Ser- vs Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 302.50

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203031

Amount of Each Receipt this Period  
55.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel C. Bell

Mailing Address P. O. Box 1747

City State Zip Code  
Cleveland MS 38732-1747

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

Name of Employer Occupation  
State Farm Insurance Comp- anies Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203034

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **189.00**

**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 101 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Richard E. Keeling		Date of Receipt
	Mailing Address 9507 Wessex PI		<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Louisville	KY	40222-5042
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10203065
Name of Employer Transamerica		Occupation Insurance 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" value="290.00"/>	<input type="text" value="50.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Marvin L. Spreen		Date of Receipt
	Mailing Address 5759 Mount Vernon Rd		<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Brenham	TX	77833-7708
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10203089
Name of Employer Thrivent Financial for Lu-therans		Occupation Financial Associate	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" value="234.00"/>	<input type="text" value="26.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Thomas D. Voshall		Date of Receipt
	Mailing Address 426 Towne Valley Dr		<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Woodstock	GA	30188-2636
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10203099
Name of Employer Vineyard Financial Develop-ment		Occupation Financial Consultant	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" value="225.00"/>	<input type="text" value="25.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="101.00"/>
<b>TOTAL</b> 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: (check only one)	PAGE 102 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Robert A. Styrkowicz		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 361 Pines Blvd.		Transaction ID: 10203111		
	City Lake Villa	State IL	Zip Code 60046-6600	Amount of Each Receipt this Period 90.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Allstate Insurance		Occupation Exclusive Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 660.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Ernestine S. Cohn		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 1773 139th Avenue P O Box 3206		Transaction ID: 10203147		
	City San Leandro	State CA	Zip Code 94578	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Robinson - Cohn & Co. Insurance Agency		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. C. Robert Brown, Sr.		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 8675 WestCott		Transaction ID: 10203152		
	City Germantown	State TN	Zip Code 38138-7738	Amount of Each Receipt this Period 210.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer UCL Financial Group		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1155.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	330.00
<b>TOTAL</b> 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 103 / 192  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John F. Ridoux

Mailing Address 911 Thorpe Drive

City State Zip Code  
Louisville KY 40243-1959

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

Name of Employer Allstate Life Insurance Company  
Occupation Agency Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10203156

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Melville D.K. Jones

Mailing Address P.O. Box 1391

City State Zip Code  
Puunene HI 96784

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

Name of Employer Transamerica Life Insurance Companies  
Occupation Branch Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
337.50

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10203176

Amount of Each Receipt this Period  
37.50

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Thomas P. Cunningham

Mailing Address 4292 Rangeview Drive

City State Zip Code  
Billings MT 59106-4738

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

Name of Employer Farm Bureau Financial Services  
Occupation Agency Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
487.20

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10203180

Amount of Each Receipt this Period  
84.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **151.50**

**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 104 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. David W. Daigle		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 5300 Stone Place Ave		<b>Transaction ID:</b> 10203188		
	City Gillette	State WY	Zip Code 82718	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Mountain West Farm Bureau		
Occupation Insurance Agent		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 240.00					

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Lane Boozer		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 1400 N Corinth St Suite 109		<b>Transaction ID:</b> 10203226		
	City Corinth	State TX	Zip Code 76208-5444	Amount of Each Receipt this Period 45.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Don Boozer & Assoc.		
Occupation Vice President - Marketing		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 315.00					

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Alyson J. Guest		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 10333 Richmond Ave Ste 1050		<b>Transaction ID:</b> 10203231		
	City Houston	State TX	Zip Code 77042	Amount of Each Receipt this Period 42.50	
	FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer MetLife Financial Services		
Occupation Insurance Agent		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 382.50					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>117.50</b>
<b>TOTAL</b> 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 105 / 192

(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Sharon L. Sparling

Mailing Address P.O. Box 1914

City State Zip Code  
Mount Vernon WA 98273-1914

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Jeff Kyle Agency PRODUCER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203235

Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Alan R. Zalewski

Mailing Address 6908 North 27th Street

City State Zip Code  
Tacoma WA 98407-1002

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Burnley Wilson Associates President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203240

Amount of Each Receipt this Period 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Morris A. Silverman

Mailing Address 12800 N Meridian Street

City State Zip Code  
Carmel IN 46032-9443

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Semler Financial Group Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203285

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... 125.00

**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 106 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. A. Duer Pierce, Jr.

Mailing Address 5818 Kennett Pike

City State Zip Code  
Wilmington DE 19807-1116

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

Name of Employer Financial House Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203291

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Gary M. Owens

Mailing Address PO Box 835

City State Zip Code  
Sultan WA 98294

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

Name of Employer Gary M Owens Insurance Agency Inc Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203293

Amount of Each Receipt this Period  
42.50

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Ian C. Wilkinson

Mailing Address P.O. Box 7096

City State Zip Code  
Macon GA 31209-7096

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

Name of Employer Wilkinson & Associates Occupation Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203295

Amount of Each Receipt this Period  
62.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► **155.00**

**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 107 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael G. Murphy

Mailing Address 2041 S 88 St

City State Zip Code  
Omaha NE 68124-2111

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

Name of Employer: Grace/Mayer Insurance Agency Inc  
Occupation: Registered Representative

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
462.00

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10203296**  
 Amount of Each Receipt this Period: 84.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. James D. Schulz

Mailing Address 6601 South 66th. St.

City State Zip Code  
Lincoln NE 68516-3657

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

Name of Employer: Ameritas Life Insurance Corp.  
Occupation: Senior Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2291.67

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10203311**  
 Amount of Each Receipt this Period: 416.67

**C.** Full Name (Last, First, Middle Initial)  
Mr. James E. Mitchell

Mailing Address 3990 Jones Ln

City State Zip Code  
Bellingham WA 98225-8544

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

Name of Employer: Mitchell Financial Services  
Occupation: President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10203320**  
 Amount of Each Receipt this Period: 42.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► **543.17**

**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 108 / 192  
(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

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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. James J. Van Ham

Mailing Address 2748 Newport Drv

City Naperville State IL Zip Code 60565-6711

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

Name of Employer Country Insurance and Financial Service Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1045.00

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10203323

Amount of Each Receipt this Period 52.50

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Terry L. Poynor

Mailing Address 1220 N Prince St

City Clovis State NM Zip Code 88101

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

Name of Employer Farmers Insurance Group Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.20

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10203326

Amount of Each Receipt this Period 30.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Harry E. Sechman

Mailing Address 13 Beechwood Dr

City Rutland State MA Zip Code 01543-1751

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

Name of Employer H.E. Sechman Retirement Planning Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 382.50

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10203331

Amount of Each Receipt this Period 42.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► **125.00**

**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 109 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. William E. Riley

Mailing Address 715 N. Washington Blvd., Suite D

City State Zip Code  
Sarasota FL 34236

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

Name of Employer Occupation  
W. E. Riley and Associates Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203345

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel J. Wells

Mailing Address 18830 Los Hermanos Ranch Rd

City State Zip Code  
Valley Center CA 92082-6808

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

Name of Employer Occupation  
Daniel Wells Insurance & Financial Ser Owner/Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203347

Amount of Each Receipt this Period  
55.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jon R. Robb

Mailing Address 214 Atlantic Dr.

City State Zip Code  
Vernon Hills IL 60061-2029

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

Name of Employer Occupation  
Farmers Insurance Group District Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203356

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 122.00

**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 110 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bruce A. Murphy

Mailing Address 11840 Kearney Circle

City State Zip Code  
Thornton CO 80233-5217

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

Name of Employer Farmers Insurance Group Occupation AGENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10203358  
Amount of Each Receipt this Period: 30.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John W. Wheeler, Jr.

Mailing Address 1075 Aster Ln.

City State Zip Code  
West Chicago IL 60185-1750

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

Name of Employer Water Tower Financial Partners, LLC Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10203376  
Amount of Each Receipt this Period: 42.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Sherry Soileau

Mailing Address 1122 Castle Kirk Drive

City State Zip Code  
Baton Rouge LA 70808-6025

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

Name of Employer The Besselman Agency Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10203409  
Amount of Each Receipt this Period: 12.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 84.50

**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 111 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Henry Ogden  
Mailing Address 4109 Mohawk Cir  
City Springdale State AR Zip Code 72764-7547  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Farmers Insurance Group Occupation AGENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 290.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10203417  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Joseph K. Roberts  
Mailing Address 4000 S 36th Street  
City Lincoln State NE Zip Code 68506-4809  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Midlands Occupation Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 247.50  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10203423  
Amount of Each Receipt this Period 45.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Martha J. Stark  
Mailing Address 300 St. Andrews Circle  
City Oxford State MS Zip Code 38655  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Insurance Company Occupation Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 231.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10203428  
Amount of Each Receipt this Period 42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 137.00  
**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 112 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Edward F. Randolph	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 1515 Mill Bay Road Suite A	<b>Transaction ID:</b> 10203433
	City Kodiak State AK Zip Code 99615-6233	Amount of Each Receipt this Period 84.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Edward F Randolph Ins. Agency Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 462.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Richard R. Rios	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 8720 El Chapul Way	<b>Transaction ID:</b> 10203476
	City Fair Oaks State CA Zip Code 95628-5454	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Securities America Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 550.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Roger L. Owens	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 104 Landing Lane	<b>Transaction ID:</b> 10203489
	City Elkton State MD Zip Code 21921-5204	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Rymark Financial Services Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>246.50</b>
<b>TOTAL</b> 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 113 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Michael P. Saunders

