

**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

ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC/ALLIANZ LIFE/FIREMAN'S FUND PA

ADDRESS (number and street)

591 REDWOOD HWY., BLDG. 4000

Check if different than previously reported. (ACC)

MILL VALLEY

CA

94941

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00095109

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Quarterly Report (YE)

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)

X Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

02

01

2004

through

02

29

2004

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

STEVEN S. LUCAS

Signature of Treasurer

Electronically Filed by STEVEN S. LUCAS

Date

03

19

2004

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

Office Use Only

**FEC FORM 3X**  
(Rev. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC{ALLIANZ LIFE/FIREMAN'S FUND PA

Report Covering the Period: From: <sup>M</sup>02 <sup>D</sup>01 <sup>Y</sup>2004 To: <sup>M</sup>02 <sup>D</sup>29 <sup>Y</sup>2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2004 <sup>M</sup> <sup>D</sup>		49412.67
(b) Cash on Hand at Beginning of Reporting Period .....	55056.85	
(c) Total Receipts (from Line 19) .....	5443.96	11131.24
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	60500.81	60543.81
<hr/>		
7. Total Disbursements (from Line 31) .....	14500.00	14543.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	46000.81	46000.81
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
	11 05 2002	CA

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

**ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC(ALLIANZ LIFE/FIREMAN'S FUND PA**

Report Covering the Period: From: <sup>M</sup>02 <sup>-</sup>01 <sup>-</sup>2004 To: <sup>M</sup>02 <sup>-</sup>29 <sup>-</sup>2004

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) .....	1220.00	
(ii) Unitemized .....	4208.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	5428.00	11100.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	5428.00	11100.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	15.96	31.24
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) .....		
(c) Total Transfer (add 18(a) and 18(b)) .....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5443.96	11131.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5443.96	11131.24

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14500.00	14500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	43.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	43.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds.....		
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	14500.00	14543.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	14500.00	14543.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	5428.00	11100.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	43.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5428.00	11057.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 16

(check only one)

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

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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC(ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial) <b>A. THOMAS GEISSLER</b>		Date of Receipt M / D / Y 02 / 06 / 2004
Mailing Address 11 LOWER DRIVE		Transaction ID: INC:A:32551
City	State	Zip Code
MILL VALLEY	CA	94041
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer FIREMAN'S FUND	Occupation PRESIDENT OF COMMERCIAL BUSINESS	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. PETER A. LEFKIN</b>		Date of Receipt M / D / Y 02 / 06 / 2004
Mailing Address 4112 38TH ST NW		Transaction ID: INC:A:32529
City	State	Zip Code
WASHINGTON	DC	20016
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 130.00
Name of Employer FIREMAN'S FUND INS. CO.	Occupation SR. VP - GOVERNMENT & INDUSTRY AFFAIRS	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>C. PETER PRESPERIN</b>		Date of Receipt M / D / Y 02 / 06 / 2004
Mailing Address 146 CREST ROAD		Transaction ID: INC:A:32573
City	State	Zip Code
NOVATO	CA	94945
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer FIREMAN'S FUND	Occupation EXECUTIVE VICE PRESIDENT	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>290.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 16

(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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC(ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial) <b>A. CHARLES KAVITSKY</b>		Date of Receipt M / D / Y 02 / 11 / 2004
Mailing Address 4720 ANNAWAY DRIVE		Transaction ID: INC:A:32696
City EDINA	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer ALLIANZ LIFE	Occupation PRESIDENT, CMO	Aggregate Year-to-Date ▼ 320.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. GABBY MATZDORFF</b>		Date of Receipt M / D / Y 02 / 11 / 2004
Mailing Address 17420 32ND AVE., N.		Transaction ID: INC:A:32696
City PLYMOUTH	State MN	Zip Code 55447
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer ALLIANZ LIFE	Occupation CFO	Aggregate Year-to-Date ▼ 320.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. NEIL MC KAY</b>		Date of Receipt M / D / Y 02 / 11 / 2004
Mailing Address 8184 JEWEL LANE		Transaction ID: INC:A:32700
City MAPLE GROVE	State MN	Zip Code 55311
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer ALLIANZ LIFE	Occupation SR VP AND CHIEF ACTUARY	Aggregate Year-to-Date ▼ 320.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	<b>240.00</b>
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 8 / 16

