

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

Assurant Inc. Political Action Committee

ADDRESS (number and street)

501 W. Michigan St

Check if different than previously reported. (ACC)

Milwaukee

WI

53203

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00185694

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Oct 20 (M10) [checked], Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
Election on MM/DD/YYYY in the State of

(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period 09/01/2014 through 09/30/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Steve Swanson

Signature of Treasurer Steve Swanson [Electronically Filed] Date 10/16/2014

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

Office Use Only table with multiple empty columns.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Assurant Inc. Political Action Committee

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="2014"/>	<input type="text" value="142551.48"/>	<input type="text" value="142551.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="154613.46"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="9703.42"/>	<input type="text" value="155595.47"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="164316.88"/>	<input type="text" value="298146.95"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20021.48"/>	<input type="text" value="153851.55"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="144295.40"/>	<input type="text" value="144295.40"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Assurant Inc. Political Action Committee

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

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).....	9497.74	130743.98
(ii) Unitemized	205.68	17345.55
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9703.42	148089.53
(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)	9703.42	148089.53
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	7505.94
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))..... ▶	9703.42	155595.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9703.42	155595.47

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	21.48	351.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	21.48	351.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	151000.00
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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	2500.00
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)) ..	20021.48	153851.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20021.48	153851.55

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)	9703.42	148089.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9703.42	148089.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	21.48	351.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21.48	351.55

**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 66
	<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)
Assurant Inc. Political Action Committee

A. Eric Almassy
 Full Name (Last, First, Middle Initial)
 Mailing Address 10369 E Happy Hollow Dr
 City State Zip Code
 Scottsdale AZ 85262-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT HEALTH DIR, REGIONAL SALES
 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 / 2014
Transaction ID : 20140917172248-115
 Amount of Each Receipt this Period
 100.00

B. Eric Almassy
 Full Name (Last, First, Middle Initial)
 Mailing Address 10369 E Happy Hollow Dr
 City State Zip Code
 Scottsdale AZ 85262-3103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT HEALTH DIR, REGIONAL SALES
 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 / 30 / 2014
Transaction ID : 20141008165233-115
 Amount of Each Receipt this Period
 100.00

C. Stacia Almquist
 Full Name (Last, First, Middle Initial)
 Mailing Address 22114 W 52nd St
 City State Zip Code
 Shawnee KS 66226-2856
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT BENEFITS SVP, DENTAL
 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 / 2014
Transaction ID : 20140917172248-27
 Amount of Each Receipt this Period
 50.00

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 7 OF 66
	<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)
Assurant Inc. Political Action Committee

A. Stacia Almquist
Full Name (Last, First, Middle Initial)

Mailing Address 22114 W 52nd St

City Shawnee State KS Zip Code 66226-2856

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

Name of Employer ASSURANT BENEFITS Occupation SVP, DENTAL

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 / 30 / 2014

Transaction ID : 20141008165233-27

Amount of Each Receipt this Period
50.00

B. Valerie Andruss
Full Name (Last, First, Middle Initial)

Mailing Address 3620 Walnut St

City Kansas City State MO Zip Code 64111-1508

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

Name of Employer ASSURANT BENEFITS Occupation OFFICER, TRAINING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-28

Amount of Each Receipt this Period
41.66

C. Valerie Andruss
Full Name (Last, First, Middle Initial)

Mailing Address 3620 Walnut St

City Kansas City State MO Zip Code 64111-1508

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

Name of Employer ASSURANT BENEFITS Occupation OFFICER, TRAINING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-28

Amount of Each Receipt this Period
41.66

SUBTOTAL of Receipts This Page (optional)..... ▶ **133.32**

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 66
	<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)
Assurant Inc. Political Action Committee

A. Paul Basile
Full Name (Last, First, Middle Initial)

Mailing Address 8011 Cecil St

City Miami Beach State FL Zip Code 33141-1708

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

Name of Employer ASSURANT CORPORATE Occupation VP, GOVERNMENT RELATIONS

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 / 2014

Transaction ID : 20140917172248-46

Amount of Each Receipt this Period
50.00

B. Paul Basile
Full Name (Last, First, Middle Initial)

Mailing Address 8011 Cecil St

City Miami Beach State FL Zip Code 33141-1708

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

Name of Employer ASSURANT CORPORATE Occupation VP, GOVERNMENT RELATIONS

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 / 30 / 2014

Transaction ID : 20141008165233-46

Amount of Each Receipt this Period
50.00

C. Julie Berquist
Full Name (Last, First, Middle Initial)

Mailing Address 12100 W Cardinal Ct

City Hales Corners State WI Zip Code 53130-1064

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

Name of Employer ASSURANT HEALTH Occupation VP, GROUP MARKETS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1170.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-79

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **165.00**

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 66
<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)
Assurant Inc. Political Action Committee

A. Julie Berquist
Full Name (Last, First, Middle Initial)

Mailing Address 12100 W Cardinal Ct

City Hales Corners State WI Zip Code 53130-1064

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

Name of Employer ASSURANT HEALTH Occupation VP, GROUP MARKETS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-79

Amount of Each Receipt this Period
 65.00

B. Mark Berquist
Full Name (Last, First, Middle Initial)

Mailing Address 12100 W Cardinal Ct

City Hales Corners State WI Zip Code 53130-1064

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

Name of Employer ASSURANT CORPORATE Occupation SVP, HEALTH CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-80

Amount of Each Receipt this Period
 65.00

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

Mailing Address 12100 W Cardinal Ct

City Hales Corners State WI Zip Code 53130-1064

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

Name of Employer ASSURANT CORPORATE Occupation SVP, HEALTH CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-80

Amount of Each Receipt this Period
 65.00

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 10 OF 66
	<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
-----------------------------	-----------------------------	-----------------------------

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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Carey Bongard

Mailing Address 2795 Peachtree Rd NE

City Atlanta State GA Zip Code 30305-3793

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

Name of Employer ASSURANT SOLUTIONS Occupation EVP, HR & ORG DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1708.29