Mailing Address 4560 Ortega Blvd

City State Zip Code  
Jacksonville FL 32210-6043

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

Name of Employer Occupation  
Saunders & Co. President

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203500

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Steven M. Stratton

Mailing Address 17131 Parkview Dr

City State Zip Code  
Morgan Hill CA 95037-6606

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

Name of Employer Occupation  
Financial & Insurance Ser- PARTNER  
vices

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1155.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203518

Amount of Each Receipt this Period  
210.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Cindy M. Suzuki

Mailing Address 2973 Kalawao Pl

City State Zip Code  
Honolulu HI 96822-1546

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

Name of Employer Occupation  
First Hawaiian Bank Financial\_Services\_Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10203550

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **292.00**

**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 114 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Boyd Lee Williams	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 7023 W. Willamette Ave	<b>Transaction ID:</b> 10203556
	City State Zip Code Kennewick WA 99336-1280	Amount of Each Receipt this Period 208.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Kansas City Life Insurance Company Occupation Sales Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2080.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Shelley M. Rowe	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 5908 E. Conservation Dr.	<b>Transaction ID:</b> 10203558
	City State Zip Code Longmont CO 80504	Amount of Each Receipt this Period 37.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Generations Financial Resources Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Joey Ussery	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 3539 River Road	<b>Transaction ID:</b> 10203573
	City State Zip Code Sealy TX 77474-9826	Amount of Each Receipt this Period 32.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer John Hancock Life Insurance Occupation Regional Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 292.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	278.00
<b>TOTAL</b> 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 115 / 192  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Ms. Deborah A. Stratton-Flandro

Mailing Address 2595 Spanbauer Rd

City State Zip Code  
American Falls ID 83211-5223

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

Name of Employer Farm Bureau -Power County Office  
Occupation AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
261.00

Date of Receipt  

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

**Transaction ID:** 10203599

Amount of Each Receipt this Period  
45.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Cliff F. Wilson

Mailing Address 1458 W. Bahia Court

City State Zip Code  
Gilbert AZ 85233-5600

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

Name of Employer Southeast Arizona Ins. SE-rvices, LTD  
Occupation General Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
996.00

Date of Receipt  

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

**Transaction ID:** 10203604

Amount of Each Receipt this Period  
126.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Harry S. Rosnick

Mailing Address 3435 Jefferson Davis Hwy  
P.O. Box 360

City State Zip Code  
Fredericksburg VA 22404-0360

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

Name of Employer Nationwide Insurance  
Occupation AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
340.00

Date of Receipt  

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

**Transaction ID:** 10203628

Amount of Each Receipt this Period  
42.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► **213.50**

**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 116 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Ms. Nancy P. Cubberley  
Mailing Address P O Box 5109  
City Sevierville State TN Zip Code 37864  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cubberley Agency, Inc. Occupation MANAGER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10203704  
Amount of Each Receipt this Period 30.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Miguel Paredes  
Mailing Address 5927 Tamarisk  
City San Luis Obispo State CA Zip Code 93401-8281  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Neal Truesdale Ins. Occupation Benefits  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 376.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10203736  
Amount of Each Receipt this Period 47.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Anthony D. Chapman  
Mailing Address 210 East 2nd Ave, Suite 300  
City Rome State GA Zip Code 30161-1707  
FEC ID number of contributing federal political committee. **C**  
Name of Employer AIMC Occupation Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 231.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10203753  
Amount of Each Receipt this Period 42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 119.00  
**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 117 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Charles I. Daniels, III		Date of Receipt MM / DD / YYYY 07 / 10 / 2011	
	Mailing Address 2424 Merlot Dr		<b>Transaction ID:</b> 10203781	
	City	State	Zip Code	Amount of Each Receipt this Period
	Napa	CA	94558	42.50
	FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Harvest Financial, LLC		Occupation Family Financial Coach		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Brian D. Boesiger		Date of Receipt MM / DD / YYYY 07 / 10 / 2011	
	Mailing Address 7021 S. 33rd Street		<b>Transaction ID:</b> 10203789	
	City	State	Zip Code	Amount of Each Receipt this Period
	Lincoln	NE	68516-4886	37.50
	FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Benefit Management		Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 337.50		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Randal C. Espey		Date of Receipt MM / DD / YYYY 07 / 10 / 2011	
	Mailing Address 122 Riverview Dr		<b>Transaction ID:</b> 10203792	
	City	State	Zip Code	Amount of Each Receipt this Period
	Suwanee	GA	30024-4290	42.00
	FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Espey Fin. Group		Occupation General Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 231.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	122.00
<b>TOTAL</b> 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 118 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. James W. Simons

Mailing Address 908 Village Avenue, SE

City State Zip Code  
Minot ND 58701

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

Name of Employer Occupation  
First Command Financial Insurance Agent  
Planning

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10203808

Amount of Each Receipt this Period  
27.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Paula D. Harris

Mailing Address 7709 Marisu Lane Ct

City State Zip Code  
Lavista NE 68128

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

Name of Employer Occupation  
Curnes Financial Group Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10203858

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Scott R. Wollenberg

Mailing Address 14702 Haven Meadows Ln

City State Zip Code  
Humble TX 77396-3753

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

Name of Employer Occupation  
IMG Financial Group Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 231.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10203862

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **94.00**

**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 119 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Debra L. Righter

Mailing Address 7508 Jemez NE

City State Zip Code  
Albuquerque NM 87109

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

Name of Employer  
Righter Insurance, LLC

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10203874

Amount of Each Receipt this Period  
27.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Mike Ford

Mailing Address 21656 N 59th Ln

City State Zip Code  
Glendale AZ 85308

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

Name of Employer  
Pro Formance Financial Group

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10203879

Amount of Each Receipt this Period  
25.20

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Ted Y. Withrow

Mailing Address 142 Deer Creek Road

City State Zip Code  
Edmond OK 73003

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

Name of Employer  
State Farm Insurance Companies

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10203892

Amount of Each Receipt this Period  
25.20

**SUBTOTAL** of Receipts This Page (optional) ..... ► **77.40**

**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 120 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Elias Calles

Mailing Address 650 University Drive

City State Zip Code  
Coral Gables FL 33134

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

Name of Employer: Union Central - Miami Agency   Occupation: Manager

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 247.50

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10203918  
Amount of Each Receipt this Period: 45.00

**B.** Full Name (Last, First, Middle Initial)  
Connie Y. Golleher

Mailing Address PO Box 255

City State Zip Code  
Mc Lean VA 22101-0255

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

Name of Employer: The Holleman Companies   Occupation: Principal & Chief Operating Officer

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 391.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10203950  
Amount of Each Receipt this Period: 51.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Matthew B. Stone

Mailing Address 5016 Bartons Enclave Lane

City State Zip Code  
Raleigh NC 27613-8564

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

Name of Employer: Southern Farm Bureau Life Ins   Occupation: AGENT

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 254.25

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10203958  
Amount of Each Receipt this Period: 45.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 141.00

**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 121 / 192  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Randy J. Kruse

Mailing Address 816 4TH AVE

City Sheldon State IA Zip Code 51201-1516

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

Name of Employer Farm Bureau Financial Service O'Brien Occupation Career Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.00

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10203964

Amount of Each Receipt this Period 45.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Chase Ryan Sinquefeld

Mailing Address 214 West College Street

City Murfreesboro State TN Zip Code 37130-3532

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

Name of Employer Miller Loughry Beach Insurance Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.50

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10203976

Amount of Each Receipt this Period 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Larry G. Johnson

Mailing Address 44466 Albert

City Plymouth State MI Zip Code 48170

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

Name of Employer Farm Bureau Ins Co Occupation AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 07 / 10 / 2011

**Transaction ID:** 10203978

Amount of Each Receipt this Period 42.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 112.50

**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 122 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Larry R. Ynman, Sr.	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 3322 Morning Brook	<b>Transaction ID:</b> 10203984
	City State Zip Code San Antonio TX 78247	Amount of Each Receipt this Period 27.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer SOGO Wealth and Risk Management Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 247.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Greg W. Jacobs	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 1350 Grand Summitt Drive #116	<b>Transaction ID:</b> 10203990
	City State Zip Code Reno NV 89523	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Hendricks Insurance Agency Occupation Financial Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 243.60	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Monica J. Lawfield	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 6851 Caballero Dr.	<b>Transaction ID:</b> 10204014
	City State Zip Code Jacksonville FL 32217-2772	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Waddell & Reed, Inc. Occupation Regional Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 243.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	111.50
<b>TOTAL</b> 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 123 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Joseph A. Sztapka

Mailing Address 3705 S. Judy Ave

City State Zip Code  
Sioux Falls SD 57103-7248

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

Name of Employer Occupation  
Modern Woodmen of America Regional Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204023

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Benson B. Terrell, Jr.

Mailing Address 1059 S Kade

City State Zip Code  
Lake Charles LA 70605

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

Name of Employer Occupation  
The Firm of Louisiana Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204037

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Marlin D. Wells

Mailing Address 2201 N. Washington

City State Zip Code  
Roswell NM 88201-3377

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

Name of Employer Occupation  
AXA Advisors, LLC Financial Professional

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 435.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204072

Amount of Each Receipt this Period  
75.00

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

200.00

**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 124 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gregory B. Schaeffer

Mailing Address 3627 - 22nd St.

City State Zip Code  
Kenosha WI 53144-1443

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

Name of Employer Occupation  
The Schaeffer Group, LLC AGENT

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 261.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204075

Amount of Each Receipt this Period  
45.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William L. Rudd

Mailing Address 3150 Mollifield Lane

City State Zip Code  
Charlottesville VA 22911-7210

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

Name of Employer Occupation  
Nationwide Insurance Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204076

Amount of Each Receipt this Period  
42.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John N. Peacock

Mailing Address 18 Aubin St.

