

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		265080.24
(b) Cash on Hand at Beginning of Reporting Period.....	217767.97	
(c) Total Receipts (from Line 19)	40065.52	734560.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	257833.49	999640.29
7. Total Disbursements (from Line 31).....	144694.83	886501.63
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	113138.66	113138.66
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	

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

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Report Covering the Period: From: 09 / 01 / 2015 To: 09 / 30 / 2015

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).....	29262.17	564781.35
(ii) Unitemized	10803.35	169253.70
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	40065.52	734035.05
(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)	40065.52	734035.05
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	525.00
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 Transfers (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))..... ▶	40065.52	734560.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	40065.52	734560.05

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) Allocated 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	1894.83	17376.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1894.83	17376.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	142500.00	868000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	300.00	1125.00
(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)).....	300.00	1125.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	144694.83	886501.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	144694.83	886501.63

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)	40065.52	734035.05
34. Total Contribution Refunds (from Line 28(d))	300.00	1125.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39765.52	732910.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1894.83	17376.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1894.83	17376.63

**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 6 OF 80
<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Beth S. Caldwell
Full Name (Last, First, Middle Initial)

Mailing Address 500 Faunce Corner Road
Bldg 100 Ste 120

City Dartmouth State MA Zip Code 02747-1278

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

Name of Employer Sylvia & Co Insurance Agency, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
09 / 11 / 2015
Transaction ID : 13565037

Amount of Each Receipt this Period
300.00

B. Melanie L. Parsons
Full Name (Last, First, Middle Initial)

Mailing Address 115 North Main

City Viborg State SD Zip Code 57070-2072

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

Name of Employer Parsons' Insurance Agency Inc Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
09 / 03 / 2015
Transaction ID : 13565520

Amount of Each Receipt this Period
100.00

C. Andy C Bassett
Full Name (Last, First, Middle Initial)

Mailing Address 4331 N 156th St

City Omaha State NE Zip Code 68116-1429

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

Name of Employer Ellerbrock-Norris Insurance Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
09 / 04 / 2015
Transaction ID : 13565525

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 7 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. John E. Bush
 Full Name (Last, First, Middle Initial)
 Mailing Address 12002 Pacific St
 City Omaha State NE Zip Code 68154-3507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NP Dodge Insurance Agency, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 04 / 2015
Transaction ID : 13565526
 Amount of Each Receipt this Period
 250.00

B. Sandra Albrecht
 Full Name (Last, First, Middle Initial)
 Mailing Address 5330 N La Cholla Blvd
 City Tucson State AZ Zip Code 85741-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Mahoney Group Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 04 / 2015
Transaction ID : 13565529
 Amount of Each Receipt this Period
 250.00

C. Mike Brown
 Full Name (Last, First, Middle Initial)
 Mailing Address 1835 S Extension Rd
 City Mesa State AZ Zip Code 85210-5942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Mahoney Group Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 04 / 2015
Transaction ID : 13565530
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Pete Couture
Full Name (Last, First, Middle Initial)

Mailing Address 1835 S Extension Rd

City Mesa State AZ Zip Code 85210-5942

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

Name of Employer The Mahoney Group Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2015
Transaction ID : 13565531

Amount of Each Receipt this Period
 250.00

B. Steven R. Goble
Full Name (Last, First, Middle Initial)

Mailing Address 1835 S Extension Rd

City Mesa State AZ Zip Code 85210-5942

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

Name of Employer The Mahoney Group Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2015
Transaction ID : 13565532

Amount of Each Receipt this Period
 1000.00

C. Michael Mesenbrink
Full Name (Last, First, Middle Initial)

Mailing Address 1835 S Extension Rd

City Mesa State AZ Zip Code 85210-5942

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

Name of Employer The Mahoney Group Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2015
Transaction ID : 13565534

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 9 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Dean Nelson
Full Name (Last, First, Middle Initial)
Mailing Address 1835 S Extension Rd
City Mesa State AZ Zip Code 85210-5942
FEC ID number of contributing federal political committee. **C**
Name of Employer The Mahoney Group Occupation Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **09 / 04 / 2015**
Transaction ID : 13565535
Amount of Each Receipt this Period **500.00**

B. Glen Nelson
Full Name (Last, First, Middle Initial)
Mailing Address 1119 E Cottonwood Ln
City Casa Grande State AZ Zip Code 85122-2950
FEC ID number of contributing federal political committee. **C**
Name of Employer M & O Agencies, Inc. dba The Mahoney G Occupation Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **09 / 04 / 2015**
Transaction ID : 13565536
Amount of Each Receipt this Period **1000.00**

C. Drew Newton
Full Name (Last, First, Middle Initial)
Mailing Address 5330 N La Cholla Blvd
City Tucson State AZ Zip Code 85741-3815
FEC ID number of contributing federal political committee. **C**
Name of Employer The Mahoney Group Occupation Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **09 / 04 / 2015**
Transaction ID : 13565537
Amount of Each Receipt this Period **300.00**

SUBTOTAL of Receipts This Page (optional)..... **1800.00**
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 10 OF 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Robert Rice
 Full Name (Last, First, Middle Initial)
 Mailing Address 5330 N La Cholla Blvd
 City Tucson State AZ Zip Code 85741-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mahoney Group, The Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 04 / 2015
Transaction ID : 13565539
 Amount of Each Receipt this Period 250.00

B. RBrad Rucker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1740 Beverly Ave # A
 City Kingman State AZ Zip Code 86409-3564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Mahoney Group Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 04 / 2015
Transaction ID : 13565540
 Amount of Each Receipt this Period 500.00

C. Jason Whiting
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 S WHITE MOUNTAIN RD STE 401B
 City SHOW LOW State AZ Zip Code 85901-7117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Mahoney Group Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 04 / 2015
Transaction ID : 13565541
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
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 11 OF 80
<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Matthew DeFendis
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 5479

City Fresno	State CA	Zip Code 93755-5479
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FEC ID number of contributing federal political committee. **C**

Name of Employer DiBudo & DeFendis Insurance Brokers,	Occupation Insurance Agent
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : 13565542

Amount of Each Receipt this Period
500.00

B. Dennis E. White
Full Name (Last, First, Middle Initial)
Mailing Address 3130 Wilshire Blvd Suite 200

City Santa Monica	State CA	Zip Code 90403-2352
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FEC ID number of contributing federal political committee. **C**

Name of Employer White & Company Insurance, Inc.	Occupation Insurance Agent
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : 13565544

Amount of Each Receipt this Period
250.00

C. Kevin L Malloy
Full Name (Last, First, Middle Initial)
Mailing Address 4 Village Square

City Smyrna	State DE	Zip Code 19977-1852
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pratt Insurance, Inc.	Occupation Insurance Agent
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2015

Transaction ID : 13565545

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
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 12 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. James E. Verdi Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 30 N Union St Ste 202

City Rochester State NY Zip Code 14607-1345

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

Name of Employer Lawley-Andolina-Verdi, LLC Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2015
Transaction ID : 13567864

Amount of Each Receipt this Period 250.00

B. Carl T. Sato
Full Name (Last, First, Middle Initial)

Mailing Address 615 Piikoi St # 1901

City Honolulu State HI Zip Code 96814-3147

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

Name of Employer Business Insurance Services, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 10 / 2015
Transaction ID : 13567876