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-17

Amount of Each Receipt this Period
 83.33

Full Name (Last, First, Middle Initial)
B. Carey Bongard

Mailing Address 2795 Peachtree Rd NE

City Atlanta State GA Zip Code 30305-3793

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

Name of Employer ASSURANT SOLUTIONS Occupation EVP, HR & ORG DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1708.29

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-17

Amount of Each Receipt this Period
 83.33

Full Name (Last, First, Middle Initial)
C. Kenneth Bowen

Mailing Address 1575 Oakwood Ln

City Liberty State MO Zip Code 64068-3547

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

Name of Employer ASSURANT CORPORATE Occupation SVP, GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-29

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 191.66

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 66
<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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Kenneth Bowen			Date of Receipt 09 / 30 / 2014 Transaction ID : 20141008165233-29		
Mailing Address 1575 Oakwood Ln			Amount of Each Receipt this Period 25.00		
City Liberty	State MO	Zip Code 64068-3547			
FEC ID number of contributing federal political committee. C					
Name of Employer ASSURANT CORPORATE		Occupation SVP, GENERAL COUNSEL			
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) B. Joseph Brining			Date of Receipt 09 / 15 / 2014 Transaction ID : 20140917172248-116		
Mailing Address 5718 E 101st PI			Amount of Each Receipt this Period 50.00		
City Tulsa	State OK	Zip Code 74137-7078			
FEC ID number of contributing federal political committee. C					
Name of Employer ASSURANT HEALTH		Occupation DIR, REGIONAL SALES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00			

Full Name (Last, First, Middle Initial) C. Joseph Brining			Date of Receipt 09 / 30 / 2014 Transaction ID : 20141008165233-116		
Mailing Address 5718 E 101st PI			Amount of Each Receipt this Period 50.00		
City Tulsa	State OK	Zip Code 74137-7078			
FEC ID number of contributing federal political committee. C					
Name of Employer ASSURANT HEALTH		Occupation DIR, REGIONAL SALES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00			

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 66
	<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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Deborah Cain		Date of Receipt 09 / 15 / 2014 Transaction ID : 20140917172248-81
Mailing Address 11725 N River Ridge Dr		Amount of Each Receipt this Period 35.00
City Mequon	State WI	Zip Code 53092-2755
FEC ID number of contributing federal political committee. C		
Name of Employer ASSURANT HEALTH	Occupation VP, INDIVIDUAL MEDICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) B. Deborah Cain		Date of Receipt 09 / 30 / 2014 Transaction ID : 20141008165233-81
Mailing Address 11725 N River Ridge Dr		Amount of Each Receipt this Period 35.00
City Mequon	State WI	Zip Code 53092-2755
FEC ID number of contributing federal political committee. C		
Name of Employer ASSURANT HEALTH	Occupation VP, INDIVIDUAL MEDICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) C. Steven Cain		Date of Receipt 09 / 15 / 2014 Transaction ID : 20140917172248-82
Mailing Address 11725 N River Ridge Dr		Amount of Each Receipt this Period 31.25
City Mequon	State WI	Zip Code 53092-2755
FEC ID number of contributing federal political committee. C		
Name of Employer ASSURANT HEALTH	Occupation SVP, CHIEF ADMIN&RISK OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.50	

SUBTOTAL of Receipts This Page (optional).....▶	101.25
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 13 OF 66
	<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)
Assurant Inc. Political Action Committee

A. Steven Cain
Full Name (Last, First, Middle Initial)

Mailing Address 11725 N River Ridge Dr

City Mequon State WI Zip Code 53092-2755

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

Name of Employer ASSURANT HEALTH Occupation SVP, CHIEF ADMIN&RISK OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **562.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-82

Amount of Each Receipt this Period
31.25

B. Vera Carley
Full Name (Last, First, Middle Initial)

Mailing Address 294 Stamford Ave

City Stamford State CT Zip Code 06902-8233

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

Name of Employer ASSURANT CORPORATE Occupation AVP, COMMUNICATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-47

Amount of Each Receipt this Period
31.25

C. Vera Carley
Full Name (Last, First, Middle Initial)

Mailing Address 294 Stamford Ave

City Stamford State CT Zip Code 06902-8233

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

Name of Employer ASSURANT CORPORATE Occupation AVP, COMMUNICATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-47

Amount of Each Receipt this Period
31.25

SUBTOTAL of Receipts This Page (optional).....▶	93.75
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 66
	<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)
Assurant Inc. Political Action Committee

A. Jay Cohen
Full Name (Last, First, Middle Initial)
Mailing Address 73 Scarlet Oak Dr
City Wilton State CT Zip Code 06897-1014
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT CORPORATE Occupation SVP, CHIEF COMPLIANCE OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2479.13

Date of Receipt 09 / 15 / 2014
Transaction ID : 20140917172248-48
Amount of Each Receipt this Period 145.83

B. Jay Cohen
Full Name (Last, First, Middle Initial)
Mailing Address 73 Scarlet Oak Dr
City Wilton State CT Zip Code 06897-1014
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT CORPORATE Occupation SVP, CHIEF COMPLIANCE OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2479.13

Date of Receipt 09 / 30 / 2014
Transaction ID : 20141008165233-48
Amount of Each Receipt this Period 145.83

C. Phillip Culbertson
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 594
City Buckner State MO Zip Code 64016-0594
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT CORPORATE Occupation VP, BUSINESS DEVELOPMENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 720.00

Date of Receipt 09 / 15 / 2014
Transaction ID : 20140917172248-49
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 331.66
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 15 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Phillip Culbertson

Mailing Address PO Box 594

City State Zip Code
 Buckner MO 64016-0594

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

Name of Employer Occupation
 ASSURANT CORPORATE VP, BUSINESS DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-49

Amount of Each Receipt this Period
 40.00

Full Name (Last, First, Middle Initial)
B. Daniel Cullen

Mailing Address 256 Grovenor Dr

City State Zip Code
 Schaumburg IL 60193-4113

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

Name of Employer Occupation
 ASSURANT HEALTH DIR, REGIONAL SALES

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 / 2014
Transaction ID : 20140917172248-117

