

**EMC**  
**Insurance Companies**

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

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**COMMITTEE FOR RESPONSIBLE STATE GOVERNMENT**

July 7, 2015

**Multi-Candidate Committee**

FEDERAL ELECTION COMMISSION  
999 E ST NW  
WASHINGTON DC 20463

Re: FEC Form 3X

Enclosed are the following reports for January 1, 2015 through June 30, 2015:

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

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



Ron Herman  
Employers Mutual Casualty Company  
Assistant Vice President

Enclosures

NON-PROFIT ORGANIZATION



**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:

01 01 2015

To:

00 30 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015	221029.71	221029.71
(b) Cash on Hand at Beginning of Reporting Period.....	221029.71	
(c) Total Receipts (from Line 19) .....	97529.77	97529.77
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	32382.08	32382.08
7. Total Disbursements (from Line 31) .....	14500.00	14500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	17882.08	17882.08
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	NDNE	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	NDNE	

2015-07-14 03:00:00 AM



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







**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	<input type="checkbox"/>	11b	<input type="checkbox"/>
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	11c	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	15	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	12	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	16	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<input type="checkbox"/>		<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) **Employers Mutual Casualty Co. Political Action Committee for Responsible Federal Government**

Full Name (Last, First, Middle Initial) A. <b>Hallenbeck, Ron D.</b>		payroll deductions - Date of Receipt
Mailing Address <b>5880 Brentwood Circle</b>		<b>VARIOUS</b>
City <b>Johnston</b>	State <b>IA</b>	Zip Code <b>50131</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>227.50</b>
Name of Employer <b>EMC Insurance Companies</b>	Occupation <b>EXEC VICE PRESIDENT</b>	<b>Bi-weekly @ \$17.50 per pay period for 13 periods.</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>227.50</b>	

Full Name (Last, First, Middle Initial) B. <b>Kelley, Bruce G.</b>		payroll deductions - Date of Receipt
Mailing Address <b>14 Glen Dr.</b>		<b>VARIOUS</b>
City <b>DES MOINES</b>	State <b>IA</b>	Zip Code <b>50312</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>999.90</b>
Name of Employer <b>EMC Insurance Companies</b>	Occupation <b>EXECUTIVE CEO</b>	<b>Bi-weekly @ \$76.92 per pay period for 13 periods.</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>999.90</b>	

Full Name (Last, First, Middle Initial) C. <b>Prindiville, Dennis</b>		payroll deductions - Date of Receipt
Mailing Address <b>10352 S. JACKSON Exp Ct.</b>		<b>VARIOUS</b>
City <b>PURDURA</b>	State <b>CO</b>	Zip Code <b>80010</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>210.00</b>
Name of Employer <b>EMC Insurance Companies</b>	Occupation <b>Reg VP &amp; Branch Manager</b>	<b>Bi-weekly @ \$20.00 per pay period for 13 periods.</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>210.00</b>	

SUBTOTAL of Receipts This Page (optional).....▶	<b>1,487.40</b>
TOTAL This Period (last page this line number only).....▶	<b>1,487.40</b>

14-00000-1M10

**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 OF 2

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

Full Name (Last, First, Middle Initial)

A.

NAMIC PAC

Mailing Address

122 C St. NW Ste 540

City

Washington DC

State

Zip Code

20001

Purpose of Disbursement

Political Distribution

Candidate Name

011

Category/  
Type

Date of Disbursement

01 / 13 / 2015

Amount of Each Disbursement this Period

500.00

Office Sought:

House

Senate

President

State:

District

Disbursement For:

Primary

General

Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

PCI PAC

Mailing Address

2600 S RIVER ROAD

City

Des Plaines

State

IL

Zip Code

60018-3286

Purpose of Disbursement

Political Contribution

Candidate Name

011

Category/  
Type

Date of Disbursement

01 / 13 / 2015

Amount of Each Disbursement this Period

50.00

Office Sought:

House

Senate

President

State:

District

Disbursement For:

Primary

General

Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Rod Blum for Congress

Mailing Address

2728 Ashbury Road Ste 400

City

Dubuque

State

IA

Zip Code

52001

Purpose of Disbursement

Political Contribution

Candidate Name

Rod Blum

011

Category/  
Type

Date of Disbursement

03 / 06 / 2015

Amount of Each Disbursement this Period

15.00

Office Sought:

House

Senate

President

State: IA

District

Disbursement For:

Primary

General

Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1150.00

TOTAL This Period (last page this line number only)





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Des Moines, IA 50306-0712

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20463 44/RC  
Signature Required

FEDERAL ELECTION COMMISSION  
999 E ST NW  
WASHINGTON DC 20463

**IMPORTANT:**  
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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.

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 PREPARER

**7/14/15**  
 DATE PREPARED

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