Amount of Each Receipt this Period 250.00

C. Willene White
Full Name (Last, First, Middle Initial)

Mailing Address 219 W Fourth St

City Ottumwa State IA Zip Code 52501-2513

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

Name of Employer NOEL Insurance, Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 10 / 2015
Transaction ID : 13567877

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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 14 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Tony Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 469
 City Summerville State GA Zip Code 30747-0469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Agency Service Group, Inc. dba Flegal Occupation Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **09 / 10 / 2015**
Transaction ID : 13567902
 Amount of Each Receipt this Period **500.00**

B. Bill Vogedes
 Full Name (Last, First, Middle Initial)
 Mailing Address 401403 S Broad Street
 City Edenton State NC Zip Code 27932-0888
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vogedes Insurance Agency, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1110.00**

Date of Receipt **09 / 10 / 2015**
Transaction ID : 13567903
 Amount of Each Receipt this Period **50.00**

C. Jeannine A. Giesler
 Full Name (Last, First, Middle Initial)
 Mailing Address 349 Rice Street
 City Elmore State OH Zip Code 43416-9404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversified Insurance Services, LLC Occupation Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 10 / 2015**
Transaction ID : 13567905
 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: (check only one)	PAGE 15 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial) A. Keith Blackerby		Date of Receipt MM / DD / YYYY 09 / 10 / 2015 Transaction ID : 13567906
Mailing Address 310 N State Street Suite 220		Amount of Each Receipt this Period 250.00
City Lake Oswego	State OR	Zip Code 97034-3259
FEC ID number of contributing federal political committee. C	Name of Employer Bisnett Insurance	Occupation Insurance Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ronald G. Bixby		Date of Receipt MM / DD / YYYY 09 / 10 / 2015 Transaction ID : 13567907
Mailing Address 150 Main St		Amount of Each Receipt this Period 250.00
City Ludlow	State VT	Zip Code 05149-1040
FEC ID number of contributing federal political committee. C	Name of Employer Ludlow Insurance Agency	Occupation Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Monty Dise		Date of Receipt MM / DD / YYYY 09 / 10 / 2015 Transaction ID : 13567909
Mailing Address 14021 Charter Park Dr		Amount of Each Receipt this Period 250.00
City Midlothian	State VA	Zip Code 23114-4452
FEC ID number of contributing federal political committee. C	Name of Employer Asset Protection Group, Inc	Occupation Insurance Agent
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 16 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Andrew J. Meloni
 Full Name (Last, First, Middle Initial)
 Mailing Address 45 East Ave
 City Rochester State NY Zip Code 14604-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Brown & Brown of NY, Inc. (Rochester) Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 16 / 2015
Transaction ID : 13567958
 Amount of Each Receipt this Period 250.00

B. Jim Agan
 Full Name (Last, First, Middle Initial)
 Mailing Address 447 Southwest Drive
 City Jonesboro State AR Zip Code 72401-5856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Stephens Insurance, LLC Occupation Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13567967
 Amount of Each Receipt this Period 10.00

C. Ronald Lensing
 Full Name (Last, First, Middle Initial)
 Mailing Address 8315 Cantrell Ste 300
 City Little Rock State AR Zip Code 72227-2357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BancorpSouth Insurance Services, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13567970
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 17 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial) A. Lanny L. Hair			Date of Receipt MM / DD / YYYY 09 / 15 / 2015 Transaction ID : 13567972
Mailing Address 333 E Flower St			Amount of Each Receipt this Period 42.00
City Phoenix	State AZ	Zip Code 85012-2611	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 378.00
Name of Employer Independent Insurance Agents and Broke		Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Gillian McCarron			Date of Receipt MM / DD / YYYY 09 / 15 / 2015 Transaction ID : 13567974
Mailing Address 7728 Vance Drive			Amount of Each Receipt this Period 25.00
City Arvada	State CO	Zip Code 80003-2140	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 225.00
Name of Employer Lakeside Insurance Center		Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Michael S. Rifkin			Date of Receipt MM / DD / YYYY 09 / 15 / 2015 Transaction ID : 13567975
Mailing Address 1499 Blake Street # 2G			Amount of Each Receipt this Period 100.00
City Denver	State CO	Zip Code 80202-1356	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 900.00
Name of Employer Rifkin Insurance Assocs Inc		Occupation Agency Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	167.00
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 18 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial) A. James J. Byrnes III		Date of Receipt 09 / 15 / 2015 Transaction ID : 13567976
Mailing Address 77 cady lane		Amount of Each Receipt this Period 250.00
City Woodstock	State CT	Zip Code 06281-1800
FEC ID number of contributing federal political committee. C		
Name of Employer Byrnes Agency, Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2250.00	

Full Name (Last, First, Middle Initial) B. William H. Pierz		Date of Receipt 09 / 15 / 2015 Transaction ID : 13567977
Mailing Address 488 Main Ave 3rd Floor		Amount of Each Receipt this Period 50.00
City Norwalk	State CT	Zip Code 06851-1008
FEC ID number of contributing federal political committee. C		
Name of Employer Shoff Darby Companies, Inc.	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. Doreen K. Courtheyn		Date of Receipt 09 / 15 / 2015 Transaction ID : 13567980
Mailing Address 500 E New York Ave		Amount of Each Receipt this Period 67.00
City Deland	State FL	Zip Code 32724-6041
FEC ID number of contributing federal political committee. C		
Name of Employer Page Insurance Agency	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 603.00	

SUBTOTAL of Receipts This Page (optional).....▶	367.00
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 19 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Veronica M Della Porta
 Full Name (Last, First, Middle Initial)
 Mailing Address 7807 Baymeadows Rd East Ste 301
 City Jacksonville State FL Zip Code 32256-9667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Della Porta Group, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13567981
 Amount of Each Receipt this Period
 200.00

B. Lee Martin
 Full Name (Last, First, Middle Initial)
 Mailing Address 3159 Shamrock South
 City Tallahassee State FL Zip Code 32309-3337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Florida Association of Insurance Agent Occupation Director of Health & Benefits
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13567983
 Amount of Each Receipt this Period
 25.00

C. Annette Pointer
 Full Name (Last, First, Middle Initial)
 Mailing Address 3214 US HWY 27 S
 City Sebring State FL Zip Code 33870-5437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 1st Place Insurance LLC Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13567984
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 20 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Stark Harbour
 Full Name (Last, First, Middle Initial)
 Mailing Address 4405 International Blvd
 Suite C105
 City Norcross State GA Zip Code 30093-3013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer William Adams & Associates, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1925.00

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13567999
 Amount of Each Receipt this Period
 275.00

B. Bob Monk
 Full Name (Last, First, Middle Initial)
 Mailing Address 126 N Isabella St
 City Sylvester State GA Zip Code 31791-2158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Worth Insurance Agency, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568003
 Amount of Each Receipt this Period
 50.00

C. Robert J. Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 245 Davis Rd
 City Augusta State GA Zip Code 30907-2407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blanchard & Calhoun Insurance Agency, Occupation Account Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568004
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 21 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Jeffrey Nevison
Full Name (Last, First, Middle Initial)