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Daniel Cullen

Mailing Address 256 Grovenor Dr

City State Zip Code
 Schaumburg IL 60193-4113

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

Name of Employer Occupation
 ASSURANT HEALTH DIR, REGIONAL SALES

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 / 30 / 2014
Transaction ID : 20141008165233-117

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 66
	<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)
Assurant Inc. Political Action Committee

A. Theresa Dalen
Full Name (Last, First, Middle Initial)

Mailing Address 9475 Oak Ave

City Waconia State MN Zip Code 55387-9638

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

Name of Employer ASSURANT BENEFITS Occupation VP, DISABILITY & LIFE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **524.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-30

Amount of Each Receipt this Period
29.16

B. Theresa Dalen
Full Name (Last, First, Middle Initial)

Mailing Address 9475 Oak Ave

City Waconia State MN Zip Code 55387-9638

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

Name of Employer ASSURANT BENEFITS Occupation VP, DISABILITY & LIFE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **524.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-30

Amount of Each Receipt this Period
29.16

C. Deborah Davis
Full Name (Last, First, Middle Initial)

Mailing Address 4201 Southborough Rd

City Florence State SC Zip Code 29501-8888

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

Name of Employer SPECIALTY PROPERTY Occupation VP, SERVICE CENTER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.28**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-18

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **108.32**

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 66
	<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)
Assurant Inc. Political Action Committee

A. Deborah Davis
Full Name (Last, First, Middle Initial)

Mailing Address 4201 Southborough Rd

City Florence	State SC	Zip Code 29501-8888
------------------	-------------	------------------------

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

Name of Employer SPECIALTY PROPERTY	Occupation VP, SERVICE CENTER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.28**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	30	/	2014

Transaction ID : 20141008165233-18

Amount of Each Receipt this Period

62.50

B. Greg Dechurch
Full Name (Last, First, Middle Initial)

Mailing Address 15161 SW 39th St

City Davie	State FL	Zip Code 33331-2761
---------------	-------------	------------------------

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

Name of Employer ASSURANT CORPORATE	Occupation SVP, GENERAL COUNSEL
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1125.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-5

Amount of Each Receipt this Period

62.50

C. Greg Dechurch
Full Name (Last, First, Middle Initial)

Mailing Address 15161 SW 39th St

City Davie	State FL	Zip Code 33331-2761
---------------	-------------	------------------------

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

Name of Employer ASSURANT CORPORATE	Occupation SVP, GENERAL COUNSEL
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1125.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	30	/	2014

Transaction ID : 20141008165233-5

Amount of Each Receipt this Period

62.50

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 66
	<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)
Assurant Inc. Political Action Committee

A. Christopher Dowler
Full Name (Last, First, Middle Initial)

Mailing Address N54W20859 Carters Crossing Cir

City Menomonee Falls	State WI	Zip Code 53051-6281
-------------------------	-------------	------------------------

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

Name of Employer ASSURANT HEALTH	Occupation SVP, CHIEF INFO OFFICER
-------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1540.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-102

Amount of Each Receipt this Period
85.58

B. Christopher Dowler
Full Name (Last, First, Middle Initial)

Mailing Address N54W20859 Carters Crossing Cir

City Menomonee Falls	State WI	Zip Code 53051-6281
-------------------------	-------------	------------------------

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

Name of Employer ASSURANT HEALTH	Occupation SVP, CHIEF INFO OFFICER
-------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1540.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : 20141008165233-102

Amount of Each Receipt this Period
85.58

C. Steven Dzedzic
Full Name (Last, First, Middle Initial)

Mailing Address 2016 N Hubbard St

City Milwaukee	State WI	Zip Code 53212-3340
-------------------	-------------	------------------------

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

Name of Employer ASSURANT HEALTH	Occupation SVP, NEW BUSINESS DEVELOPMENT
-------------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-83

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	371.16
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 66
	<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)
Assurant Inc. Political Action Committee

A. Steven Dziedzic
 Full Name (Last, First, Middle Initial)
 Mailing Address 2016 N Hubbard St
 City Milwaukee State WI Zip Code 53212-3340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT HEALTH Occupation SVP, NEW BUSINESS DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3600.00

Date of Receipt 09 / 30 / 2014
Transaction ID : 20141008165233-83
 Amount of Each Receipt this Period 200.00

B. Joseph Erdeman
 Full Name (Last, First, Middle Initial)
 Mailing Address 202 Gold Leaf Ln
 City Canton State GA Zip Code 30114-9713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT SOLUTIONS Occupation EVP, GLOBAL NETWORKS OF EXCELL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1440.00

Date of Receipt 09 / 15 / 2014
Transaction ID : 20140917172248-3
 Amount of Each Receipt this Period 80.00

C. Joseph Erdeman
 Full Name (Last, First, Middle Initial)
 Mailing Address 202 Gold Leaf Ln
 City Canton State GA Zip Code 30114-9713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT SOLUTIONS Occupation EVP, GLOBAL NETWORKS OF EXCELL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1440.00

Date of Receipt 09 / 30 / 2014
Transaction ID : 20141008165233-3
 Amount of Each Receipt this Period 80.00

SUBTOTAL of Receipts This Page (optional).....▶	360.00
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 66
	<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)
Assurant Inc. Political Action Committee

A. Thomas Esser
Full Name (Last, First, Middle Initial)

Mailing Address W158S7209 Quietwood Dr

City Muskego	State WI	Zip Code 53150-8475
-----------------	-------------	------------------------

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

Name of Employer ASSURANT HEALTH	Occupation VP, NATIONAL ACCOUNTS
-------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-84

Amount of Each Receipt this Period

90.83

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

Mailing Address W158S7209 Quietwood Dr

City Muskego	State WI	Zip Code 53150-8475
-----------------	-------------	------------------------