(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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC(ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial) <b>A. MARK ZESBAUGH</b>		Date of Receipt M / D / Y 02 / 11 / 2004
Mailing Address 3515 THORWOOD CT.		Transaction ID: INC:A:32717
City EAGAN	State MN	Zip Code 55123
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer ALLIANZ LIFE	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. THOMAS GEISSLER</b>		Date of Receipt M / D / Y 02 / 20 / 2004
Mailing Address 11 LOWER DRIVE		Transaction ID: INC:A:32740
City MILL VALLEY	State CA	Zip Code 94941
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer FIREMAN'S FUND	Occupation PRESIDENT OF COMMERCIAL BUSINESS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. PETER A. LEFKIN</b>		Date of Receipt M / D / Y 02 / 20 / 2004
Mailing Address 4112 38TH ST NW		Transaction ID: INC:A:32719
City WASHINGTON	State DC	Zip Code 20018
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 130.00
Name of Employer FIREMAN'S FUND INS. CO.	Occupation SR. VP - GOVERNMENT & INDUSTRY AFFAIRS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>290.00</b>
TOTAL This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: PAGE 9 / 16  
(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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC(ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial) <b>A. PETER PRESPERIN</b>		Date of Receipt M / D / Y 02 / 20 / 2004
Mailing Address 146 CREST ROAD		Transaction ID: INC:A:32762
City	State	Zip Code
NOVATO	CA	94845
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer FIREMAN'S FUND	Occupation EXECUTIVE VICE PRESIDENT	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. CHARLES KAVITSKY</b>		Date of Receipt M / D / Y 02 / 25 / 2004
Mailing Address 4729 ANNAWAY DRIVE		Transaction ID: INC:A:32657
City	State	Zip Code
EDINA	MN	55436
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer ALLIANZ LIFE	Occupation PRESIDENT, CMO	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. GABBY MATZDORFF</b>		Date of Receipt M / D / Y 02 / 25 / 2004
Mailing Address 17420 32ND AVE., N.		Transaction ID: INC:A:32660
City	State	Zip Code
PLYMOUTH	MN	55447
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer ALLIANZ LIFE	Occupation CFO	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>240.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 10 / 16  
(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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC(ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial) <b>A. NEIL MC KAY</b>		Date of Receipt M / D / Y 02 / 25 / 2004
Mailing Address 8184 JEWEL LANE		Transaction ID: INC:A:32661
City	State	Zip Code
MAPLE GROVE	MN	55311
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer ALLIANZ LIFE	Occupation SR VP AND CHIEF ACTUARY	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. MARK ZESBAUGH</b>		Date of Receipt M / D / Y 02 / 25 / 2004
Mailing Address 3515 THORWOOD CT.		Transaction ID: INC:A:32678
City	State	Zip Code
EAGAN	MN	55123
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer ALLIANZ LIFE	Occupation CEO	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>160.00</b>
TOTAL This Period (last page this line number only) .....	▶	<b>1220.00</b>

**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 11 / 16

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC(ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial)  
**A. CARPER FOR SENATE**

Mailing Address 19 EAST COMMONS BLVD, 2ND FLOOR

City NEW CASTLE State DE Zip Code 19720

Purpose of Disbursement

Candidate Name THOMAS CARPER

Office Sought: House Disbursement For: 2006  
 Senate  Primary General  
 President  
 State: DE District Other (specify) ▼

Transaction ID: EXP:B:32281  
Date of Disbursement  
02 / 03 / 2004

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAMPAC)**

Mailing Address 5015 EASTMAN AVENUE SUITE100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement

Candidate Name GENERAL PURPOSE COMMITTEE

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

Transaction ID: EXP:B:32283  
Date of Disbursement  
02 / 03 / 2004

Amount of Each Disbursement this Period  
2000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. FRIENDS OF GORDON SMITH**

Mailing Address 228 S WASHINGTON STREET, SUITE 340

City ALEXANDRIA State CA Zip Code 22314

Purpose of Disbursement

Candidate Name GORDON SMITH

Office Sought: House Disbursement For: 2006  
 Senate  Primary General  
 President  
 State: OR District Other (specify) ▼

Transaction ID: EXP:B:32284  
Date of Disbursement  
02 / 03 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ▶ **3500.00**

**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 12 / 16

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC(ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial)  
**A. FRIENDS OF JOE BACA**

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement

Candidate Name  
JOE BACA

Office Sought:  House  Senate  President  
State: CA District: 43

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: EXP:B:32282  
Date of Disbursement  
02 / 03 / 2004

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. BENNETT ELECTION COMMITTEE, INC**

Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650

City SALT LAKE CITY State UT Zip Code 84101

Purpose of Disbursement

Candidate Name  
ROBERT BENNETT

Office Sought:  House  Senate  President  
State: UT District:

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: EXP:B:32520  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. BOB MATSUI FOR CONGRESS**

