

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

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

FOR LINE NUMBER: PAGE 2 OF 3

(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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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) **Employers Mutual Casualty Co. Political Action Committee for Responsible Federal Government**

A. Jerry Harlow
 Full Name (Last, First, Middle Initial)
 Mailing Address
6490 Devonshire Dr
 City State Zip Code
Chanhassen MN 55317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **EMC Insurance Companies** Occupation **Resident Vice President**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
177.88

Payroll Deductions - See Date of Receipt Attached

MM	DD	YYYY
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Amount of Each Receipt this Period

30.64

B. Bruce Kelley
 Full Name (Last, First, Middle Initial)
 Mailing Address
14 Glenview Dr
 City State Zip Code
Des Moines IA 50312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **EMC Insurance Companies** Occupation **President & CEO**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
1,750.00

Payroll Deductions - See Date of Receipt Attached

MM	DD	YYYY
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Amount of Each Receipt this Period

300.00

C. Robert Morlan
 Full Name (Last, First, Middle Initial)
 Mailing Address
3404 Wakonda Ct
 City State Zip Code
Des Moines IA 50321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **EMC Insurance Companies** Occupation **Asst VP & Community Relations**
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
410.00

Payroll Deductions - See Date of Receipt Attached

MM	DD	YYYY
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Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional) ▶

370.64

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

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