City State Zip Code  
Seekonk MA 02771

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

Name of Employer Occupation  
Peacock Financial Group, LLC Certified Financial Planner

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 207.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204090

Amount of Each Receipt this Period  
27.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 114.00

**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 125 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Gordon D. Schuster		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 1230 Leanne Pl		<b>Transaction ID:</b> 10204101		
	City Wenatchee	State WA	Zip Code 98801-3253	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer New York Life	Occupation Insurance Agent	Aggregate Year-to-Date 275.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Mark Phelan Sudderberg		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 1751 Clinton St.		<b>Transaction ID:</b> 10204110		
	City Rockford	State IL	Zip Code 61103	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Coyle Varland Insurance Agency, Inc.	Occupation OWNER	Aggregate Year-to-Date 231.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Brad A. Tapscott		Date of Receipt MM / DD / YYYY 07 / 10 / 2011		
	Mailing Address 523 Castle Hall Rd		<b>Transaction ID:</b> 10204112		
	City Mount Pleasant	State SC	Zip Code 29464	Amount of Each Receipt this Period 22.50	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Ameriprise Financial	Occupation Certified Financial Planner	Aggregate Year-to-Date 287.50		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>114.50</b>
<b>TOTAL</b> 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 126 / 192  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Michael D. White

Mailing Address 360 Spring St.  
Unit 405

City State Zip Code  
St. Paul MN 55102

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

Name of Employer Country Financial Occupation Associate Agency Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204152

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Cale Paul Smith

Mailing Address 376 Riverlon Ave

City State Zip Code  
Baton Rouge LA 70806

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

Name of Employer Smith Financial Group Occupation Financial Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 945.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204209

Amount of Each Receipt this Period  
105.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. John P. Mosley

Mailing Address 112 Mechanic Street

City State Zip Code  
Westbrook ME 04092

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

Name of Employer New York Life Occupation Financial Adviser

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 386.40

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204214

Amount of Each Receipt this Period  
50.40

**SUBTOTAL** of Receipts This Page (optional) ..... ► **197.40**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Ms. Sharon A. Rockett

Mailing Address 29 Richter Rd

City State Zip Code  
Raymond WA 98577-9304

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

Name of Employer Occupation  
R & S Financial Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204232

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Mary H. Potter

Mailing Address 207 Leland

City State Zip Code  
Waterloo IA 50701

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

Name of Employer Occupation  
New York Life Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 405.20

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204240

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Ms. Martha N. Olmstead

Mailing Address 1800 Chestnut St.

City State Zip Code  
Berkeley CA 94702

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

Name of Employer Occupation  
New York Life Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204256

Amount of Each Receipt this Period

50.00

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

117.00

**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 128 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Ms. Brenda S. Speer

Mailing Address 126 Sunset Dr

City Pulaski State TN Zip Code 38478-3631

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

Name of Employer Professional Benefit Solutions, LLC Occupation PARTNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 10 / 2011  
Transaction ID: 10204258  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Peter D. Sullivan

Mailing Address 824 Holter St

City Helena State MT Zip Code 59601-6161

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

Name of Employer Sullivan Financial Group Occupation Registered Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 10 / 2011  
Transaction ID: 10204272  
Amount of Each Receipt this Period 36.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael A. Thompson

Mailing Address 4517 Rounding Run Road

City Charlotte State NC Zip Code 28277

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

Name of Employer Hinrichs Flahagan Financial Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt 07 / 10 / 2011  
Transaction ID: 10204283  
Amount of Each Receipt this Period 28.60

**SUBTOTAL** of Receipts This Page (optional) ..... ► 89.60

**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 129 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Jerry Lynn Stephens

Mailing Address 130 Tarheel Rd

City State Zip Code  
Lumberton NC 28358

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

Name of Employer Occupation  
United Professional Services Managing General Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 237.30

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204292

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Clifford B. Sutter

Mailing Address 114 Holly Dr.

City State Zip Code  
Metairie LA 70005

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

Name of Employer Occupation  
Northwestern Mutual Financial Representative

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 378.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204296

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Gabriel N. Smith

Mailing Address 191 Spyglass Way

City State Zip Code  
Hendersonville TN 37075

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

Name of Employer Occupation  
Capital Financial Group Financial Representative

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 384.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204302

Amount of Each Receipt this Period

42.00

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

126.00

**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 130 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Harold T. Morris, Sr.		Date of Receipt
	Mailing Address 438 Mechunk Creek Dr		<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 07 / 10 / 2011
	City	State	Zip Code
	Troy	VA	22974-9742
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10204308
Name of Employer Morris Ins Agency		Occupation Insurance 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"/> 25.00
		<input type="text"/> 225.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Paul W. Witthauer		Date of Receipt
	Mailing Address 310 21st Avenue NE		<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 07 / 10 / 2011
	City	State	Zip Code
	Jamestown	ND	58401-2408
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10204314
Name of Employer Witthauer Investment & Insurance Servi		Occupation OWNER	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"/> 50.40
		<input type="text"/> 386.40	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Robert E. Ross		Date of Receipt
	Mailing Address 3918 S. Lisbon Way		<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 07 / 10 / 2011
	City	State	Zip Code
	Aurora	CO	80013-6032
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 10204326
Name of Employer Ross South Metro Agency, Inc.		Occupation President & CEO	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"/> 42.00
		<input type="text"/> 346.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 117.40
<b>TOTAL</b> 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 131 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Barry K. Malone

Mailing Address 6101 Elkhart

City Lubbock State TX Zip Code 79424

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

Name of Employer Level Four Group Occupation Financial Professional

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10204329**  
Amount of Each Receipt this Period 42.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. David L. Belk

Mailing Address 2 Bay Tree Court

City Greensboro State NC Zip Code 27455

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

Name of Employer Belk Financial Group Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10204346**  
Amount of Each Receipt this Period 27.50

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Christopher Luke Simons

Mailing Address 713 Carper Dr

City Artesia State NM Zip Code 88210-2344

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

Name of Employer Simons and Associates Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 487.20

Date of Receipt: 07 / 10 / 2011  
**Transaction ID: 10204347**  
Amount of Each Receipt this Period 84.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **153.50**

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

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

Use separate schedule(s)  
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 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. James A. Shalek

Mailing Address 1706 Candleberry Lane

City State Zip Code  
Yorkville IL 60560-5810

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

Name of Employer Principal Financial Group      Occupation Insurance Agent

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204367

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. D. David Russell

Mailing Address 8461 Eagle Preserve Way

City State Zip Code  
Sarasota FL 34241-9449

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

Name of Employer Rogers Benefit Group      Occupation Regional Mgr.

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204395

Amount of Each Receipt this Period  
105.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Alan F. Simonis, Jr.

Mailing Address P. O. Box 1858

City State Zip Code  
Huntsville AL 35807-0858

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

Name of Employer Protective Life      Occupation Manager

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204396

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **222.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Joseph L Morton, III

Mailing Address 5487 N Bach

City State Zip Code  
Meridian ID 83642

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

Name of Employer Intermountain Legal Group Occupation Attorney At Law

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2 0 1 1

**Transaction ID:** 10204404

Amount of Each Receipt this Period  
126.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Neal A. Kloke

Mailing Address 2512 Claudia Ct

City State Zip Code  
Bellingham WA 98226

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

Name of Employer NWM Financial Servies, Inc Occupation Tax & Fiancial Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2 0 1 1

**Transaction ID:** 10204429

Amount of Each Receipt this Period  
35.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Preston R. Speece

Mailing Address 8541 S 99th St

City State Zip Code  
LaVista NE 68128

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

Name of Employer Heritage Financial Services Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2 0 1 1

**Transaction ID:** 10204458

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 191.00

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

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

Use separate schedule(s)  
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(check only one)  
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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Michael W. Struebing

Mailing Address 16112 Parker Street

City State Zip Code  
Omaha NE 68118-2429

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

Name of Employer Headley Financial Group      Occupation Representative

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      632.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204487

Amount of Each Receipt this Period  
115.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Cheryl R. Parker

Mailing Address 4120 Rainbow Drive

City State Zip Code  
Virginia Beach VA 23456

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

Name of Employer Atlantic Charter Insurance Group      Occupation AGENT

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      245.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204490

Amount of Each Receipt this Period  
27.50

**C.** Full Name (Last, First, Middle Initial)  
Mr. David R. Tuzson

Mailing Address 427 W 33rd #2

City State Zip Code  
Scottsbluff NE 69361

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

Name of Employer Ohio National Life      Occupation General Agent

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      467.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204492

Amount of Each Receipt this Period  
85.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **227.50**

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

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. C. Wayne Perkins

Mailing Address 171A County Road 198

City State Zip Code  
Oxford MS 38655

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

Name of Employer Occupation  
Southern Farm Bureau Agency Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 412.50

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10204512

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Brad M. Maruschak

Mailing Address 8275 Vincent Road Apt. # 1806

City State Zip Code  
Denham Springs LA 70726

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

Name of Employer Occupation  
The Spectrum Financial Group Owner/Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10204531

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Jennifer L. Alford

Mailing Address 6955 Kinsman Drive

City State Zip Code  
Sylvania OH 43560

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

Name of Employer Occupation  
Creative Financial Partners Marketing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10204534

Amount of Each Receipt this Period  
37.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► **162.50**

**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  
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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bobby L. Queener  
Mailing Address 718 River Rock Blvd.  
City Murfreesboro State TN Zip Code 37128  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Shelter Life Insurance Co Occupation AGENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10204543  
Amount of Each Receipt this Period 22.50

**B.** Full Name (Last, First, Middle Initial)  
Mr. Todd A. Otto  
Mailing Address 945 Senior Ave  
City Dickinson State ND Zip Code 58601-3757  
FEC ID number of contributing federal political committee. **C**  
Name of Employer State Farm Insurance Companies Occupation AGENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 243.60  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10204546  
Amount of Each Receipt this Period 42.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Adam Cole McConathy  
Mailing Address 1609 N. 7th Street  
City West Monroe State LA Zip Code 71291  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Sunset Capital, LLC Occupation Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10204564  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 114.50  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)  
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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Roger L. Daniel

Mailing Address 608 N 30th, #3D

City State Zip Code  
Billings MT 59101-1161

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

Name of Employer Roger L. Daniel Insurance Agency, Inc. Occupation AGENT

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10204581  
Amount of Each Receipt this Period: 50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sherry L. Flint

Mailing Address 456 Arden Dr.