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

Name of Employer ASSURANT HEALTH	Occupation VP, NATIONAL ACCOUNTS
-------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : 20141008165233-84

Amount of Each Receipt this Period

35.00

C. Albert Fosha
Full Name (Last, First, Middle Initial)

Mailing Address 5030 Lakeland Dr

City Marietta	State GA	Zip Code 30068-4327
------------------	-------------	------------------------

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

Name of Employer ASSURANT SOLUTIONS	Occupation BUSINESS DEVELOPMENT MGR III
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.94**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-6

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional).....▶	90.83
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 66
	<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)
Assurant Inc. Political Action Committee

A. Albert Fosha
Full Name (Last, First, Middle Initial)

Mailing Address 5030 Lakeland Dr

City Marietta State GA Zip Code 30068-4327

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

Name of Employer ASSURANT SOLUTIONS Occupation BUSINESS DEVELOPMENT MGR III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.94**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-6

Amount of Each Receipt this Period
20.83

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

Mailing Address 6020 Ettington Dr

City Suwanee State GA Zip Code 30024-3378

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

Name of Employer SPECIALTY PROPERTY Occupation PRESIDENT, LENDING SOLUTIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1499.94**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-19

Amount of Each Receipt this Period
83.33

C. John Frobose
Full Name (Last, First, Middle Initial)

Mailing Address 6020 Ettington Dr

City Suwanee State GA Zip Code 30024-3378

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

Name of Employer SPECIALTY PROPERTY Occupation PRESIDENT, LENDING SOLUTIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1499.94**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-19

Amount of Each Receipt this Period
83.33

SUBTOTAL of Receipts This Page (optional).....▶	187.49
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 66
	<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)
Assurant Inc. Political Action Committee

A. Jennifer Galles
Full Name (Last, First, Middle Initial)

Mailing Address 4748 Gettysburg Ave N

City New Hope State MN Zip Code 55428-4405

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

Name of Employer ASSURANT HEALTH Occupation MGR, UNDERWRITING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-86

Amount of Each Receipt this Period
30.00

B. Jennifer Galles
Full Name (Last, First, Middle Initial)

Mailing Address 4748 Gettysburg Ave N

City New Hope State MN Zip Code 55428-4405

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

Name of Employer ASSURANT HEALTH Occupation MGR, UNDERWRITING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-86

Amount of Each Receipt this Period
30.00

C. Paul Gamm
Full Name (Last, First, Middle Initial)

Mailing Address 115 Valley Summit Ct

City Roswell State GA Zip Code 30075-6816

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

Name of Employer SPECIALTY PROPERTY Occupation VP, RISK MGMT & UNDERWRITING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.94**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-15

Amount of Each Receipt this Period
20.83

SUBTOTAL of Receipts This Page (optional).....▶	80.83
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 66
	<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)
Assurant Inc. Political Action Committee

A. Paul Gamm
Full Name (Last, First, Middle Initial)

Mailing Address 115 Valley Summit Ct

City Roswell State GA Zip Code 30075-6816

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

Name of Employer SPECIALTY PROPERTY Occupation VP, RISK MGMT & UNDERWRITING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.94**

Date of Receipt
09 / 30 / 2014
Transaction ID : 20141008165233-15

Amount of Each Receipt this Period
20.83

B. Terry Grigg
Full Name (Last, First, Middle Initial)

Mailing Address 1134 Lincoln Ave

City Saint Paul State MN Zip Code 55105-2735

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

Name of Employer ASSURANT HEALTH Occupation VP, CLAIMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
09 / 15 / 2014
Transaction ID : 20140917172248-88

Amount of Each Receipt this Period
25.00

C. Terry Grigg
Full Name (Last, First, Middle Initial)

Mailing Address 1134 Lincoln Ave

City Saint Paul State MN Zip Code 55105-2735

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

Name of Employer ASSURANT HEALTH Occupation VP, CLAIMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
09 / 30 / 2014
Transaction ID : 20141008165233-88

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **70.83**

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 66
	<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)
Assurant Inc. Political Action Committee

A. Melissa Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 Central Park W
 City New York State NY Zip Code 10025-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation SVP, TAX
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2250.00**

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-50
 Amount of Each Receipt this Period
125.00

B. Melissa Hall
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 Central Park W
 City New York State NY Zip Code 10025-4819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation SVP, TAX
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2250.00**

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-50
 Amount of Each Receipt this Period
125.00

C. Steven Hein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1730 Doonbeg Ct NW
 City Kennesaw State GA Zip Code 30152-6754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPECIALTY PROPERTY Occupation VP, NAT'L SALES & ACCOUNT MGMT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **374.94**

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-7
 Amount of Each Receipt this Period
20.83

SUBTOTAL of Receipts This Page (optional)..... **270.83**
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 66
	<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)
Assurant Inc. Political Action Committee

A. Steven Hein
Full Name (Last, First, Middle Initial)

Mailing Address 1730 Doonbeg Ct NW

City Kennesaw State GA Zip Code 30152-6754

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

Name of Employer SPECIALTY PROPERTY Occupation VP, NAT'L SALES & ACCOUNT MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.94**

Date of Receipt
09 / 30 / 2014
Transaction ID : **20141008165233-7**

Amount of Each Receipt this Period
20.83

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

Mailing Address 533C Chicago Ave

City Evanston State IL Zip Code 60202-2904

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

Name of Employer ASSURANT CORPORATE Occupation VP, STATE LOBBYIST HEAD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1125.00**

Date of Receipt
09 / 15 / 2014
Transaction ID : **20140917172248-51**

Amount of Each Receipt this Period
62.50

C. David Hill
Full Name (Last, First, Middle Initial)

Mailing Address 533C Chicago Ave

City Evanston State IL Zip Code 60202-2904

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

Name of Employer ASSURANT CORPORATE Occupation VP, STATE LOBBYIST HEAD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1125.00**

Date of Receipt
09 / 30 / 2014
Transaction ID : **20141008165233-51**

Amount of Each Receipt this Period
62.50

SUBTOTAL of Receipts This Page (optional)..... **145.83**

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 66
	<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)
Assurant Inc. Political Action Committee