Mailing Address 8744 Main St
Suite 301

City Woodstock State GA Zip Code 30188-4901

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

Name of Employer Mountain Lakes Insurance, LLC Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 15 / 2015
Transaction ID : 13568005

Amount of Each Receipt this Period
25.00

B. Betsy K. Olson
Full Name (Last, First, Middle Initial)

Mailing Address 3340 Peachtree Rd NE
Suite 1755

City Atlanta State GA Zip Code 30326-1080

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

Name of Employer Rhodes Risk Advisors Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.00

Date of Receipt
09 / 15 / 2015
Transaction ID : 13568006

Amount of Each Receipt this Period
85.00

C. Wilson Stiles
Full Name (Last, First, Middle Initial)

Mailing Address 214 Andrews St

City Rossville State GA Zip Code 30741-1603

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

Name of Employer Agency Service Group, Inc. dba Flegal Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 15 / 2015
Transaction ID : 13568011

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: (check only one)	PAGE 22 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Gregory V. Tapley
 Full Name (Last, First, Middle Initial)
 Mailing Address 885 Wimbish Rd
 City Macon State GA Zip Code 31210-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tapley & Associates Insurance Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568013
 Amount of Each Receipt this Period 41.67

B. Roslyn W. Tripp
 Full Name (Last, First, Middle Initial)
 Mailing Address 5526 Old National Hwy Bldg I
 City College Park State GA Zip Code 30349-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tripp Insurance Services Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568014
 Amount of Each Receipt this Period 100.00

C. George Tripp
 Full Name (Last, First, Middle Initial)
 Mailing Address 5526 Old National Hwy Bldg I
 City College Park State GA Zip Code 30349-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tripp Insurance Services Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568015
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 241.67
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: (check only one)	PAGE 23 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Todd C. Henricks
 Full Name (Last, First, Middle Initial)
 Mailing Address 103 S Jackson St
 City Cerro Gordo State IL Zip Code 61818-0110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Chapman-Henricks Insurance Agency Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568019
 Amount of Each Receipt this Period 50.00

B. Brett A. Schultheis
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 N Weinbach Ave
 City Evansville State IN Zip Code 47711-6004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Schultheis Insurance Agency, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568021
 Amount of Each Receipt this Period 50.00

C. Andy Blumberg
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 82030
 City Baton Rouge State LA Zip Code 70884-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blumberg and Associates, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568023
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 24 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)
A. Brenda L. Case

Mailing Address 2001 1st St

City Slidell State LA Zip Code 70458-3401

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

Name of Employer Lowry-Dunham, Case & Vivien Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : 13568024

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Bret Hughes

Mailing Address 1201 S Purpera Ave Ste 100

City Gonzales State LA Zip Code 70737-4379

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

Name of Employer Hughes Insurance Services, LLC Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : 13568025

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Richard D. Jenkins

Mailing Address 1018 Main St

City Franklinton State LA Zip Code 70438-1709

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

Name of Employer Moore & Jenkins Insurance Agency, LLC Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : 13568026

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 25 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Richard G. Kean III
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Convention St Ste 200
 City Baton Rouge State LA Zip Code 70802-5616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Regions Insurance Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568027
 Amount of Each Receipt this Period 100.00

B. Neil Record
 Full Name (Last, First, Middle Initial)
 Mailing Address 10942 Plank Rd
 City Clinton State LA Zip Code 70722-3311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Record Agency Inc Occupation Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568028
 Amount of Each Receipt this Period 100.00

C. Armond K. Schwing
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E Main St
 City New Iberia State LA Zip Code 70560-3729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Schwing Insurance Agency, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568029
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 26 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Donelson P. Stiel
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 602
 City Franklin State LA Zip Code 70538-0602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer David H Stiel, Jr. Agency Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13568030
 Amount of Each Receipt this Period
 100.00

B. Lee Gaudette III III
 Full Name (Last, First, Middle Initial)
 Mailing Address One Plummers Corner
 City Whitinsville State MA Zip Code 01588-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Gaudette Insurance Agency, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13568031
 Amount of Each Receipt this Period
 100.00

C. Philip W. Richard
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 Garden St # 1B
 City Danvers State MA Zip Code 01923-1430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Phil Richard & Assoc Insurance Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13568032
 Amount of Each Receipt this Period
 25.00

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: (check only one)	PAGE 27 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Ronald C. Jetmore
 Full Name (Last, First, Middle Initial)
 Mailing Address 9545 HG Trueman Rd
 City Lusby State MD Zip Code 20657-2876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jetmore Insurance Group, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568033
 Amount of Each Receipt this Period
 25.00

B. Will Lemanski
 Full Name (Last, First, Middle Initial)
 Mailing Address 2760 East Lansing Suite 5
 City East Lansing State MI Zip Code 48823-7739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Meiers Lombardini Lemanski Insurance Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568035
 Amount of Each Receipt this Period
 25.00

C. Lisa Lemanski
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1270
 City East Lansing State MI Zip Code 48826-1270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Meiers Lombardini Lemanski Insurance Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568036
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 28 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Roberta A. Gibbons
 Full Name (Last, First, Middle Initial)
 Mailing Address 15710 Harmony Way
 City Apple Valley State MN Zip Code 55124-7122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Dyste Williams Agency Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568037
 Amount of Each Receipt this Period 25.00

B. Darian Hunt
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 S Lexington
 City Le Center State MN Zip Code 56057-1310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer House of Insurance Agency, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568038
 Amount of Each Receipt this Period 40.00

C. Jerry E. Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 820 Benson Rd
 City Garner State NC Zip Code 27529-3992
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jones Insurance Agency, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2015
Transaction ID : 13568046
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional).....▶ 115.00
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 29 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Mark W. Rice
 Full Name (Last, First, Middle Initial)
 Mailing Address 129 Franklin St
 City Fayetteville State NC Zip Code 28301-5679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Callahan & Rice Insurance Group, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.50

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568047
 Amount of Each Receipt this Period
 12.50

B. Frank Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 E Main St Suite E
 City Millville State NJ Zip Code 08332-4293
 FEC ID number of contributing federal political committee. **C**
 Name of Employer William R. Mints Agency Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568053
 Amount of Each Receipt this Period
 25.00

C. Thomas J Crowley
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Hampton Rd Ste 1B
 City Southampton State NY Zip Code 11968-5098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cook Maran & Associates Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568055
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	137.50
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 30 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Meghan McGarry
Full Name (Last, First, Middle Initial)

Mailing Address 677 Broadway
4th Fl

City Albany State NY Zip Code 12207-2996

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

Name of Employer Arthur J. Gallagher Risk Management Se Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 15 / 2015
Transaction ID : 13568056

Amount of Each Receipt this Period
25.00

B. John Smith
Full Name (Last, First, Middle Initial)

Mailing Address 380 Broadway

City Newburgh State NY Zip Code 12550-5304

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

Name of Employer William A. Smith & Son Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 15 / 2015
Transaction ID : 13568058