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Principal Financial Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 231.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10204589  
Amount of Each Receipt this Period: 42.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jesse W. Markham

Mailing Address 1122 Elm St Suite 802

City State Zip Code  
Honolulu HI 96814-2209

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

Name of Employer Aflac Occupation District Sales Coordinator

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00

Date of Receipt: 07 / 10 / 2011  
Transaction ID: 10204599  
Amount of Each Receipt this Period: 52.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 144.50

**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  
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(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)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Zachary D Stafford

Mailing Address 7139 Sheffield Ave

City State Zip Code  
Baton Rouge LA 70806-7453

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

Name of Employer Occupation  
The Besselman & Little Agency AGENT

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 231.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204639

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Timothy C. Flanagan, Jr.

Mailing Address 2007 Maynard Rd

City State Zip Code  
Charlotte NC 28270-0007

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

Name of Employer Occupation  
Hinrichs Flanagan Financial General Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 474.60

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204644

Amount of Each Receipt this Period  
84.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. M. Albert Burke

Mailing Address 103 Irongate Place

City State Zip Code  
Statesboro GA 30458-9195

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

Name of Employer Occupation  
self employed Independent Agent

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 303.50

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10204650

Amount of Each Receipt this Period  
30.00

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

156.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Rawls Dupree, Jr.

Mailing Address 511 Comanche Trail

City State Zip Code  
West Monroe LA 71291-8165

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

Name of Employer MetLife Financial Services Occupation Field Service Rep.

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.50

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204713

Amount of Each Receipt this Period  
22.50

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Elizabeth J. Lee

Mailing Address 19431 Rue de Valore 22G

City State Zip Code  
Foothill Ranch CA 92610

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

Name of Employer Financial Diligence Partners Occupation Associate

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 247.50

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204720

Amount of Each Receipt this Period  
45.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Michael J. Smith

Mailing Address P O Box 2295

City State Zip Code  
Gillette WY 82717-2295

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

Name of Employer Mountain West Farm Bureau Occupation Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204731

Amount of Each Receipt this Period  
84.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **151.50**

**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 140 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Ron L. McDonald		Date of Receipt	
	Mailing Address 568 W 7th St		M M / D D / Y Y Y Y 07 / 10 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10204755
	Dubuque	IA	52001-6617	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		42.00	
Name of Employer Bradley- Beck & McDonald		Occupation AGENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 243.60		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Kenneth W. Head		Date of Receipt	
	Mailing Address 203 Burning Brush Rd		M M / D D / Y Y Y Y 07 / 12 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10204790
	Greenville	SC	29607-5825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer Head Financial Group, Inc		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. John E. Duffin		Date of Receipt	
	Mailing Address 16131 Oliver St		M M / D D / Y Y Y Y 07 / 12 / 2011	
	City	State	Zip Code	<b>Transaction ID:</b> 10204795
	Fishers	IN	46037-7305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		500.00	
Name of Employer Duffin Financial & Insurance Brokerage		Occupation Brokerage Manager & Owner/President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>592.00</b>
<b>TOTAL</b> 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 141 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. George W. Williams, Jr.	Date of Receipt MM / DD / YYYY 07 / 10 / 2011
	Mailing Address 4109 Woodway Dr	<b>Transaction ID:</b> 10204804
	City State Zip Code Monroe LA 71201	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Benefit Plan Service	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Peter Hill	Date of Receipt MM / DD / YYYY 07 / 12 / 2011
	Mailing Address 3602 SW Edgewood Ln	<b>Transaction ID:</b> 10204809
	City State Zip Code Ankeny IA 50023	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Vision Financial Group	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Ben B. Miller	Date of Receipt MM / DD / YYYY 07 / 12 / 2011
	Mailing Address 34 Storyteller Ct	<b>Transaction ID:</b> 10204823
	City State Zip Code Sandia Park NM 87047-8542	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Northwestern Mutual - Southwest	Occupation Managing Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	655.00
<b>TOTAL</b> 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 142 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark E. Kull

Mailing Address 3008 S 6th St

City State Zip Code  
Louisville KY 40208-1314

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

Name of Employer Occupation  
Northwestern Mutual AGENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 243.60

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10204851

Amount of Each Receipt this Period  
42.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Todd H. Faulkner

Mailing Address 779 Old Zebulon Road

City State Zip Code  
Wendell NC 27591-8041

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

Name of Employer Occupation  
NC Farm Bureau Mutual Ins. Co. Agency Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 237.30

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10204853

Amount of Each Receipt this Period  
42.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. George J. Geldin

Mailing Address 243 Park View Drive

City State Zip Code  
Oak Park CA 91377-1124

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

Name of Employer Occupation  
Geldin Insurance Services Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 12 / 2011

**Transaction ID:** 10204864

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **184.00**

**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 143 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Russell W. Crooks, Jr.  
Mailing Address 10108 Bennington Dr.  
City Tampa State FL Zip Code 33626  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retirement Benefits Group Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10204876  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Mary T. Roberts  
Mailing Address 16340 NW 37th Ave  
City Opa Locka State FL Zip Code 33056  
FEC ID number of contributing federal political committee. **C**  
Name of Employer AGLA - American General Occupation Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 262.50  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10204878  
Amount of Each Receipt this Period 12.50

**C.** Full Name (Last, First, Middle Initial)  
Ms. Angela Marie Shannon  
Mailing Address 370 8th St  
City Plainwell State MI Zip Code 49080  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Angela Shannon Insurance Agency Occupation AGENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00  
Date of Receipt 07 / 10 / 2011  
Transaction ID: 10204879  
Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 102.50  
**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 144 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Bradford J. Kadelski

Mailing Address PO Box 417

City State Zip Code  
Brookfield MA 01506-0417

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

Name of Employer  
Brookfield Insurance Partners

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10204924

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jim G. Weeks

Mailing Address 607 Main Street

City State Zip Code  
Palmetto GA 30268-1142

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

Name of Employer  
State Farm Ins.

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2011

**Transaction ID:** 10204932

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Barbara Treadwell

Mailing Address 213 E Gaston St

City State Zip Code  
Savannah GA 31401-5611

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

Name of Employer  
Treadwell & Associates, LLC

Occupation  
Certified Financial Planner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 13 / 2011

**Transaction ID:** 10204936

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **575.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 145 / 192  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Phil M. Haug

Mailing Address 114 38 1/2 Ave, W

City State Zip Code  
West Fargo ND 58078

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

Name of Employer Northern Lights Agency Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10204940

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. W. Gary Langenhahn

Mailing Address 2 Briars Corners

City State Zip Code  
Briarcliff Manor NY 10510-7350

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

Name of Employer Private Client Group, LLC Occupation Senior Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2011

**Transaction ID:** 10204951

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. G. Ronald Marshall

Mailing Address PO Box 0219

City State Zip Code  
Indiana PA 15701-0219

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

Name of Employer The Horace Mann Companies Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2011

**Transaction ID:** 10204976

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

**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 146 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Scott P. Forester

Mailing Address 238 S Peters Rd #B-203

City State Zip Code  
Knoxville TN 37923-5219

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

Name of Employer ABACUS Mid Atlantic Region, Inc. Occupation Sales Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 15 / 2011  
Transaction ID: 10205010  
Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Royall R. Brown, Jr.

Mailing Address 2617 Audubon Dr

City State Zip Code  
Winston Salem NC 27106-5854

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

Name of Employer Northwestern Mutual Occupation District Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 15 / 2011  
Transaction ID: 10205023  
Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Russell W. Crooks, Jr.

Mailing Address 10108 Bennington Dr.

City State Zip Code  
Tampa FL 33626

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

Name of Employer Retirement Benefits Group Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 175.00

Date of Receipt: 07 / 15 / 2011  
Transaction ID: 10205043  
Amount of Each Receipt this Period: -50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1200.00

**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 147 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Brad A. Tapscott

Mailing Address 523 Castle Hall Rd

City State Zip Code  
Mount Pleasant SC 29464

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

Name of Employer Occupation  
Ameriprise Financial Certified Financial Planner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 362.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 12 / 2011

**Transaction ID:** 10205054

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert L. Taylor

Mailing Address 601 Outer Dr

City State Zip Code  
Tecumseh MI 49286-1446

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

Name of Employer Occupation  
The Legends Group Financial Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 13 / 2011

**Transaction ID:** 10205064

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Emmette F. Albritton, II

Mailing Address 20683 Running Creek Church Road  
Suite A

City State Zip Code  
Stanfield NC 28163

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

Name of Employer Occupation  
Albritton Insurance Group General Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2011

**Transaction ID:** 10205087

Amount of Each Receipt this Period  
110.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **460.00**

**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 148 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Allen D. Oman

Mailing Address 3141 Birchmont Ave.