A. Robert Hill
Full Name (Last, First, Middle Initial)
Mailing Address 11726 N 120th St

City Scottsdale	State AZ	Zip Code 85259-3242
--------------------	-------------	------------------------

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

Name of Employer SPECIALTY PROPERTY	Occupation PRESIDENT, ARIC
--	-------------------------------

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	/	2014

Transaction ID : 20140917172248-1

Amount of Each Receipt this Period
100.00

B. Robert Hill
Full Name (Last, First, Middle Initial)
Mailing Address 11726 N 120th St

City Scottsdale	State AZ	Zip Code 85259-3242
--------------------	-------------	------------------------

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

Name of Employer SPECIALTY PROPERTY	Occupation PRESIDENT, ARIC
--	-------------------------------

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	/	30	/	2014

Transaction ID : 20141008165233-1

Amount of Each Receipt this Period
100.00

C. Mary Hinderliter
Full Name (Last, First, Middle Initial)
Mailing Address 2414 N 83rd St

City Wauwatosa	State WI	Zip Code 53213-1025
-------------------	-------------	------------------------

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

Name of Employer ASSURANT HEALTH	Occupation VP, COMMUNICATION
-------------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-90

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional).....▶	221.00
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 27 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Mary Hinderliter
 Full Name (Last, First, Middle Initial)
 Mailing Address 2414 N 83rd St
 City Wauwatosa State WI Zip Code 53213-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT HEALTH Occupation VP, COMMUNICATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt 09 / 30 / 2014
Transaction ID : 20141008165233-90
 Amount of Each Receipt this Period 21.00

B. Julia Hix
 Full Name (Last, First, Middle Initial)
 Mailing Address 29W 128 83rd Street
 City Naperville State IL Zip Code 60564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation VP, REGULATORY COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 09 / 15 / 2014
Transaction ID : 20140917172248-91
 Amount of Each Receipt this Period 30.00

C. Julia Hix
 Full Name (Last, First, Middle Initial)
 Mailing Address 29W 128 83rd Street
 City Naperville State IL Zip Code 60564
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation VP, REGULATORY COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 09 / 30 / 2014
Transaction ID : 20141008165233-91
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 81.00
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 66
	<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)
Assurant Inc. Political Action Committee

A. Gabriel House
Full Name (Last, First, Middle Initial)
Mailing Address 11 Wildrose Ln
City Scarborough State ME Zip Code 04074-8632
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT BENEFITS Occupation VP, UNDERWRITING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt
09 / 15 / 2014
Transaction ID : 20140917172248-25
Amount of Each Receipt this Period
15.00

B. Gabriel House
Full Name (Last, First, Middle Initial)
Mailing Address 11 Wildrose Ln
City Scarborough State ME Zip Code 04074-8632
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT BENEFITS Occupation VP, UNDERWRITING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt
09 / 30 / 2014
Transaction ID : 20141008165233-25
Amount of Each Receipt this Period
15.00

C. Paris Inglis
Full Name (Last, First, Middle Initial)
Mailing Address 2002 S Roosevelt St
City Boise State ID Zip Code 83705-3260
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT HEALTH Occupation MGR, DISTRICT SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 374.94

Date of Receipt
09 / 15 / 2014
Transaction ID : 20140917172248-113
Amount of Each Receipt this Period
20.83

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.83
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 66
	<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)
Assurant Inc. Political Action Committee

A. Paris Inglis
Full Name (Last, First, Middle Initial)

Mailing Address 2002 S Roosevelt St

City Boise State ID Zip Code 83705-3260

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

Name of Employer ASSURANT HEALTH Occupation MGR, DISTRICT SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.94

Date of Receipt 09 / 30 / 2014
Transaction ID : 20141008165233-113

Amount of Each Receipt this Period 20.83

B. Catherine Janik
Full Name (Last, First, Middle Initial)

Mailing Address 9361 Jonathan Rd

City Woodbury State MN Zip Code 55125-4821

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

Name of Employer ASSURANT CORPORATE Occupation VP, MANAGING ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.94

Date of Receipt 09 / 15 / 2014
Transaction ID : 20140917172248-52

Amount of Each Receipt this Period 20.83

C. Catherine Janik
Full Name (Last, First, Middle Initial)

Mailing Address 9361 Jonathan Rd

City Woodbury State MN Zip Code 55125-4821

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

Name of Employer ASSURANT CORPORATE Occupation VP, MANAGING ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.94

Date of Receipt 09 / 30 / 2014
Transaction ID : 20141008165233-52

Amount of Each Receipt this Period 20.83

SUBTOTAL of Receipts This Page (optional)..... ▶ 62.49

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 66
	<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)
Assurant Inc. Political Action Committee

A. Stacy Jenison
Full Name (Last, First, Middle Initial)

Mailing Address 7717 Canterbury St

City State Zip Code
Prairie Village KS 66208-3946

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

Name of Employer Occupation
ASSURANT BENEFITS VP, IT & BUSINESS DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
09 / 15 / 2014
Transaction ID : 20140917172248-31

Amount of Each Receipt this Period
50.00

B. Stacy Jenison
Full Name (Last, First, Middle Initial)

Mailing Address 7717 Canterbury St

City State Zip Code
Prairie Village KS 66208-3946

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

Name of Employer Occupation
ASSURANT BENEFITS VP, IT & BUSINESS DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
09 / 30 / 2014
Transaction ID : 20141008165233-31

Amount of Each Receipt this Period
50.00

C. Joleen Jepsen
Full Name (Last, First, Middle Initial)

Mailing Address 141 56th Pl

City State Zip Code
West Des Moines IA 50266-6912

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

Name of Employer Occupation
ASSURANT CORPORATE AVP, EBS PAYROLL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
09 / 15 / 2014
Transaction ID : 20140917172248-42

Amount of Each Receipt this Period
20.00

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 31 OF 66
	<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)
Assurant Inc. Political Action Committee