Amount of Each Receipt this Period
25.00

C. James D Sutton
Full Name (Last, First, Middle Initial)

Mailing Address 143 E Main St Ste 1

City East Islip State NY Zip Code 11730-2601

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

Name of Employer James F. Sutton Agency Ltd. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
09 / 15 / 2015
Transaction ID : 13568059

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

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 31 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Rick Russell II
Full Name (Last, First, Middle Initial)

Mailing Address 5050 Ritter Rd

City Mechanicsburg State PA Zip Code 17055-4879

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

Name of Employer Insurance Agents & Brokers Service Gro Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
09 / 15 / 2015
Transaction ID : 13568063

Amount of Each Receipt this Period
35.00

B. David E. Bates
Full Name (Last, First, Middle Initial)

Mailing Address 549 Hope St

City Bristol State RI Zip Code 02809-1832

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

Name of Employer A N Nunes Agency, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
09 / 15 / 2015
Transaction ID : 13568065

Amount of Each Receipt this Period
100.00

C. Mark A Male
Full Name (Last, First, Middle Initial)

Mailing Address 2400 Post Rd

City Warwick State RI Zip Code 02886-2208

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

Name of Employer RI Association of Insurance Agents, In Occupation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
09 / 15 / 2015
Transaction ID : 13568066

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... **235.00**

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 32 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Andrew E. Muller
Full Name (Last, First, Middle Initial)

Mailing Address 1032 Savannah Highway

City Charleston State SC Zip Code 29407-7804

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

Name of Employer Mappus Insurance Agency Inc Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **565.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : 13568069

Amount of Each Receipt this Period
10.00

B. Ryland H. Shaw III
Full Name (Last, First, Middle Initial)

Mailing Address 421 Johnnie Dodds Blvd Suite 200

City Mount Pleasant State SC Zip Code 29464-2911

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

Name of Employer Atlantic Shield Insurance Group, LLC Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **190.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : 13568071

Amount of Each Receipt this Period
25.00

C. G Frank Sheppard
Full Name (Last, First, Middle Initial)

Mailing Address 800 Gracern Rd

City Columbia State SC Zip Code 29210-7693

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

Name of Employer IIABSC Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **760.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2015

Transaction ID : 13568072

Amount of Each Receipt this Period
85.00

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: (check only one)	PAGE 33 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Terry L Tadlock
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Bow Circle
 City State Zip Code
 Hilton Head Island SC 29928-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Coastal Plains Insurance, LLC Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13568073
 Amount of Each Receipt this Period
 50.00

B. Andrew N. Theodore
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 Laurel Street
 City State Zip Code
 Columbia SC 29201-2625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Theodore & Associates Insurance Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 756.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13568074
 Amount of Each Receipt this Period
 84.00

C. Matthew B. Wiseman
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Ronnie Court
 City State Zip Code
 Myrtle Beach SC 29579-4142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Peoples Underwriters, Inc. - Myrtle Be Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13568076
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	159.00
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 34 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Robert N Bradshaw Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 8600 Mayland Dr
 City Richmond State VA Zip Code 23294-4702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Independent Insurance Agents of Virgin Occupation Executive Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568077
 Amount of Each Receipt this Period
250.00

B. Nathan Riedel
 Full Name (Last, First, Middle Initial)
 Mailing Address 127 South Peyton Street
 City Alexandria State VA Zip Code 22314-2879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Independent Insurance Agents & Brokers Occupation Vice President, Political Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **940.00**

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568078
 Amount of Each Receipt this Period
100.00

C. Matt Banaszynski
 Full Name (Last, First, Middle Initial)
 Mailing Address 725 John Nolen Drive
 City Madison State WI Zip Code 53713-1421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ind Ins Agts of Wisconsin Occupation Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **800.00**

Date of Receipt
 09 / 15 / 2015
Transaction ID : 13568079
 Amount of Each Receipt this Period
100.00

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: (check only one)	PAGE 35 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Tom Helbach
Full Name (Last, First, Middle Initial)

Mailing Address 306 Water St

City Mosinee State WI Zip Code 54455-1458

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

Name of Employer Ansay & Associates LLC/Mosinee Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13568080

Amount of Each Receipt this Period
 50.00

B. Charles Gulley
Full Name (Last, First, Middle Initial)

Mailing Address 601 4J Ct Unit A

City Gillette State WY Zip Code 82716-4110

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

Name of Employer HUB International-Gillette Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2015
Transaction ID : 13568082

Amount of Each Receipt this Period
 25.00

C. Raymond M. Ryan
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 106

City Pittsburg State KS Zip Code 66762-0106

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

Name of Employer Ryan Insurance Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2015
Transaction ID : 13578367

Amount of Each Receipt this Period
 500.00

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: (check only one)	PAGE 36 OF 80
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Larry Michael
Full Name (Last, First, Middle Initial)

Mailing Address 522 South Main St

City Frankenkumth State MI Zip Code 48734-1618

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

Name of Employer Emil Rummel Agency, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2015
Transaction ID : 13578370

Amount of Each Receipt this Period 250.00

B. Brian K. Bassett
Full Name (Last, First, Middle Initial)

Mailing Address 2203 Osborne Dr West

City Hastings State NE Zip Code 68901-9109

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

Name of Employer Ellerbrock-Norris Insurance Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 17 / 2015
Transaction ID : 13578371

Amount of Each Receipt this Period 250.00

C. H. James Christensen
Full Name (Last, First, Middle Initial)

Mailing Address 219 Howard Ave

City Saint Paul State NE Zip Code 68873-2120

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

Name of Employer Christensen Insurance Agency Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2015
Transaction ID : 13578372

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: (check only one)	PAGE 37 OF 80
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Steve Robeson
Full Name (Last, First, Middle Initial)
Mailing Address 4435 O Street
City Lincoln State NE Zip Code 68510-1842
FEC ID number of contributing federal political committee. **C**
Name of Employer UNICO Group Inc. Occupation Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 09 / 17 / 2015
Transaction ID : 13578373
Amount of Each Receipt this Period 250.00

B. Larry R. Case
Full Name (Last, First, Middle Initial)
Mailing Address 3315 Emerald Lane
City Jefferson City State MO Zip Code 65109-6878
FEC ID number of contributing federal political committee. **C**
Name of Employer Missouri Association of Insurance Agen Occupation Executive Vice President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 275.00

Date of Receipt 09 / 17 / 2015
Transaction ID : 13578380
Amount of Each Receipt this Period 25.00

C. Mike Luttrell
Full Name (Last, First, Middle Initial)
Mailing Address 6800 Isaacs Orchard Rd
City Springdale State AR Zip Code 72762-6096
FEC ID number of contributing federal political committee. **C**
Name of Employer Walker Brothers Insurance, Inc. Occupation Vice President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 750.00

Date of Receipt 09 / 17 / 2015
Transaction ID : 13578418
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00
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 38 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Richard A. Barber
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 N Market St
 City Washington State NC Zip Code 27889-4933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Morris Insurance Agency, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2015
Transaction ID : 13578423
 Amount of Each Receipt this Period
 250.00

B. Patrick H. Laney
 Full Name (Last, First, Middle Initial)
 Mailing Address 202 North Main Street
 City Catawba State NC Zip Code 28609-9061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Catawba Insurance Agency, LLC. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2015
Transaction ID : 13578424
 Amount of Each Receipt this Period
 50.00