City State Zip Code  
Bemidji MN 56601

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

Name of Employer  
State Farm Insurance Companies

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2011

**Transaction ID:** 10205090

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. John M. Lawler

Mailing Address 401 Penny St

City State Zip Code  
Tea SD 57064-2322

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

Name of Employer  
McGreevy & Associates

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 14 / 2011

**Transaction ID:** 10205093

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Jack L. Frieden

Mailing Address 1056 Downshire Chase

City State Zip Code  
Virginia Beach VA 23452-6153

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

Name of Employer  
TFA Benefits

Occupation  
General Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2011

**Transaction ID:** 10205094

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 149 / 192  
(check only one)  
 11a  11b  11c  12  
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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. George W. Karr, Jr.  
Mailing Address 61 Gessner Rd  
City Kintersville State PA Zip Code 18930  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Karr Barth Associates, Inc. Occupation: Insurance Agent  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt: 07 / 15 / 2011  
Transaction ID: 10205125  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Boyd Lee Williams  
Mailing Address 7023 W. Williamette Ave  
City Kennewick State WA Zip Code 99336-1280  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: Kansas City Life Insurance Company Occupation: Sales Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1872.00  
Date of Receipt: 07 / 15 / 2011  
Transaction ID: 10205136  
Amount of Each Receipt this Period: -208.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Robert G. Sher  
Mailing Address 285 Bayberry Dr  
City Hewlett State NY Zip Code 11557-2721  
FEC ID number of contributing federal political committee. **C**  
Name of Employer: John Hancock Mutual Life Occupation: Managing Partner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt: 07 / 18 / 2011  
Transaction ID: 10205142  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1292.00  
**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 150 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Michael L. Kleen

Mailing Address 6712 W 109th Unit F

City State Zip Code  
Overland Park KS 66211

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

Name of Employer Occupation  
Country Financial Financial Representative

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 14 / 2011

Transaction ID: 10205146

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Odon L. Bacque, Jr.

Mailing Address 138 Teche Drive

City State Zip Code  
Lafayette LA 70503-2537

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

Name of Employer Occupation  
MassMutual Financial Group Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2011

Transaction ID: 10205155

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Jeff W. St. Clair

Mailing Address 60143 Confusion Hill Rd

City State Zip Code  
Coos Bay OR 97420-8446

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

Name of Employer Occupation  
St. Clair Capital Ventures, Ltd. Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 18 / 2011

Transaction ID: 10205175

Amount of Each Receipt this Period

250.00

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

450.00

**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 151 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Richard P. Dodd		Date of Receipt
	Mailing Address 7078 E Genesee St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 18 / 2011
	City	State	Zip Code
	Fayetteville	NY	13066-1123
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 10205180
Name of Employer Central New York Group Northwestern Mu		Occupation Managing Partner	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"/> 1000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Terrence P. Frett		Date of Receipt
	Mailing Address W227 N2650 Meadowood Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 18 / 2011
	City	State	Zip Code
	Waukesha	WI	53186
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 10205182
Name of Employer Frett/Barrington		Occupation 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"/> 300.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Kay I. Dempsey		Date of Receipt
	Mailing Address 1063 W. Paces Ferry Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 20 / 2011
	City	State	Zip Code
	Atlanta	GA	30327-2653
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 10205183
Name of Employer The Dempsey Companies		Occupation President/Owner	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"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1800.00
<b>TOTAL</b> 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 152 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Lori W. Broussard

Mailing Address P O Box 292

City State Zip Code  
Estherwood LA 70534-0292

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

Name of Employer Southern Financial Associates - Southe  
Occupation Financial Professional

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10205185

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. David W. Bell

Mailing Address 4216 Pat O'Hara Mtn Dr

City State Zip Code  
Cody WY 82414-9225

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

Name of Employer Mountain West Farm Bureau  
Occupation Agency Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2011

**Transaction ID:** 10205205

Amount of Each Receipt this Period  
475.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Anthony DiBernardo

Mailing Address 8291 Elmcrest Lane

City State Zip Code  
Huntington Beach CA 92646-3119

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

Name of Employer Flexible Insurance Plans, Inc.  
Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2011

**Transaction ID:** 10205273

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1525.00**

**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 153 / 192  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Ms. Fanci A. Worthington

Mailing Address 723 Harpeth Trace Dr

City Nashville State TN Zip Code 37221-3145

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

Name of Employer Capital Financial Group Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 07 / 10 / 2011  
**Transaction ID: 10205354**  
 Amount of Each Receipt this Period 42.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. David Brackenbury

Mailing Address 3236 Greenmeadow Dr

City Bethlehem State PA Zip Code 18017-1943

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

Name of Employer Mass Mutual Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 07 / 10 / 2011  
**Transaction ID: 10205393**  
 Amount of Each Receipt this Period 42.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John D. Richardson

Mailing Address 1452 Woodfield Dr

City Nashville State TN Zip Code 37211-6896

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

Name of Employer AXA Advisors, LLC Occupation Financial Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 237.50

Date of Receipt 07 / 10 / 2011  
**Transaction ID: 10205700**  
 Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 109.00

**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 154 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Ms. Christine L. Martin

Mailing Address 492 Freedom Ave

City State Zip Code  
Billings MT 59102

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

Name of Employer Humana Occupation Insurance Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 319.20

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10205770

Amount of Each Receipt this Period  
50.40

**B.** Full Name (Last, First, Middle Initial)  
Mr. Larry L. Askvig

Mailing Address 535 Leslie Ave

City State Zip Code  
Helena MT 59601-2819

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

Name of Employer Humana Insurance Company Occupation Insurance Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 284.80

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10205829

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Gary Bruce

Mailing Address 2501 Meek St

City State Zip Code  
Gulf Breeze FL 32563

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

Name of Employer Guernsey & Assoc. Occupation Insurance Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 10 / 2011

**Transaction ID:** 10205855

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **132.40**

**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 155 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. David M. Muilenberg	Date of Receipt MM / DD / YYYY 07 / 20 / 2011
	Mailing Address 1340 Winterwood Dr NE	<b>Transaction ID:</b> 10205867
	City State Zip Code Grand Rapids MI 49525-3441	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Discovery Financial, LLC Registered Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Thomas W. Ferguson	Date of Receipt MM / DD / YYYY 07 / 20 / 2011
	Mailing Address 33203 Euclid Avenue	<b>Transaction ID:</b> 10205898
	City State Zip Code Willoughby OH 44094-3123	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation State Farm Insurance Companies Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Mark D. Johnson	Date of Receipt MM / DD / YYYY 07 / 21 / 2011
	Mailing Address 199 Billings Dr	<b>Transaction ID:</b> 10205922
	City State Zip Code Superior WI 54880-4467	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Johnson Insurance Consultants Agent/Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1500.00
<b>TOTAL</b> 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 156 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Ms. Shirley Ann Jefferson

Mailing Address 113 Hamilton Trace

City State Zip Code  
Marietta GA 30068-3310

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

Name of Employer self employed Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2011

**Transaction ID:** 10205929

Amount of Each Receipt this Period  
52.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Tom B. Brown

Mailing Address 5084 W. Whiteland Rd

City State Zip Code  
Greenwood IN 46143-9391

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

Name of Employer Northwestern Mutual Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2011

**Transaction ID:** 10205940

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John P. Mosley

Mailing Address 112 Mechanic Street

City State Zip Code  
Westbrook ME 04092

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

Name of Employer New York Life Occupation Financial Adviser

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.40

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2011

**Transaction ID:** 10205954

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **582.00**

**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 157 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Thomas Waters

Mailing Address 11300 Johns Creek Pkwy  
Suite 200

City State Zip Code  
Johns Creek GA 30097-3509

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

Name of Employer Occupation  
Espy Financial Group Brokerage Manager

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
231.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10205963

Amount of Each Receipt this Period

42.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Diane Boyle

Mailing Address 3419 N Emerson

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
NAIFA H.O. VP of Federal Government Relations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
840.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10205967

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Howard Gruber

Mailing Address 1970 Oalcdel Dr

City State Zip Code  
Menlo Park CA 94025

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

Name of Employer Occupation  
CalPac Advisors Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
252.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 10 / 2011

Transaction ID: 10205971

Amount of Each Receipt this Period

63.00

**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 158 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial) Ms. Patricia G. Martin		Date of Receipt MM / DD / YYYY 07 / 22 / 2011
Mailing Address 2125 Cypress Drive		<b>Transaction ID:</b> 10205984
City Culpeper	State VA	Zip Code 22701-4025
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Patricia G. Martin Insurance	Occupation AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. Steven C. Perry		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
Mailing Address 701 W 8th Ave Ste 900		<b>Transaction ID:</b> 10205998
City Anchorage	State AK	Zip Code 99501-3467
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 45.00
Name of Employer New York Life	Occupation Financial_Services_Professional	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

**C.**

Full Name (Last, First, Middle Initial) Ms. Angel Riley		Date of Receipt MM / DD / YYYY 07 / 10 / 2011
Mailing Address 2901 Telestar Court		<b>Transaction ID:</b> 10206000
City Falls Church	State VA	Zip Code 22042
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 42.00
Name of Employer NAIFA	Occupation Political Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>337.00</b>
<b>TOTAL</b> 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 159 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Mary Holevinski

Mailing Address 17 Lambert Johnson Dr

City State Zip Code  
Ocean NJ 07712-3753

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

Name of Employer  
Holevinski Financial Services

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2011

**Transaction ID:** 10206009

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Ann Travis

Mailing Address 9371 S.W. 54 Street

City State Zip Code  
Miami FL 33165-6523

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

Name of Employer  
Travis Agency, Inc.