A. Joleen Jepsen
Full Name (Last, First, Middle Initial)

Mailing Address 141 56th Pl

City West Des Moines State IA Zip Code 50266-6912

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

Name of Employer ASSURANT CORPORATE Occupation AVP, EBS PAYROLL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014
Transaction ID : 20141008165233-42

Amount of Each Receipt this Period
20.00

B. Shawn Kahle
Full Name (Last, First, Middle Initial)

Mailing Address 71 Broadway

City New York State NY Zip Code 10006-2606

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

Name of Employer ASSURANT CORPORATE Occupation VP, SR WRITER & EXEC DIR FNDTN

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 / 2014
Transaction ID : 20140917172248-53

Amount of Each Receipt this Period
50.00

c. Shawn Kahle
Full Name (Last, First, Middle Initial)

Mailing Address 15025 1st St

City Lakeside State MI Zip Code 49116-9719

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

Name of Employer ASSURANT CORPORATE Occupation VP, SR WRITER & EXEC DIR FNDTN

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 / 30 / 2014
Transaction ID : 20141008165233-53

Amount of Each Receipt this Period
50.00

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: PAGE 32 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Paul Kangas

Mailing Address 6515 Princeton Dr

City State Zip Code
 Alexandria VA 22307-1350

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

Name of Employer Occupation
 ASSURANT CORPORATE VP,FED POLICY & GOV RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1875.06

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-54

Amount of Each Receipt this Period
 104.17

Full Name (Last, First, Middle Initial)
B. Paul Kangas

Mailing Address 6515 Princeton Dr

City State Zip Code
 Alexandria VA 22307-1350

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

Name of Employer Occupation
 ASSURANT CORPORATE VP,FED POLICY & GOV RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1875.06

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-54

Amount of Each Receipt this Period
 104.17

Full Name (Last, First, Middle Initial)
C. Brian Kelley

Mailing Address 367 Longbeach Pkwy

City State Zip Code
 Bay Village OH 44140-1324

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

Name of Employer Occupation
 ASSURANT BENEFITS SENIOR SALES REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 337.50

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-40

Amount of Each Receipt this Period
 18.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 227.09

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 66
	<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)
Assurant Inc. Political Action Committee

A. Brian Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 367 Longbeach Pkwy

City Bay Village State OH Zip Code 44140-1324

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

Name of Employer ASSURANT BENEFITS Occupation SENIOR SALES REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **337.50**

Date of Receipt
09 / 30 / 2014
Transaction ID : **20141008165233-40**

Amount of Each Receipt this Period
18.75

B. Shaun Kelly
Full Name (Last, First, Middle Initial)

Mailing Address 3841 River Mansion Dr

City Duluth State GA Zip Code 30096-6148

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

Name of Employer ASSURANT CORPORATE Occupation SVP, STRATEGY & ORG TRANSFORMA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.88**

Date of Receipt
09 / 15 / 2014
Transaction ID : **20140917172248-55**

Amount of Each Receipt this Period
41.66

C. Shaun Kelly
Full Name (Last, First, Middle Initial)

Mailing Address 3841 River Mansion Dr

City Peachtree Corners State GA Zip Code 30096-6148

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

Name of Employer ASSURANT CORPORATE Occupation SVP, STRATEGY & ORG TRANSFORMA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.88**

Date of Receipt
09 / 30 / 2014
Transaction ID : **20141008165233-55**

Amount of Each Receipt this Period
41.66

SUBTOTAL of Receipts This Page (optional).....▶ **102.07**

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 34 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Kamma Kondrad
 Full Name (Last, First, Middle Initial)
 Mailing Address 6930 Pershing Blvd
 City Kenosha State WI Zip Code 53142-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation MGR, FACILITY PLANNING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-77
 Amount of Each Receipt this Period
 32.00

B. Kamma Kondrad
 Full Name (Last, First, Middle Initial)
 Mailing Address 6930 Pershing Blvd
 City Kenosha State WI Zip Code 53142-1720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation MGR, FACILITY PLANNING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-77
 Amount of Each Receipt this Period
 32.00

C. Scott Krienke
 Full Name (Last, First, Middle Initial)
 Mailing Address 3336 Nagawicka Ave
 City Delafield State WI Zip Code 53018-1021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT HEALTH Occupation SVP, PRODUCT LINES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-92
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 164.00
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 66
	<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)
Assurant Inc. Political Action Committee

A. Scott Krienke
 Full Name (Last, First, Middle Initial)
 Mailing Address 3336 Nagawicka Ave
 City Delafield State WI Zip Code 53018-1021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT HEALTH Occupation SVP, PRODUCT LINES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-92
 Amount of Each Receipt this Period
 100.00

B. Ronny Lancaster
 Full Name (Last, First, Middle Initial)
 Mailing Address 822 Capitol Square PI SW
 City Washington State DC Zip Code 20024-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation SVP,PUBLIC AFFAIRS/GOV'T REL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3749.94

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-56
 Amount of Each Receipt this Period
 208.33

C. Ronny Lancaster
 Full Name (Last, First, Middle Initial)
 Mailing Address 822 Capitol Square PI SW
 City Washington State DC Zip Code 20024-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation SVP,PUBLIC AFFAIRS/GOV'T REL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3749.94

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-56
 Amount of Each Receipt this Period
 208.33

SUBTOTAL of Receipts This Page (optional).....▶	516.66
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 36 OF 66
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Chad Lewis

Mailing Address 2107 Thorncrag Ln

City Midlothian State VA Zip Code 23112-4560

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

Name of Employer ASSURANT HEALTH Occupation DIR, REGIONAL SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1080.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-118

Amount of Each Receipt this Period
60.00

Full Name (Last, First, Middle Initial)
B. Chad Lewis

Mailing Address 2107 Thorncrag Ln

City Midlothian State VA Zip Code 23112-4560

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

Name of Employer ASSURANT HEALTH Occupation DIR, REGIONAL SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1080.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-118