C. Jason Ernest
 Full Name (Last, First, Middle Initial)
 Mailing Address 5050 Ritter Rd
 City Mechanicsburg State PA Zip Code 17055-4879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Insurance Agents & Brokers Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2015
Transaction ID : 13580979
 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: (check only one)	PAGE 39 OF 80
	<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

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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Scott Jones
Full Name (Last, First, Middle Initial)

Mailing Address 8100 Lang Ave NE Suite 101

City Albuquerque State NM Zip Code 87109-4653

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

Name of Employer Brown & Brown of New Mexico, Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2015
Transaction ID : 13581001

Amount of Each Receipt this Period 250.00

B. Stephen C. Marsh
Full Name (Last, First, Middle Initial)

Mailing Address 1260 Nilles Rd Ste 2

City Fairfield State OH Zip Code 45014-7222

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

Name of Employer Preferred Protectors Ins Agcy Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2015
Transaction ID : 13581002

Amount of Each Receipt this Period 250.00

C. Jen McPhillips
Full Name (Last, First, Middle Initial)

Mailing Address 127 South Peyton Street

City Alexandria State VA Zip Code 22314-2879

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

Name of Employer Independent Insurance Agents & Brokers Occupation Assistant Vice President, Government A

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2015
Transaction ID : 13581319

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: (check only one)	PAGE 40 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. David R. Chastain
Full Name (Last, First, Middle Initial)

Mailing Address 10822 Old Mill Rd Ste 2

City Omaha	State NE	Zip Code 68154-2608
---------------	-------------	------------------------

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

Name of Employer Chastain Insurance Agency, Inc.	Occupation Insurance Agent
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2015

Transaction ID : 13582305

Amount of Each Receipt this Period
250.00

B. Charles Hix
Full Name (Last, First, Middle Initial)

Mailing Address 4564 Arapahoe Ave

City Boulder	State CO	Zip Code 80303-1136
-----------------	-------------	------------------------

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

Name of Employer Arthur J. Gallagher	Occupation Insurance Agent
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Transaction ID : 13582344

Amount of Each Receipt this Period
250.00

C. Scott Metzger
Full Name (Last, First, Middle Initial)

Mailing Address 6600 E Hampden Ave Ste 200

City Denver	State CO	Zip Code 80224-3045
----------------	-------------	------------------------

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

Name of Employer CRS Insurance Brokerage	Occupation Insurance Agent
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2015

Transaction ID : 13582345

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 41 OF 80
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Robert P. Holman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3655 N Point Pkwy Ste 425
 City State Zip Code
 Alpharetta GA 30005-8889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Holman and Company Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2015
Transaction ID : 13582346
 Amount of Each Receipt this Period
 500.00

B. James P Gill
 Full Name (Last, First, Middle Initial)
 Mailing Address 235 Oakland Ave
 City State Zip Code
 Rock Hill SC 29730-4021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Gill Insurance Agency Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2015
Transaction ID : 13582351
 Amount of Each Receipt this Period
 250.00

C. Robert H. Clarkson
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 W Main St # 1500
 City State Zip Code
 Louisville KY 40202-2927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 R. H. Clarkson Insurance Agency, LLC Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2015
Transaction ID : 13582788
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ► 1250.00
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 42 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Allen Crawford
Full Name (Last, First, Middle Initial)
Mailing Address 445 S Hwy 27 Suite 201
City Somerset State KY Zip Code 42501-3445
FEC ID number of contributing federal political committee. **C**
Name of Employer Reed Brothers Insurance Services Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2015
Transaction ID : 13582789
Amount of Each Receipt this Period 250.00

B. William S. Latta
Full Name (Last, First, Middle Initial)
Mailing Address 201B North Main Street
City Henderson State KY Zip Code 42420-3100
FEC ID number of contributing federal political committee. **C**
Name of Employer Field & Main Insurance Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2015
Transaction ID : 13582795
Amount of Each Receipt this Period 250.00

C. J. Theodore McClain
Full Name (Last, First, Middle Initial)
Mailing Address 820 S Main St
City Paris State KY Zip Code 40361-1706
FEC ID number of contributing federal political committee. **C**
Name of Employer The Hopewell Company, Inc. Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2015
Transaction ID : 13582797
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
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 43 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Steve Turner
 Full Name (Last, First, Middle Initial)
 Mailing Address 908 Lily Creek Rd Suite 201
 City Louisville State KY Zip Code 40243-2807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Heritage Insurance Service, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2015
Transaction ID : 13582802
 Amount of Each Receipt this Period 250.00

B. Joan Decoste-Zaiger
 Full Name (Last, First, Middle Initial)
 Mailing Address 230 Gardner St
 City Hingham State MA Zip Code 02043-3844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Walter J May Agency Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 25 / 2015
Transaction ID : 13582803
 Amount of Each Receipt this Period 500.00

C. L Victor Jowers Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2004 W Dekalb St
 City Camden State SC Zip Code 29020-2058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Upchurch & Jowers Insurance Agency Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2015
Transaction ID : 13582810
 Amount of Each Receipt this Period 250.00

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: (check only one)	PAGE 44 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial) A. Randall White			Date of Receipt MM / DD / YYYY 09 / 25 / 2015 Transaction ID : 13582813		
Mailing Address 409 North West Ave			Amount of Each Receipt this Period 500.00		
City Crooks	State SD	Zip Code 57020-2018			
FEC ID number of contributing federal political committee. C					
Name of Employer White Insurance Agency Inc.		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) B. George Anderson			Date of Receipt MM / DD / YYYY 09 / 25 / 2015 Transaction ID : 13582814		
Mailing Address 2505 21st Avenue South Suite 301			Amount of Each Receipt this Period 300.00		
City Nashville	State TN	Zip Code 37212-5652			
FEC ID number of contributing federal political committee. C					
Name of Employer Anderson Benson Insurance		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

Full Name (Last, First, Middle Initial) C. Patrick J. Otter			Date of Receipt MM / DD / YYYY 09 / 25 / 2015 Transaction ID : 13582815		
Mailing Address 20102 Cedar Valley Rd Ste 101			Amount of Each Receipt this Period 250.00		
City Lynnwood	State WA	Zip Code 98036-6333			
FEC ID number of contributing federal political committee. C					
Name of Employer Otter Insurance Agency		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

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: (check only one)	PAGE 45 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Tim Dyer
Full Name (Last, First, Middle Initial)

Mailing Address 347 Washington Ave

City Clarksburg State WV Zip Code 26301-2911

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

Name of Employer P.M. Long & Son, Inc. dba Dyer Insuran Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 25 / 2015
Transaction ID : 13582816

Amount of Each Receipt this Period 1000.00

B. John Blair
Full Name (Last, First, Middle Initial)

Mailing Address 2277 Rte 33 Ste 404 Golden Crest Corporate Center

City Hamilton Square State NJ Zip Code 08690-1700

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

Name of Employer Nottingham Insurance Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2015
Transaction ID : 13582878