Occupation  
Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2011

**Transaction ID:** 10206030

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Ted Manuel Norris

Mailing Address P. O. Box 628

City State Zip Code  
New Castle IN 47362-0628

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

Name of Employer  
Ted Norris Agency

Occupation  
MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2011

**Transaction ID:** 10206039

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 160 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Dale F. Mamele

Mailing Address 410 Steeple Crest North

City State Zip Code  
Irmo SC 29063-8244

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

Name of Employer Summer Insurance Agency, LLC      Occupation PRINCIPAL

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      310.00

Date of Receipt  

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

**Transaction ID:** 10206070

Amount of Each Receipt this Period  
105.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Blake D. Amick

Mailing Address PO Box 88

City State Zip Code  
Lexington SC 29071-0088

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

Name of Employer Amick & Associates, Inc.      Occupation AGENT

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      590.00

Date of Receipt  

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

**Transaction ID:** 10206071

Amount of Each Receipt this Period  
590.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Kenneth W. Head

Mailing Address 203 Burning Brush Rd

City State Zip Code  
Greenville SC 29607-5825

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

Name of Employer Head Financial Group, Inc      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  

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

**Transaction ID:** 10206075

Amount of Each Receipt this Period  
175.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **870.00**

**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 161 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Donavon D. Wagner

Mailing Address 3002 Deerlodge Drive

City State Zip Code  
Bismarck ND 58504-8802

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

Name of Employer Occupation  
Wagner Financial Services Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 11 / 2011

Transaction ID: 10206079

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jules O. Gaudreau, Jr.

Mailing Address 23 Briarcliff Drive

City State Zip Code  
Wilbraham MA 01095-2614

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

Name of Employer Occupation  
The Gaudreau Group, Inc. President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 11 / 2011

Transaction ID: 10206087

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Karl W. Albrecht

Mailing Address 1745 Balsam Way

City State Zip Code  
Milford MI 48381-3391

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

Name of Employer Occupation  
ACTION BENEFITS President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 25 / 2011

Transaction ID: 10206112

Amount of Each Receipt this Period

500.00

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

5800.00

**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 162 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert A. DiCola

Mailing Address 136 Highland Dr.

City State Zip Code  
Leechburg PA 15656-8826

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

Name of Employer: DiCola Insurance & Financial Services  
Occupation: AGENT/Registered Rep.

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 11 / 2011  
**Transaction ID:** 10206117  
 Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Curtis L. Matlin

Mailing Address 707 Skokie Blvd.  
#700

City State Zip Code  
Northbrook IL 60062-2842

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

Name of Employer: self employed  
Occupation: Insurance Agent

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 07 / 22 / 2011  
**Transaction ID:** 10206119  
 Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Donald L. Maricle

Mailing Address 42 Pine Tree Ln.

City State Zip Code  
West Seneca NY 14224-4145

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

Name of Employer: C & M Capital Resources, Inc.  
Occupation: President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 11 / 2011  
**Transaction ID:** 10206136  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

**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 163 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Gary Bruce

Mailing Address 2501 Meek St

City State Zip Code  
Gulf Breeze FL 32563

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

Name of Employer Occupation  
Guernsey & Assoc. Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 63.00

Date of Receipt  
MM / DD / YYYY  
07 / 22 / 2011

**Transaction ID:** 10206145

Amount of Each Receipt this Period  
-84.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. John Abernethy

Mailing Address 59449 Keria Trail

City State Zip Code  
South Bend IN 46614-3832

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

Name of Employer Occupation  
Northwestern Mutual Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 25 / 2011

**Transaction ID:** 10206148

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David B. Schulman

Mailing Address 1000 Corporate Dr.  
Suite 700

City State Zip Code  
Ft. Lauderdale FL 33334-3637

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

Name of Employer Occupation  
MassMutual Group General Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 22 / 2011

**Transaction ID:** 10206150

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **466.00**

**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 164 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Ms. Kay A. Bright

Mailing Address 115 Bushnell Rd.

City State Zip Code  
Bozeman MT 59718

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

Name of Employer Farm Bureau Financial Services  
Occupation AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
07 / 22 / 2011

**Transaction ID:** 10206153

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. M. Jack Peckinpaugh

Mailing Address 6001 N Morrison Rd

City State Zip Code  
Munice IN 47304-9119

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

Name of Employer Peckinpaugh Beasley  
Occupation Insurance Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 22 / 2011

**Transaction ID:** 10206157

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Thomas L. Cox

Mailing Address 21837 Junebug Road

City State Zip Code  
Grass Valley CA 95949-8998

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

Name of Employer New York Life  
Occupation AGENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
07 / 22 / 2011

**Transaction ID:** 10206162

Amount of Each Receipt this Period  
275.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **825.00**

**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 165 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Brian E. Worrell

Mailing Address 309 Cobblestone Lane

City State Zip Code  
Lancaster PA 17601

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

Name of Employer Prudential Financial      Occupation Agent/Owner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 25 / 2011

**Transaction ID:** 10206168

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Merle A. Wollman

Mailing Address 1419 S Westward Ho Place

City State Zip Code  
Sioux Falls SD 57105-1426

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

Name of Employer Wollman Ins. Agcy., Inc.      Occupation Insurance Agent

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 11 / 2011

**Transaction ID:** 10206196

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Brad A. Tapscott

Mailing Address 523 Castle Hall Rd

City State Zip Code  
Mount Pleasant SC 29464

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

Name of Employer Ameriprise Financial      Occupation Certified Financial Planner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      312.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 11 / 2011

**Transaction ID:** 10206218

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **575.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 166 / 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Carl H. Aronson	Date of Receipt MM / DD / YYYY 07 / 11 / 2011
	Mailing Address 8541 NW Reed Dr.	<b>Transaction ID:</b> 10206226
	City State Zip Code Portland OR 97229-4113	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer State Farm Insurance Companies Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Martin F. Palumbos	Date of Receipt MM / DD / YYYY 07 / 25 / 2011
	Mailing Address 442 Locust Hill Drive	<b>Transaction ID:</b> 10206232
	City State Zip Code Webster NY 14580-1027	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer PS & E Plan To Prosper Occupation Certified Financial Planner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Lonnie L. Tutsch	Date of Receipt MM / DD / YYYY 07 / 11 / 2011
	Mailing Address 520 Lion Dr	<b>Transaction ID:</b> 10206236
	City State Zip Code Rapid City SD 57701-9701	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Modern Woodmen of America Occupation Agency Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>650.00</b>
<b>TOTAL</b> 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 167 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Ms. Mary C. Castiglione

Mailing Address 33 Muirfield Ct.

City State Zip Code  
Dover DE 19904

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

Name of Employer Health Insurance Assoc. Occupation AGENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
07 / 27 / 2011

**Transaction ID:** 10206256

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Randy W. Weaver

Mailing Address 6431 W. Sahara Ave. Ste. 275

City State Zip Code  
Las Vegas NV 89146-3068

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

Name of Employer New York Life Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2011

**Transaction ID:** 10206260

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Rex M. Takahashi

Mailing Address 4489 River Ash Court

City State Zip Code  
Concord CA 94521-4401

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

Name of Employer Prudential Occupation Life Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2011

**Transaction ID:** 10206263

Amount of Each Receipt this Period  
225.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **775.00**

**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 168 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial) Mr. Albert Moriarty		Date of Receipt MM / DD / YYYY 07 / 25 / 2011
Mailing Address 245 N 14th Street		<b>Transaction ID:</b> 10206288
City State Zip Code Grover Beach CA 93433-2253	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer Moriarty Enterprises	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. R. Philip Sarnecki		Date of Receipt MM / DD / YYYY 07 / 25 / 2011
Mailing Address 16004 King St		<b>Transaction ID:</b> 10206290
City State Zip Code Overland Park KS 66062-7508	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer RPS Financial Group	Occupation Managing Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. William R. Anderson		Date of Receipt MM / DD / YYYY 07 / 25 / 2011
Mailing Address 1842 Vermont Ave NW		<b>Transaction ID:</b> 10206307
City State Zip Code Washington DC 20001-5006	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 62.50
Name of Employer NAIFA	Occupation Sr VP Law & Govt Rel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 656.25	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>812.50</b>
<b>TOTAL</b> 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 169 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Jill E. Hoffman

Mailing Address 2901 Telestar Court

City State Zip Code  
Falls Church VA 22042

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

Name of Employer Occupation  
NAIFA Director, Federal Relations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 437.51

Date of Receipt

M M / D D / Y Y Y Y  
07 / 25 / 2011

Transaction ID: 10206317

Amount of Each Receipt this Period

41.67

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffrey Leonard Allison

Mailing Address 401 Wampanoag Trail #100

City State Zip Code  
Riverside RI 02915-1507

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

Name of Employer Occupation  
Oceanstate Financial Registered Representative-Financial Ad

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2011

Transaction ID: 10206321

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. James W. Oglesby

Mailing Address 800-E FAIRVIEW RD. Box 136

City State Zip Code  
Asheville NC 28803

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

Name of Employer Occupation  
J.W. Oglesby & Associates Senior Sales Associate

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 535.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 27 / 2011

Transaction ID: 10206323

Amount of Each Receipt this Period

165.00

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

506.67

**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 170 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. C. Anthony McDonald

Mailing Address 300 Mourning Dove Drive

City Newark State DE Zip Code 19711-4120

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

Name of Employer MetLife Financial Associates, Inc. Occupation Financial Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 27 / 2011

Transaction ID: 10206340

Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Laura M. Day

Mailing Address 121 St Regis Dr

City Newark State DE Zip Code 19711-3822

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

Name of Employer Laura Day and Associates Occupation AGENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 27 / 2011

Transaction ID: 10206344

Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Laura M. Day

Mailing Address 121 St Regis Dr

City Newark State DE Zip Code 19711-3822

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

Name of Employer Laura Day and Associates Occupation AGENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 27 / 2011

Transaction ID: 10206346

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 171 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles H. Landon

Mailing Address PO Box 214

City Nassau State DE Zip Code 19969

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

Name of Employer INTEGRA Administrative Group Occupation Management Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2011

**Transaction ID:** 10206380

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Stanley E Minka, Jr.