Amount of Each Receipt this Period
60.00

Full Name (Last, First, Middle Initial)
C. Sean Lynch

Mailing Address 18 Atwood Ln

City Shrewsbury State MA Zip Code 01545-2826

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

Name of Employer ASSURANT HEALTH Occupation VP RSD FIELD SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **374.94**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-109

Amount of Each Receipt this Period
20.83

SUBTOTAL of Receipts This Page (optional)..... ▶ **140.83**

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 66
	<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)
Assurant Inc. Political Action Committee

A. Sean Lynch
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 Atwood Ln
 City Shrewsbury State MA Zip Code 01545-2826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT HEALTH Occupation VP RSD FIELD SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 374.94

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-109
 Amount of Each Receipt this Period
 20.83

B. David Madigan
 Full Name (Last, First, Middle Initial)
 Mailing Address 3470 Condor Ridge Rd
 City Yorba Linda State CA Zip Code 92886-6970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPECIALTY PROPERTY Occupation VP, PROD LINE MGMT - LS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-20
 Amount of Each Receipt this Period
 62.50

C. David Madigan
 Full Name (Last, First, Middle Initial)
 Mailing Address 3470 Condor Ridge Rd
 City Yorba Linda State CA Zip Code 92886-6970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SPECIALTY PROPERTY Occupation VP, PROD LINE MGMT - LS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-20
 Amount of Each Receipt this Period
 62.50

SUBTOTAL of Receipts This Page (optional).....▶	145.83
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 38 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Katharine McDonald
 Full Name (Last, First, Middle Initial)
 Mailing Address 11640 SW 64th Ave
 City State Zip Code
 Pinecrest FL 33156-4806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SPECIALTY PROPERTY SVP, CHANNEL EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-8
 Amount of Each Receipt this Period
 125.00

B. Katharine McDonald
 Full Name (Last, First, Middle Initial)
 Mailing Address 11640 SW 64th Ave
 City State Zip Code
 Pinecrest FL 33156-4806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SPECIALTY PROPERTY SVP, CHANNEL EXECUTIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-8
 Amount of Each Receipt this Period
 125.00

C. William McDonnell
 Full Name (Last, First, Middle Initial)
 Mailing Address W158N10485 Fieldstone Pass
 City State Zip Code
 Germantown WI 53022-4197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT CORPORATE AVP, ANALYSIS & PLANNING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 374.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-68
 Amount of Each Receipt this Period
 20.83

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.83
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 66
	<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
-----------------------------	-----------------------------	-----------------------------

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)
Assurant Inc. Political Action Committee

A. William McDonnell
 Full Name (Last, First, Middle Initial)
 Mailing Address W158N10485 Fieldstone Pass
 City Germantown State WI Zip Code 53022-4197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation AVP, ANALYSIS & PLANNING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **374.94**

Date of Receipt **09 / 30 / 2014**
Transaction ID : 20141008165233-68
 Amount of Each Receipt this Period **20.83**

B. Matthew McGuire
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Peppertree Ct
 City Marietta State GA Zip Code 30068-3865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation SVP, GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1312.38**

Date of Receipt **09 / 15 / 2014**
Transaction ID : 20140917172248-71
 Amount of Each Receipt this Period **72.91**

C. Matthew McGuire
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Peppertree Ct
 City Marietta State GA Zip Code 30068-3865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation SVP, GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1312.38**

Date of Receipt **09 / 30 / 2014**
Transaction ID : 20141008165233-71
 Amount of Each Receipt this Period **72.91**

SUBTOTAL of Receipts This Page (optional).....▶	166.65
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 66
<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)
Assurant Inc. Political Action Committee

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

Mailing Address 232 Hunters Xing N

City Slinger State WI Zip Code 53086-9264

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

Name of Employer ASSURANT HEALTH Occupation DIR, REGIONAL SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2014
Transaction ID : 20140917172248-119

Amount of Each Receipt this Period 25.00

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

Mailing Address 232 Hunters Xing N

City Slinger State WI Zip Code 53086-9264

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

Name of Employer ASSURANT HEALTH Occupation DIR, REGIONAL SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2014
Transaction ID : 20141008165233-119

Amount of Each Receipt this Period 25.00

C. Kevin Michels
Full Name (Last, First, Middle Initial)

Mailing Address 33 Beacon Ln

City Aberdeen State NJ Zip Code 07747-2301

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

Name of Employer ASSURANT CORPORATE Occupation SVP, ASSISTANT TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 990.00

Date of Receipt 09 / 15 / 2014
Transaction ID : 20140917172248-57

Amount of Each Receipt this Period 55.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

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 41 OF 66
	<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)
Assurant Inc. Political Action Committee

A. Kevin Michels
Full Name (Last, First, Middle Initial)

Mailing Address 33 Beacon Ln

City Aberdeen State NJ Zip Code 07747-2301

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

Name of Employer ASSURANT CORPORATE Occupation SVP, ASSISTANT TREASURER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 990.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-57

Amount of Each Receipt this Period
 55.00

B. Stephanie Missey
Full Name (Last, First, Middle Initial)

Mailing Address 14313 Farley St

City Overland Park State KS Zip Code 66221-7525

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

Name of Employer ASSURANT CORPORATE Occupation VP, ACCOUNTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1237.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-58

Amount of Each Receipt this Period
 68.75

C. Stephanie Missey
Full Name (Last, First, Middle Initial)

Mailing Address 14313 Farley St

City Overland Park State KS Zip Code 66221-7525

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

Name of Employer ASSURANT CORPORATE Occupation VP, ACCOUNTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1237.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-58

Amount of Each Receipt this Period
 68.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 192.50

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 42 OF 66
	<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)
Assurant Inc. Political Action Committee

A. Brian Murray
Full Name (Last, First, Middle Initial)

Mailing Address 4927 N Larkin St

City State Zip Code
Whitefish Bay WI 53217-6045

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

Name of Employer Occupation
ASSURANT CORPORATE ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
09 / 15 / 2014
Transaction ID : 20140917172248-94