Mailing Address 8885 WILSHIRE BLVD., SUITE 220

City BEVERLY HILLS State CA Zip Code 90211

Purpose of Disbursement

Candidate Name  
BOB MATSUI

Office Sought:  House  Senate  President  
State: CA District: 5

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: EXP:B:32519  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ▶ **2500.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 16

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC/ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial)  
**A. CRANE FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 8534

City ROLLING MEADOWS State IL Zip Code 60008

Purpose of Disbursement

Candidate Name PHILIP CRANE

Office Sought:  House  Senate  President  
State: IL District B

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: EXP:B:32523  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. EVAN BAYH COMMITTEE**

Mailing Address 850 FT. WAYNE AVENUE

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement

Candidate Name EVAN BAYH

Office Sought:  House  Senate  President  
State: IN District

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: EXP:B:32521  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. GARY MILLER FOR CONGRESS COMMITTEE**

Mailing Address 721 S. BREA CANYON ROAD, SUITE 7

City DIAMOND BAR State CA Zip Code 91789

Purpose of Disbursement

Candidate Name GARY MILLER

Office Sought:  House  Senate  President  
State: CA District 42

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: EXP:B:32525  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2500.00</b>
<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)

PAGE 14 / 16

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC/ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial)  
**A. GUTKNECHT FOR U.S. CONGRESS COMMITTEE**

Mailing Address P.O. BOX 8428

City ROCHESTER State MN Zip Code 55903

Purpose of Disbursement

Candidate Name  
GILBERT WILLIAM GITKNECHT, JR.

Office Sought:  House  Senate  President  
State: MN District 1

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: EXP:B:32517  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. JIM RAMSTAD VOLUNTEER COMMITTEE**

Mailing Address 1809 PLYMOUTH ROAD SOUTH #310

City MINNETONKA State MN Zip Code 55905

Purpose of Disbursement

Candidate Name  
JIM RAMSTAD

Office Sought:  House  Senate  President  
State: MN District 3

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: EXP:B:32522  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. KIND FOR CONGRESS COMMITTEE**

Mailing Address 205 5TH AVENUE SOUTH, SUITE 42B

City LA CROSSE State WI Zip Code 54601

Purpose of Disbursement

Candidate Name  
JAMES KIND

Office Sought:  House  Senate  President  
State: WI District 3

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: EXP:B:32524  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **1500.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 16

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC(ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial)  
**A. LEADERSHIP PAC 2004**

Mailing Address 675 N. WASHINGTON STREET, SUITE 41

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name  
GENERAL PURPOSE COMMITTEE

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

Transaction ID: EXP:B:32518  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
1500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. MARK KENNEDY FOR CONGRESS**

Mailing Address P.O. BOX 49333

City BLAINE State MN Zip Code 55448

Purpose of Disbursement

Candidate Name  
MARK KENNEDY

Office Sought:  House Senate President  
State: MN District B

Disbursement For: 2004  
 Primary General Other (specify) ▼

Transaction ID: EXP:B:32515  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. MARY OSE FOR CONGRESS**

Mailing Address 30151 TOMAS

City RANCHO SANTA MARGA State CA Zip Code 92688

Purpose of Disbursement

Candidate Name  
MARY OSE

Office Sought:  House Senate President  
State: CA District 3

Disbursement For: 2004  
 Primary General Other (specify) ▼

Transaction ID: EXP:B:32526  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
500.00

011  
Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **2500.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 16

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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)  
ALLIANZ LIFE INSURANCE CO/FIREMAN'S FUND INSURANCE CO PAC/ALLIANZ LIFE/FIREMAN'S FUND PA

Full Name (Last, First, Middle Initial)  
**A. MISSOURIANS FOR KIT BOND**

Mailing Address 147 N. MERAMEC, SUITE 100

City CLAYTON State MO Zip Code 63105

Purpose of Disbursement

Candidate Name  
KIT BOND

Office Sought: House Disbursement For: 2004  
 Senate X Primary General  
 President Other (specify) ▼

State: MO District

Transaction ID: EXP:B:32518  
Date of Disbursement  
02 / 26 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. PETE SESSIONS FOR CONGRESS 2004**

Mailing Address P.O. BOX 38585

City DALLAS State TX Zip Code 75238

Purpose of Disbursement

Candidate Name  
PETE SESSIONS

Office Sought:  House Disbursement For: 2004  
 Senate X Primary General  
 President Other (specify) ▼

State: TX District 32

Transaction ID: EXP:B:32527  
Date of Disbursement  
02 / 27 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional) .....	▶	2000.00
TOTAL This Period (last page this line number only) .....	▶	14500.00