Mailing Address 1 Eagle Way

City Avondale State PA Zip Code 19311-9723

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

Name of Employer MetLife Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 27 / 2011

**Transaction ID:** 10206382

Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. David M. Nichols

Mailing Address 212 Purdy Drive

City Alma State MI Zip Code 48801-2161

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

Name of Employer Lincoln Financial Group Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2011

**Transaction ID:** 10206392

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1050.00

**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 172 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Todd D. Hudson

Mailing Address 108 Glenside Avenue

City State Zip Code  
Wilmington DE 19803

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

Name of Employer Hudson Insurance Group      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2011

**Transaction ID:** 10206401

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Douglas F. Bennetti

Mailing Address 806 Quail Run

City State Zip Code  
Wyoming DE 19934-9548

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

Name of Employer self employed      Occupation Sales Representative

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2011

**Transaction ID:** 10206408

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Larry A. Kaufman

Mailing Address 2102 Kentmere Parkway

City State Zip Code  
Wilmington DE 19806-2016

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

Name of Employer Kaufman Financial Services      Occupation President

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2011

**Transaction ID:** 10206410

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 173 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Joseph W. Spada

Mailing Address 4 Campus Drive

City Parsippany State NJ Zip Code 07054-4405

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

Name of Employer Summit Financial Resources Inc. Occupation Managing Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 26 / 2011

Transaction ID: 10206413

Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Donald Talerico

Mailing Address 160 Round About Trail

City Camden Wyoming State DE Zip Code 19934

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

Name of Employer Prudential Financial Occupation Insurance Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2011

Transaction ID: 10206425

Amount of Each Receipt this Period 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Elbert Hardy Vaughn, Jr.

Mailing Address 711 Alba Dr

City Orlando State FL Zip Code 32804-7206

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

Name of Employer The Vaughn Group, Inc. Occupation General Agent

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 12 / 2011

Transaction ID: 10206437

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 174 / 192
	<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Michael D. Bennetti	Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2011
	Mailing Address 202 Pebble Valley Dr.	<b>Transaction ID:</b> 10206441
	City State Zip Code Dover DE 19904-9462	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer L&W Insurance Inc. Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 875.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Edward R. Clink	Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2011
	Mailing Address 1263 W. Square Lake Rd.	<b>Transaction ID:</b> 10206474
	City State Zip Code Bloomfield Hills MI 48302-0845	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ed Clink & Associates Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Robert A. Miller	Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2011
	Mailing Address 727 Smithridge Rd.	<b>Transaction ID:</b> 10206482
	City State Zip Code New Canaan CT 06840-2201	Amount of Each Receipt this Period 1750.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Miller-Pomerantz Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2125.00
<b>TOTAL</b> 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 175 / 192  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.** Full Name (Last, First, Middle Initial)  
Mr. Philip E. Leberz

Mailing Address 1600 West Hillsdale Blvd.

City State Zip Code  
San Mateo CA 94402

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

Name of Employer: Leberz Insurance Services Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 29 / 2011  
Transaction ID: 10206492  
Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William R. Anderson

Mailing Address 1842 Vermont Ave NW

City State Zip Code  
Washington DC 20001-5006

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

Name of Employer: NAIFA Occupation: Sr VP Law & Govt Rel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 718.75

Date of Receipt: 07 / 28 / 2011  
Transaction ID: 10206495  
Amount of Each Receipt this Period: 62.50

**C.** Full Name (Last, First, Middle Initial)  
Mr. Todd S. Healy

Mailing Address 3624 University

City State Zip Code  
Dallas TX 75205

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

Name of Employer: HealyPartners Occupation: Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 07 / 29 / 2011  
Transaction ID: 10206500  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **812.50**

**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 176 / 192  
(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Mr. Theodore B. Erck

Mailing Address 2206 Briarbrook

City State Zip Code  
Houston TX 77042-2906

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

Name of Employer Occupation  
ExamOne Sales Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 29 / 2011

Transaction ID: 10206502

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Robert O. Smith

Mailing Address 5824 Arbol Ct.

City State Zip Code  
Rockford MI 49341

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

Name of Employer Occupation  
Northwestern Mutual Estate & Business Planning Specialist

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1250.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 29 / 2011

Transaction ID: 10206504

Amount of Each Receipt this Period

1250.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Casey L. Eden

Mailing Address 1900 NW Expwy, #700

City State Zip Code  
Oklahoma City OK 73118

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

Name of Employer Occupation  
Redbud Financial Insurance Agent

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 28 / 2011

Transaction ID: 10206510

Amount of Each Receipt this Period

210.00

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

1560.00

**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 177 / 192
	(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)  
National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial) Jill E. Hoffman		Date of Receipt MM / DD / YYYY 07 / 28 / 2011
Mailing Address 2901 Telestar Court		<b>Transaction ID:</b> 10206511
City Falls Church	State VA	Zip Code 22042
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 41.67
Name of Employer NAIFA	Occupation Director, Federal Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 479.18	

**B.**

Full Name (Last, First, Middle Initial) Mr. John Gary Bruce		Date of Receipt MM / DD / YYYY 07 / 22 / 2011
Mailing Address 2501 Meek St		<b>Transaction ID:</b> 10241345
City Gulf Breeze	State FL	Zip Code 32563
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 0.00
Name of Employer Guernsey & Assoc.	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 63.00	<b>[MEMO ITEM]</b> Refund(s) on Schedule B Totaling \$84.00 This changes the YTD Total to \$63.-00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	41.67
<b>TOTAL</b> This Period (last page this line number only) .....	▶	66702.36

# 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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee	Transaction ID: 10117500 Date of Disbursement
	Mailing Address 425 Second Street SE	<input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="15000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Price For Congress	Transaction ID: 10117502 Date of Disbursement
	Mailing Address P.O. Box 425	<input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Roswell State GA Zip Code 30077	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1500.00"/>
	Candidate Name Rep. Thomas Edmunds Price, M.D.	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: GA District: 06	

C.	Full Name (Last, First, Middle Initial) Friends Of Joe Pitts	Transaction ID: 10117503 Date of Disbursement
	Mailing Address PO Box 775	<input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Unionville State PA Zip Code 19375	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Joseph R. Pitts	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: PA District: 16	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="17500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Rogers For Congress	Transaction ID: 10117504 Date of Disbursement
	Mailing Address PO Box 581	<input type="text" value="07"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Brighton State MI Zip Code 48116	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name Rep. Michael J. Rogers	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Stivers For Congress	Transaction ID: 10117505 Date of Disbursement
	Mailing Address 4679 Winterset Drive	<input type="text" value="07"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Columbus State OH Zip Code 43220	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name Mr. Steve Stivers	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Dave Camp For Congress	Transaction ID: 10117506 Date of Disbursement
	Mailing Address 5915 Eastman Avenue Suite 100	<input type="text" value="07"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Midland State MI Zip Code 48640	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name Rep. David Lee Camp	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 180 / 192

<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)  
National Association of Insurance and Financial Advisors Political Action Comm

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Aderholt For Congress <hr/> Mailing Address P. O. Box 1158 <hr/> City Haleyville State AL Zip Code 35565 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Robert B. Aderholt <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 04 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10131608 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 1	
	Amount of Each Disbursement this Period 500.00	
	011 Category/ Type	
	Full Name (Last, First, Middle Initial) Carper For Senate <hr/> Mailing Address 19 East Commons Blvd Second Floor <hr/> City New Castle State DE Zip Code 19720 <hr/> Purpose of Disbursement <hr/> Candidate Name Sen. Thomas R. Carper <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10131609 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 1
Amount of Each Disbursement this Period 2500.00		
011 Category/ Type	<b>Transaction ID:</b> 10131610 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 1	
Amount of Each Disbursement this Period 1500.00	Full Name (Last, First, Middle Initial) Cleaver For Congress <hr/> Mailing Address 4801 Main Street, Suite 1000 <hr/> City Kansas City State MO Zip Code 64112 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Emanuel Cleaver, II <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 05 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 10131610 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 1
Amount of Each Disbursement this Period 1500.00	011 Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> 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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Tim Scott For Congress	Transaction ID: 10131611 Date of Disbursement 07 / 08 / 2011
	Mailing Address 1405 Ashley River Road	Amount of Each Disbursement this Period 1000.00
	City Charleston State SC Zip Code 29407	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Timothy Scott	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael Grimm For Congress	Transaction ID: 10131612 Date of Disbursement 07 / 08 / 2011
	Mailing Address 560 9th Street	Amount of Each Disbursement this Period 2000.00
	City Brooklyn State NY Zip Code 11215	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Michael Grimm	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Tom Reed For Congress	Transaction ID: 10131613 Date of Disbursement 07 / 08 / 2011
	Mailing Address 99 W 1st Street	Amount of Each Disbursement this Period 1000.00
	City Corning State NY Zip Code 14830	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Thomas Reed	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<b>TOTAL</b> 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)  
National Association of Insurance and Financial Advisors Political Action Comm