Amount of Each Receipt this Period 500.00

C. Joe A Hernandez
Full Name (Last, First, Middle Initial)

Mailing Address 3643 Australian Cloud Dr

City Las Vegas State NV Zip Code 89135-7803

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

Name of Employer Branch-Hernandez & Associates Occupation President/ COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 28 / 2015
Transaction ID : 13582883

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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 46 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Aubrey L. Branch
 Full Name (Last, First, Middle Initial)
 Mailing Address 2480 N Decatur Blvd Ste 140
 City Las Vegas State NV Zip Code 89108-2988
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Branch-Hernandez & Associates Occupation Chairman & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2015
Transaction ID : 13582916
 Amount of Each Receipt this Period
 300.00

B. Marc Matson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1835 S Extension Rd
 City Mesa State AZ Zip Code 85210-5942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Mahoney Group Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : 13588704
 Amount of Each Receipt this Period
 250.00

C. Richard Rankin
 Full Name (Last, First, Middle Initial)
 Mailing Address 545 South Third Street Suite 300
 City Louisville State KY Zip Code 40202-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sterling G. Thompson Company Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : 13588712
 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: (check only one)	PAGE 47 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Tara Philbin
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Broadway Ste 304
 City Lynnfield State MA Zip Code 01940-2354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Philbin Insurance Group Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : 13588716
 Amount of Each Receipt this Period
 250.00

B. Clark A. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 716 W Gore
 City Lawton State OK Zip Code 73501-3717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Smith & Sons Insurance Agency, Inc. Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : 13588718
 Amount of Each Receipt this Period
 250.00

C. Michael A Carriker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1813 N Oak St
 City Myrtle Beach State SC Zip Code 29577-3140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Waccamaw Insurance Services, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : 13588720
 Amount of Each Receipt this Period
 300.00

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: (check only one)	PAGE 48 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Kirk Cupp
Full Name (Last, First, Middle Initial)
Mailing Address 32 Southpointe Drive
City Paragould State AR Zip Code 72450-6238
FEC ID number of contributing federal political committee. **C**
Name of Employer General Insurance, Inc. Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
09 / 30 / 2015
Transaction ID : 13588754
Amount of Each Receipt this Period
250.00

B. Michael Corkin
Full Name (Last, First, Middle Initial)
Mailing Address 180 Wells Avenue Suite 301a
City Newton Center State MA Zip Code 02459-3331
FEC ID number of contributing federal political committee. **C**
Name of Employer Corkin Insurance Agency Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
09 / 30 / 2015
Transaction ID : 13588757
Amount of Each Receipt this Period
250.00

C. Peter Gatti
Full Name (Last, First, Middle Initial)
Mailing Address 175 Dwight Rd Ste 309
City Longmeadow State MA Zip Code 01106-1761
FEC ID number of contributing federal political committee. **C**
Name of Employer G W Morisi Insurance Agency Occupation Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
09 / 30 / 2015
Transaction ID : 13588758
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
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 49 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

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

Mailing Address 4000 Centre Green Way Ste 140

City	State	Zip Code
Cary	NC	27513-5758

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

Name of Employer	Occupation
HUB International Southeast	Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : 13588766

Amount of Each Receipt this Period
500.00

B. Thomas Marshall
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 560128

City	State	Zip Code
Charlotte	NC	28256-0128

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

Name of Employer	Occupation
UNC - Charlotte	Lecturer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : 13588768

Amount of Each Receipt this Period
250.00

C. E Stuart Powell Jr
Full Name (Last, First, Middle Initial)

Mailing Address 101 Weston Oaks Ct

City	State	Zip Code
Cary	NC	27513-2256

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

Name of Employer	Occupation
Independent Insurance Agents of North	Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2015

Transaction ID : 13588769

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 50 OF 80
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Jo Erin Stuteville
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 Baptiste Dr Suite 102
 City Paola State KS Zip Code 66071-1329
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Elliott Insurance Group Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2015
Transaction ID : 13600502
 Amount of Each Receipt this Period 250.00

B. Valerie Privett
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Center Park Suite 102
 City Knoxville State TN Zip Code 37922-3470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Privett Insurance Group Occupation Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 0.00

Date of Receipt 09 / 03 / 2015
Transaction ID : 13638918
 Amount of Each Receipt this Period 0.00
[MEMO ITEM]
 Refund(s) on Schedule B Totaling \$300.00 This changes the YTD Total to \$0.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	29262.17

**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 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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : 13634938

Amount of Each Disbursement this Period

CREDIT CARD PROCESSING CHARGE

Full Name (Last, First, Middle Initial)

B. Paypal Inc.

Mailing Address 1840 Embarcadero Rd

City Palo Alto State CA Zip Code 94303

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : 13634939

Amount of Each Disbursement this Period

CREDIT CARD PROCESSING CHARGE

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : 13634942

Amount of Each Disbursement this Period

CREDIT CARD PROCESSING CHARGE

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

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Suntrust Merchant Services

Mailing Address P.O. Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : 13634943

Amount of Each Disbursement this Period

CREDIT CARD PROCESSING CHARGE

Full Name (Last, First, Middle Initial)

B. Suntrust Merchant Services

Mailing Address P.O. Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : 13634944

Amount of Each Disbursement this Period

CREDIT CARD PROCESSING CHARGE

Full Name (Last, First, Middle Initial)

C. Suntrust Merchant Services

Mailing Address P.O. Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : 13634945

Amount of Each Disbursement this Period

CREDIT CARD PROCESSING CHARGE

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

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Tim Scott For Senate

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407

Purpose of Disbursement

011

Candidate Name

Sen. Tim Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SC District:

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529412

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Heartland Values PAC

Mailing Address PO Box 505

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529413

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Jim Renacci For Congress

Mailing Address 150 Smokerise Drive

City Wadsworth State OH Zip Code 44281

Purpose of Disbursement

011

Candidate Name

Rep. James B. Renacci

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 16

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529414

Amount of Each Disbursement this Period

2500.00

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

8500.00

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Yoder For Congress, Inc

Mailing Address PO Box 26742

City Overland Park State KS Zip Code 66225

Purpose of Disbursement

011

Category/
Type

Candidate Name
Kevin Yoder

Office Sought: House
 Senate
 President
State: KS District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529415

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. HECK PAC

Mailing Address 233 Pennsylvania Avenue, SE 2nd Fl

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529416

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Emmer For Congress

Mailing Address PO Box 998

City Anoka State MN Zip Code 55303

Purpose of Disbursement

011

Category/
Type

Candidate Name
Rep. Tom Earl Emmer Jr.

