

**EMC**  
**Insurance Companies**

P.O. Box 712 ■ Des Moines, IA 50303-0712 ■ 515.280.2511

RECEIVED  
FEC MAIL CENTER

2016 JUL 15 AM 9: 59

**COMMITTEE FOR RESPONSIBLE FEDERAL GOVERNMENT**

July 11, 2016

**Multi-Candidate Committee**

FEDERAL ELECTION COMMISSION  
999 E ST NW  
WASHINGTON DC 20463

Re: FEC Form 3X

Enclosed are the following reports for April 1, 2016 through June 30, 2016:

Form 3x - Report of Receipts and Disbursements  
Schedule A - Itemized Receipts

Please contact me at (515)345-2788 if you should have any questions.



Ron Herman  
Employers Mutual Casualty Company  
Assistant Vice President

Enclosures

NOTICE: ON THE LEFT SIDE OF THE ENVELOPE

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2016 JUL 15 AM 9:59

Office Use Only

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

Employers Mutual Casualty Co Political Action Committee for Responsible  
Federal Government

ADDRESS (number and street) 717 Mulberry Street  
 Check if different than previously reported. (ACC)  
Des Moines IA 50309 - 0712

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

C 00163873

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of  

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of  

5. Covering Period 04 / 01 / 2016 through 06 / 30 / 2016

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 Bruce G. Kelley

Signature of Treasurer *Bruce G. Kelley* Date 07 / 11 / 2016

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

20160715 10:00:00 AM

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period: From: 04 01 2016 To: 06 30 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2016</u>		<u>2360434</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>1780399</u>	
(c) Total Receipts (from Line 19) .....	<u>416619</u>	<u>836583</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>2197017</u>	<u>3197017</u>
7. Total Disbursements (from Line 31) .....	<u>- 0 -</u>	<u>1000000</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<u>2197017</u>	<u>2197017</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<u>NONE</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<u>NONE</u>	

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. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period: From: 04 / 01 / 2016 To: 06 / 30 / 2016

**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).....
  - (ii) Unitemized.....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

68652  
347967  
416619

114804  
721779  
836583

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

416619

836583

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

416619

836583

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

416619

836583

NON-FEDERAL CONTRIBUTIONS

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	- 0 -	10,000.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs) .....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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 Activity (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)) ..	- 0 -	10,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	- 0 -	10,000.00

NON-FEDERAL SHARE

**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) .....	416619	836583
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	416619	836583
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	- 0 -	- 0 -

7800400001NO:JH:VO:010101

**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	OF
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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) **Employers Mutual Casualty Co. Political Action Committee for Responsible Federal Government**

A. Full Name (Last, First, Middle Initial) **Kelley, Bruce G**

Mailing Address **717 Mulberry**

City **Des Moines** State **IA** Zip Code **50309**

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

Name of Employer **EMC Insurance Companies** Occupation **Executive CEO**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **92304**

Date of Receipt **Various**

Amount of Each Receipt this Period **46152**

**Biweekly @ \$76.92 per pay period for 6 periods**

B. Full Name (Last, First, Middle Initial) **Hallenbeck, Ron**

Mailing Address **717 Mulberry**

City **Des Moines** State **IA** Zip Code **50309**

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

Name of Employer **EMC Insurance Companies** Occupation **Exec. Vice President**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **210.00**

Date of Receipt **Various**

Amount of Each Receipt this Period **10500**

**Biweekly @ \$17.50 per pay period for 6 periods**

C. Full Name (Last, First, Middle Initial) **Prindiville, Dennis**

Mailing Address **5445 DTC Parkway, Ste 320**

City **Greenwood Village** State **CO** Zip Code **80111**

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

Name of Employer **EMC Insurance Companies** Occupation **Reg. VP + Branch Manager**

Receipt For:  
 Primary  General  
 Other (specify) **▼**

Aggregate Year-to-Date **24000**

Date of Receipt **Various**

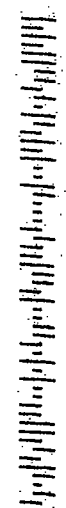
Amount of Each Receipt this Period **120.00**

**Biweekly @ \$20.00 per pay period for 6 periods**

SUBTOTAL of Receipts This Page (optional).....▶	<b>68652</b>
TOTAL This Period (last page this line number only).....▶	<b>68652</b>

NON-FUNCTIONAL

CERTIFIED MAIL

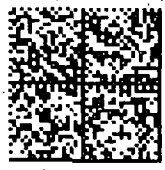


**EMC**  
INSURANCE

91 7199 9991 7030 7464 5640

RECEIVED  
FEDERAL MAIL CENTER

2016 JUL 15 AM 9:59



U.S. POSTAGE >> PITNEY BOWES  
ZIP 50309 \$ 006.01<sup>0</sup>  
02 1W  
0001401139 JUL 11 2016

50306-0712

im

FIRST CLASS

FIRST CLASS

FIRST CLASS

# FIRST CLASS MAIL

**EMC**  
Insurance Companies

P.O. Box 712 ▪ Des Moines, IA 50306-0712

FEDERAL ELECTION COMMISSION  
999 E ST NW  
WASHINGTON, DC 20463

RECIPIENT:



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Date of Receipt  
 Postmarked

USPS Registered/Certified Postmarked (R/C)  
7/11/16

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

 7/15/16  
 PREPARER DATE PREPARED

NO POSTMARK REQUIRED