<p><b>A.</b> Full Name (Last, First, Middle Initial) Geoff Davis For Congress</p> <p>Mailing Address PO Box 17192</p> <p>City Ft Mitchell State KY Zip Code 41017</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Rep. Geoff Davis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: KY District: 04</p>	<p><b>Transaction ID:</b> 10131614 <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p><b>Amount of Each Disbursement this Period</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	0	8	/	2	0	1	1	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	7	/	0	8	/	2	0	1	1													
1000.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lynn Jenkins For Congress</p> <p>Mailing Address P.O. Box 1441</p> <p>City Topeka State KS Zip Code 66601</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Rep. Lynn Jenkins</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: KS District: 02</p>	<p><b>Transaction ID:</b> 10131615 <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p><b>Amount of Each Disbursement this Period</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	0	8	/	2	0	1	1	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	7	/	0	8	/	2	0	1	1													
1000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends Of Joe Heck</p> <p>Mailing Address PO Box 750114</p> <p>City Las Vegas State NV Zip Code 89136</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name Mr. Joe Heck</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NV District: 03</p>	<p><b>Transaction ID:</b> 10131616 <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> </p> <p><b>Amount of Each Disbursement this Period</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	0	8	/	2	0	1	1	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	7	/	0	8	/	2	0	1	1													
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)

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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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Mike Crapo For Us Senate	Transaction ID: 10131617 Date of Disbursement 07 / 08 / 2011
	Mailing Address P.O. Box 1948	
	City Boise State ID Zip Code 83701	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Candidate Name Sen. Mike Crapo Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ID District:	011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Bob Corker for Senate, Inc.	Transaction ID: 10131618 Date of Disbursement 07 / 08 / 2011
	Mailing Address PO Box 848	
	City Chatanooga State TN Zip Code 37401	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Candidate Name Bob Corker Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District:	011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Ben Cardin For Senate	Transaction ID: 10171243 Date of Disbursement 07 / 22 / 2011
	Mailing Address P.O. Box 21093	
	City Catonsville State MD Zip Code 21228	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Candidate Name Sen. Benjamin Cardin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District:	011 Category/ Type

**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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Becerra For Congress	Transaction ID: 10171244 Date of Disbursement
	Mailing Address P.O. Box 261060	<input type="text" value="07"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Los Angeles State CA Zip Code 90026	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. Xavier Becerra	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Carper For Senate	Transaction ID: 10171362 Date of Disbursement
	Mailing Address 19 East Commons Blvd Second Floor	<input type="text" value="07"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City New Castle State DE Zip Code 19720	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Sen. Thomas R. Carper	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Dave Reichert	Transaction ID: 10171363 Date of Disbursement
	Mailing Address P. O. Box 53322	<input type="text" value="07"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Bellevue State WA Zip Code 98015	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name Rep. David George Reichert	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Duffy For Congress	Transaction ID: 10171364 Date of Disbursement 07 / 22 / 2011
	Mailing Address PO Box 538	Amount of Each Disbursement this Period 2500.00
	City Wausau State WI Zip Code 54402	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Mr. Sean Duffy	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Committee To Re-Elect Nydia M. Velazquez To Congre	Transaction ID: 10171365 Date of Disbursement 07 / 22 / 2011
	Mailing Address 315 Inspiration Lane	Amount of Each Disbursement this Period 1000.00
	City Gaithersburg State MD Zip Code 20878	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Rep. Nydia M. Velazquez	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 12	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Sherrod Brown	Transaction ID: 10171366 Date of Disbursement 07 / 22 / 2011
	Mailing Address PO Box 76187	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20013	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Sen. Sherrod Brown	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6000.00
<b>TOTAL</b> 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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Shelley Moore Capito For Congress	Transaction ID: 10171367 Date of Disbursement 07 / 22 / 2011
	Mailing Address P.O. Box 11519	Amount of Each Disbursement this Period 1000.00
	City Charleston State WV Zip Code 25339	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Shelley Moore Capito	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Lee Terry For Congress	Transaction ID: 10171368 Date of Disbursement 07 / 22 / 2011
	Mailing Address PO Box 540098	Amount of Each Disbursement this Period 1000.00
	City Omaha State NE Zip Code 68154	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Lee Terry	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Of Mark Warner	Transaction ID: 10171369 Date of Disbursement 07 / 22 / 2011
	Mailing Address 201 North Union Street Suite 300	Amount of Each Disbursement this Period 1000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Mark Robert Warner	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Richard Hanna For Congress Committee	Transaction ID: 10171370 Date of Disbursement 07 / 22 / 2011
	Mailing Address 2308 Genesee Street	Amount of Each Disbursement this Period 1000.00
	City Utica State NY Zip Code 13502	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Richard Hanna	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends Of Sam Johnson	Transaction ID: 10171371 Date of Disbursement 07 / 22 / 2011
	Mailing Address P.O. Box 860096	Amount of Each Disbursement this Period 1000.00
	City Plano State TX Zip Code 75086	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Samuel Robert Johnson	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 03	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jim Gerlach For Congress Committee	Transaction ID: 10175135 Date of Disbursement 07 / 27 / 2011
	Mailing Address PO Box 87	Amount of Each Disbursement this Period 1000.00
	City Uwchland State PA Zip Code 19480	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. James W. Gerlach	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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)  
National Association of Insurance and Financial Advisors Political Action Comm

A.	Full Name (Last, First, Middle Initial) Heath Shuler For Congress	Transaction ID: 10175136 Date of Disbursement 07 / 27 / 2011
	Mailing Address PO Box 8446	Amount of Each Disbursement this Period 1000.00
	City Asheville State NC Zip Code 28814	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Heath Shuler	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bachus For Congress Committee	Transaction ID: 10175137 Date of Disbursement 07 / 27 / 2011
	Mailing Address P.O. Box 131134	Amount of Each Disbursement this Period 2500.00
	City Birmingham State AL Zip Code 35213	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Spencer Thomas Bachus, III	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 06	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hal Rogers For Congress	Transaction ID: 10175138 Date of Disbursement 07 / 27 / 2011
	Mailing Address P.O. Box 1214	Amount of Each Disbursement this Period 1000.00
	City Somerset State KY Zip Code 42502	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Harold Dallas Rogers	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 05	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4500.00
<b>TOTAL</b> 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)

National Association of Insurance and Financial Advisors Political Action Comm

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Michael Grimm For Congress</p> <p>Mailing Address 560 9th Street</p> <p>City Brooklyn State NY Zip Code 11215</p> <p>Purpose of Disbursement Void - Michael Grimm for Congress</p> <p>Candidate Name Mr. Michael Grimm</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10178993</p> <p>Date of Disbursement 07 / 29 / 2011</p> <p>Amount of Each Disbursement this Period -2500.00</p> <p>011 Category/ Type</p> <p>Void - Michael Grimm for Congress</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Gardner For Congress</p> <p>Mailing Address PO Box 2408</p> <p>City Loveland State CO Zip Code 80539</p> <p>Purpose of Disbursement Void - Gardner For Congress</p> <p>Candidate Name Cory Gardner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10178994</p> <p>Date of Disbursement 07 / 29 / 2011</p> <p>Amount of Each Disbursement this Period -2500.00</p> <p>011 Category/ Type</p> <p>Void - Gardner For Congress</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Friends Of Rich Nugent</p> <p>Mailing Address P. O. Box 15668</p> <p>City Brooksville State FL Zip Code 34604</p> <p>Purpose of Disbursement Void - Friends Of Rich Nugent</p> <p>Candidate Name Mr. Richard Nugent</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 10178995</p> <p>Date of Disbursement 07 / 29 / 2011</p> <p>Amount of Each Disbursement this Period -2500.00</p> <p>011 Category/ Type</p> <p>Void - Friends Of Rich Nugent</p>

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

-7500.00

**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 190 / 192

<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

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)

National Association of Insurance and Financial Advisors Political Action Comm

A.

Full Name (Last, First, Middle Initial)

Friends Of Joe Heck

Mailing Address PO Box 750114

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement  
Void - Friends Of Joe Heck

Candidate Name  
Mr. Joe Heck

Office Sought:  House  
 Senate  
 President

State: NV District: 03

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 10178996

Date of Disbursement

07 / 29 / 2011

Amount of Each Disbursement this Period

-2500.00

Void - Friends Of Joe Heck

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

-2500.00

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

47500.00

**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 191 / 192

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

**A.**

Full Name (Last, First, Middle Initial)

Wachovia

Mailing Address P.O. box 40031

City State Zip Code  
Roanoke VA 24022-0031

Purpose of Disbursement  
bank service charge

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10239593

Date of Disbursement

07 / 31 / 2011

Amount of Each Disbursement this Period

1810.00

bank service charge

**B.**

Full Name (Last, First, Middle Initial)

NAIFA

Mailing Address 2901 Telestar Ct

City State Zip Code  
Falls Church VA 22042

Purpose of Disbursement  
salary, benefits, supplies, copies

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 10239594

Date of Disbursement

07 / 31 / 2011

Amount of Each Disbursement this Period

33625.88

salary, benefits, supplies, copies

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

35435.88

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

35435.88

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 192 / 192	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Association of Insurance and Financial Advisors			Nature of Debt (Purpose): salary, benefits, supplies, copies
Mailing Address 2901 Telestar Court			
City Falls Church	State VA	ZIP Code 22042	

Outstanding Balance Beginning This Period		<b>Transaction ID: 10241346</b>	
33403.88			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
30980.44	33625.88	30758.44	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	30758.44
2) <b>TOTALS</b> This Period (last page this line number only).....	30758.44
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	30758.44