Office Sought: House
 Senate
 President
State: MN District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529417

Amount of Each Disbursement this Period

1000.00

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

6000.00

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. French Hill For Arkansas

Mailing Address PO Box 7841

City Little Rock State AR Zip Code 72217

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. French Hill

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: AR District: 02

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529418

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Mia Love

Mailing Address PO Box 255

City Riverton State UT Zip Code 84065

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mia Love

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: UT District: 04

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529419

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Poliquin For Congress

Mailing Address PO Box 50

City Oakland State ME Zip Code 04963

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Bruce Poliquin

Office Sought: House Senate President

Disbursement For: 2016
 Primary General Other (specify) ▼

State: ME District: 02

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529420

Amount of Each Disbursement this Period

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Donald Norcross For Congress

Mailing Address PO Box 160

City Collingswood State NJ Zip Code 08108

Purpose of Disbursement

011

Candidate Name

Donald Norcross

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NJ District: 01

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529421

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Roskam For Congress Committee

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement

011

Candidate Name

Peter Roskam

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2015

Transaction ID : 13529422

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Capuano For Congress Committee

Mailing Address PO Box 440305

City Somerville State MA Zip Code 02144

Purpose of Disbursement

011

Candidate Name

Rep. Michael E. Capuano

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MA District: 07

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2015

Transaction ID : 13530928

Amount of Each Disbursement this Period

1000.00

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Georgians For Isakson

Mailing Address Post Office Box 250116

City Atlanta State GA Zip Code 30325

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Johnny Isakson

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	2		2	0	1	5

Transaction ID : 13530929

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. CMR PAC

Mailing Address P.O. Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	5

Transaction ID : 13564893

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Blaine For Congress

Mailing Address PO Box 1025

City Jefferson City State MO Zip Code 65102

Purpose of Disbursement

011

Category/
Type

Candidate Name

W Blaine Luetkemeyer

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

Transaction ID : 13580688

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

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

8	5	0	0	0	0	0	0	0	0

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

8	5	0	0	0	0	0	0	0	0

**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Jason Smith For Congress

Mailing Address PO Box 1324

City State Zip Code
Cape Girardeau MO 63702

Purpose of Disbursement

011

Candidate Name

Jason Smith

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

Transaction ID : 13580689

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Stivers For Congress

Mailing Address 4679 Winterset Drive

City State Zip Code
Columbus OH 43220

Purpose of Disbursement

011

Candidate Name

Steve Stivers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

Transaction ID : 13580690

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Tiberi For Congress

Mailing Address 2931 E Dublin Granville Road
Suite 190

City State Zip Code
Columbus OH 43231

Purpose of Disbursement

011

Candidate Name

Rep. Pat J. Tiberi

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	5

Transaction ID : 13580691

Amount of Each Disbursement this Period

1	5	0	0	0	0
---	---	---	---	---	---

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

5	0	0	0	0	0
---	---	---	---	---	---

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

5	0	0	0	0	0
---	---	---	---	---	---

**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Votetipton.Com

Mailing Address PO Box 1582

City Cortez State CO Zip Code 81321

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Scott R. Tipton

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CO District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2015

Transaction ID : 13581280

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Ron Johnson

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2015

Transaction ID : 13581281

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Ron Johnson

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2015

Transaction ID : 13581282

Amount of Each Disbursement this Period

2500.00

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

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

7500.00

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**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. New York Jobs PAC

Mailing Address P.O. Box 708

City Melville State NY Zip Code 11747

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : 13581283

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Lisa Murkowski For Us Senate

Mailing Address PO Box 100847

City Anchorage State AK Zip Code 99510

Purpose of Disbursement

011

Candidate Name

Sen. Lisa Murkowski

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: AK District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : 13581287

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Jenkins For Congress

Mailing Address PO Box 727

City Huntington State WV Zip Code 25711

Purpose of Disbursement

011

Candidate Name

Rep. Evan Hollins Jenkins

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: WV District: 03

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : 13581288

Amount of Each Disbursement this Period

1000.00

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Loeb sack For Congress

Mailing Address PO Box 3013

City Iowa City State IA Zip Code 52244

Purpose of Disbursement

011

Candidate Name

Rep. David Wayne Loeb sack

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: IA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : 13581292

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Devin Nunes Campaign Committee

Mailing Address PO Box 6545

City Visalia State CA Zip Code 93290

Purpose of Disbursement

011

Candidate Name

Rep. Devin G. Nunes

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: CA District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : 13581293

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Tom Price for Congress

Mailing Address PO Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement

011

Candidate Name

Tom Price

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: GA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	22	/	2015

Transaction ID : 13581294

Amount of Each Disbursement this Period

2500.00

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

8500.00

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

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**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. AXPAC

Mailing Address 8401 Excelsior Drive #103

City Madison State WI Zip Code 53717

Purpose of Disbursement

011

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : 13581295

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. SASSE PAC

Mailing Address 499 South Capitol Street, SW Suite

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : 13581296

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Cleaver For Congress

Mailing Address 4801 Main Street, Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement

011

Candidate Name

Rep. Emanuel Cleaver II

Category/Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: MO District: 05

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : 13581297

Amount of Each Disbursement this Period

1000.00

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

6000.00

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. George Holding For Congress Inc.

Mailing Address PO Box 97187

City Raleigh State NC Zip Code 27624

Purpose of Disbursement

011

Category/
Type

Candidate Name

George Holding

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NC District: 13

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : 13581298

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Maloney For Congress

Mailing Address 49 East 92nd St

City New York State NY Zip Code 10128

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Carolyn B. Maloney

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 12

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : 13581299

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Maloney For Congress

Mailing Address 49 East 92nd St

City New York State NY Zip Code 10128

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Carolyn B. Maloney

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 12

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2015

Transaction ID : 13581300

Amount of Each Disbursement this Period

1500.00

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Mike Bishop For Congress

Mailing Address PO Box 1148

City Brighton State MI Zip Code 48116

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mike Bishop

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2015

Transaction ID : 13581301

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Randy Hultgren For Congress

Mailing Address PO Box 717

City St Charles State IL Zip Code 60174

Purpose of Disbursement

011

Category/
Type

Candidate Name

Randy Hultgren

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2015

Transaction ID : 13581302

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends Of Jeb Hensarling

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Jeb Hensarling

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2015

Transaction ID : 13581316

Amount of Each Disbursement this Period

1500.00

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

6500.00

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

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**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Jeb Hensarling

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Jeb Hensarling

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2015

Transaction ID : 13581317

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. Young For Iowa, Inc.

Mailing Address PO Box 162

City Van Meter State IA Zip Code 50261

Purpose of Disbursement

011

Category/
Type

Candidate Name

David Young

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2015

Transaction ID : 13581318

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ryan Costello For Congress

Mailing Address PO Box 3154

City West Chester State PA Zip Code 19381

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ryan Costello

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2015

Transaction ID : 13582865

Amount of Each Disbursement this Period

1000.00

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

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

5500.00

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**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Carlos Curbelo Congress

Mailing Address 8770 Sw 72nd St

City Miami State FL Zip Code 33173

Purpose of Disbursement

011

Category/
Type

Candidate Name

Carlos Curbelo

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 26

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	5		

Transaction ID : 13582866

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Chuck Fleischmann For Congress Committee, Inc.

Mailing Address P.O. Box 11091

City Chattanooga State TN Zip Code 37401

Purpose of Disbursement

011

Category/
Type

Candidate Name

Charles Fleischmann

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	5		

Transaction ID : 13582867

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Glenn Grothman For Congress

Mailing Address PO Box 1215

City Fond Du Lac State WI Zip Code 54964

Purpose of Disbursement

011

Category/
Type

Candidate Name

Glenn Grothman

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	5		

Transaction ID : 13582868

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

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

4	0	0	0	.	0	0
---	---	---	---	---	---	---

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

4	0	0	0	.	0	0
---	---	---	---	---	---	---

**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Larson For Congress

Mailing Address PO Box 261172

City Hartford State CT Zip Code 06126

Purpose of Disbursement

011

Candidate Name

Rep. John B. Larson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) **Convention2016**

State: CT District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : 13582872

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Friends Of Dan Kildee

Mailing Address P.O. Box 248

City Flint State MI Zip Code 48501

Purpose of Disbursement

011

Candidate Name

Rep. Dan Kildee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) **▼**

State: MI District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : 13582873

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Pete PAC

Mailing Address P.O. Box 38585

City Dallas State TX Zip Code 75238

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : 13582874

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

7	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

7	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Lobo PAC

Mailing Address PO Box 492

City Albuquerque State NM Zip Code 87103

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2015

Transaction ID : 13582875

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement

011

Candidate Name

Rep. Mike Thompson

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: CA District: 05

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2015

Transaction ID : 13582876

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Richard Burr Committee; The

Mailing Address Post Office Box 5928

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement

011

Candidate Name

Sen. Richard M. Burr

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: NC District:

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2015

Transaction ID : 13582879

Amount of Each Disbursement this Period

2000.00

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

4000.00

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Citizens For Waters

Mailing Address 249 E Ocean Blvd # 685

City Long Beach State CA Zip Code 90802

Purpose of Disbursement

011

Candidate Name

Rep. Maxine Waters

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 43

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : 13582885

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Kirk For Senate

Mailing Address PO Box 2594

City Chicago State IL Zip Code 60690

Purpose of Disbursement

011

Candidate Name

Sen. Mark Steven Kirk

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : 13582886

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Kirk For Senate

Mailing Address PO Box 2594

City Chicago State IL Zip Code 60690

Purpose of Disbursement

011

Candidate Name

Sen. Mark Steven Kirk

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : 13582887

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

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

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

3	5	0	0	.	0	0
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3	5	0	0	.	0	0
---	---	---	---	---	---	---

**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Joe Kennedy For Congress

Mailing Address PO Box 590464

City State Zip Code
Newton MA 02459

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Joseph A. Kennedy III

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MA District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : 13582888

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Bill Flores For Congress

Mailing Address PO Box 6207

City State Zip Code
Bryan TX 77805

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Bill Flores

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 17

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : 13582889

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Steve Fincher For Congress

Mailing Address PO Box 11153

City State Zip Code
Jackson TN 38308

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Stephen Lee Fincher

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	5

Transaction ID : 13582891

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0
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3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Walker 4 Nc

Mailing Address PO Box 99247

City Raleigh State NC Zip Code 27624

Purpose of Disbursement

011

Candidate Name

Bradley Walker

Category/
Type

Office Sought: House
 Senate
 President
State: NC District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2015

Transaction ID : 13582893

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Walker 4 Nc

Mailing Address PO Box 99247

City Raleigh State NC Zip Code 27624

Purpose of Disbursement

011

Candidate Name

Bradley Walker

Category/
Type

Office Sought: House
 Senate
 President
State: NC District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2015

Transaction ID : 13582894

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Poliquin For Congress

Mailing Address PO Box 50

City Oakland State ME Zip Code 04963

Purpose of Disbursement

011

Candidate Name

Rep. Bruce Poliquin

Category/
Type

Office Sought: House
 Senate
 President
State: ME District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2015

Transaction ID : 13582895

Amount of Each Disbursement this Period

1000.00

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

3500.00

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

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**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Heller For Senate

Mailing Address PO Box 371907

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement

011

Candidate Name

Dean Heller

Category/
Type

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NV District:

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2015

Transaction ID : 13582896

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. David Scott For Congress

Mailing Address P.O. Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement

011

Candidate Name

Rep. David Albert Scott

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: GA District: 13

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2015

Transaction ID : 13582897

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Kristi For Congress

Mailing Address PO Box 852

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement

011

Candidate Name

Rep. Kristi Lynn Noem

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: SD District: 00

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2015

Transaction ID : 13588543

Amount of Each Disbursement this Period

1500.00

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

5000.00

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Pat Toomey

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Candidate Name

Patrick Toomey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2015

Transaction ID : 13588544

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Ryan Costello For Congress

Mailing Address PO Box 3154

City West Chester State PA Zip Code 19381

Purpose of Disbursement

011

Candidate Name

Ryan Costello

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2015

Transaction ID : 13588546

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. George Holding For Congress Inc.

Mailing Address PO Box 97187

City Raleigh State NC Zip Code 27624

Purpose of Disbursement

011

Candidate Name

George Holding

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NC District: 13

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2015

Transaction ID : 13588549

Amount of Each Disbursement this Period

2500.00

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

7000.00

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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Rothfus For Congress

Mailing Address PO Box 435

City Sewickley State PA Zip Code 15143

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Keith Rothfus

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 13588550

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Rodney For Congress

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rodney Davis

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 13588551

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Guthrie For Congress

Mailing Address PO Box 9639

City Bowling Green State KY Zip Code 42102

Purpose of Disbursement

011

Category/
Type

Candidate Name

S. Brett Guthrie

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 13588552

Amount of Each Disbursement this Period

1000.00

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

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

5500.00

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**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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Roger Williams For U S Congress Committee

Mailing Address P.O. Box 91061

City Austin State TX Zip Code 78709

Purpose of Disbursement

011

Category/Type

Candidate Name

Roger Williams

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: TX District: 25

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2015

Transaction ID : 13588554

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Roger Williams For U S Congress Committee

Mailing Address P.O. Box 91061

City Austin State TX Zip Code 78709

Purpose of Disbursement

011

Category/Type

Candidate Name

Roger Williams

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: TX District: 25

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2015

Transaction ID : 13588555

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Rock City PAC

Mailing Address 1015 Stonebridge Park Drive

City Franklin State TN Zip Code 37069

Purpose of Disbursement

011

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2015

Transaction ID : 13588556

Amount of Each Disbursement this Period

5000.00

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

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

7500.00

**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)

<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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Charles Boustany Jr. Md For Congress, Inc.

Mailing Address PO Box 80126

City Lafayette State LA Zip Code 70598

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Charles W. Boustany Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: LA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 13588557

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Poliquin For Congress

Mailing Address PO Box 50

City Oakland State ME Zip Code 04963

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Bruce Poliquin

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	29	/	2015

Transaction ID : 13588576

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends Of David Jolly

Mailing Address P. O. Box 1158

City Indian Rocks Beach State FL Zip Code 33785

Purpose of Disbursement
Void - Friends Of David Jolly check #11126 written on 7/14/2015

011

Category/
Type

Candidate Name

Rep. David W. Jolly

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2015

Transaction ID : 13634957

Amount of Each Disbursement this Period

-2500.00

Void - Friends Of David Jolly check #11126 written on 7/14/2015

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

1500.00

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

142500.00

**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)

<input 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 checked="" 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)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Valerie Privett

Mailing Address 105 Center Park Suite 102

City Knoxville State TN Zip Code 37922-3470

Purpose of Disbursement
Returned Check

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 13634940

Amount of Each Disbursement this Period

Returned Check

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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