Amount of Each Receipt this Period
50.00

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

Mailing Address 4927 N Larkin St

City State Zip Code
Whitefish Bay WI 53217-6045

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

Name of Employer Occupation
ASSURANT CORPORATE ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
09 / 30 / 2014
Transaction ID : 20141008165233-94

Amount of Each Receipt this Period
50.00

c. Sheryle Ohme
Full Name (Last, First, Middle Initial)

Mailing Address 7409 W 105th St

City State Zip Code
Bloomington MN 55438-2118

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

Name of Employer Occupation
ASSURANT BENEFITS SVP, CUSTOMER ADVOCACY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
749.88

Date of Receipt
09 / 15 / 2014
Transaction ID : 20140917172248-33

Amount of Each Receipt this Period
41.66

SUBTOTAL of Receipts This Page (optional)..... ▶ 141.66

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 66
	<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)
Assurant Inc. Political Action Committee

A. Sheryle Ohme
Full Name (Last, First, Middle Initial)

Mailing Address 7409 W 105th St

City Bloomington State MN Zip Code 55438-2118

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

Name of Employer ASSURANT BENEFITS Occupation SVP, CUSTOMER ADVOCACY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-33

Amount of Each Receipt this Period
41.66

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

Mailing Address 1216 Four Winds Way

City Hartland State WI Zip Code 53029-8561

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

Name of Employer ASSURANT HEALTH Occupation SVP, HUMAN RESOURCES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1080.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-95

Amount of Each Receipt this Period
60.00

c. David Oury
Full Name (Last, First, Middle Initial)

Mailing Address 1216 Four Winds Way

City Hartland State WI Zip Code 53029-8561

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

Name of Employer ASSURANT HEALTH Occupation SVP, HUMAN RESOURCES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1080.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-95

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **161.66**

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 44 OF 66
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Bradley Peak

Mailing Address 5650 NW Union Chapel Rd

City Parkville	State MO	Zip Code 64152-3800
-------------------	-------------	------------------------

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

Name of Employer ASSURANT BENEFITS	Occupation VP, PRODUCT MARKETING
---------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-34

Amount of Each Receipt this Period

Receipt Amount	35.00
----------------	-------

Full Name (Last, First, Middle Initial)
B. Bradley Peak

Mailing Address 5650 NW Union Chapel Rd

City Parkville	State MO	Zip Code 64152-3800
-------------------	-------------	------------------------

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

Name of Employer ASSURANT BENEFITS	Occupation VP, PRODUCT MARKETING
---------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : 20141008165233-34

Amount of Each Receipt this Period

Receipt Amount	35.00
----------------	-------

Full Name (Last, First, Middle Initial)
C. Rosemary Polk

Mailing Address 624 Greenway Ter

City Kansas City	State MO	Zip Code 64113-1536
---------------------	-------------	------------------------

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

Name of Employer ASSURANT BENEFITS	Occupation SVP, HR & DEVELOPMENT
---------------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1717.38**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-35

Amount of Each Receipt this Period

Receipt Amount	95.41
----------------	-------

SUBTOTAL of Receipts This Page (optional).....▶	165.41
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 66
	<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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Rosemary Polk

Mailing Address 624 Greenway Ter

City	State	Zip Code
Kansas City	MO	64113-1536

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

Name of Employer	Occupation
ASSURANT BENEFITS	SVP, HR & DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1717.38**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : 20141008165233-35

Amount of Each Receipt this Period

95.41

Full Name (Last, First, Middle Initial)
B. Larry Port

Mailing Address 75 Wall St

City	State	Zip Code
New York	NY	10005-3160

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

Name of Employer	Occupation
ASSURANT CORPORATE	SVP, CORPORATE DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2512.44**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-59

Amount of Each Receipt this Period

139.58

Full Name (Last, First, Middle Initial)
C. Larry Port

Mailing Address 75 Wall St

City	State	Zip Code
New York	NY	10005-3160

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

Name of Employer	Occupation
ASSURANT CORPORATE	SVP, CORPORATE DEVELOPMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2512.44**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : 20141008165233-59

Amount of Each Receipt this Period

139.58

SUBTOTAL of Receipts This Page (optional).....▶	374.57
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 66
	<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)
Assurant Inc. Political Action Committee

A. Karen Porter-Wolf
 Full Name (Last, First, Middle Initial)
 Mailing Address 13501 SW 102nd Ave
 City Miami State FL Zip Code 33176-6127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT SOLUTIONS Occupation SVP, CIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1966.62

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-11
 Amount of Each Receipt this Period
 83.33

B. Karen Porter-Wolf
 Full Name (Last, First, Middle Initial)
 Mailing Address 13501 SW 102nd Ave
 City Miami State FL Zip Code 33176-6127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT SOLUTIONS Occupation SVP, CIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1966.62

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-11
 Amount of Each Receipt this Period
 83.33

C. Peter Post
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Woodhaven Dr
 City Smithville State MO Zip Code 64089-9637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation VP, IT FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 374.94

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-69
 Amount of Each Receipt this Period
 20.83

SUBTOTAL of Receipts This Page (optional).....▶	187.49
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 66
	<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)
Assurant Inc. Political Action Committee

A. Peter Post
Full Name (Last, First, Middle Initial)
Mailing Address 200 Woodhaven Dr
City Smithville State MO Zip Code 64089-9637
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT CORPORATE Occupation VP, IT FINANCE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **374.94**

Date of Receipt **09 / 30 / 2014**
Transaction ID : 20141008165233-69
Amount of Each Receipt this Period **20.83**

B. Raymond Rafferty
Full Name (Last, First, Middle Initial)
Mailing Address 9903 Cape Ct
City Dublin State OH Zip Code 43017-7063
FEC ID number of contributing federal political committee. **C**
Name of Employer SPECIALTY PROPERTY Occupation VP, SERVICE CENTER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **749.97**

Date of Receipt **09 / 15 / 2014**
Transaction ID : 20140917172248-21
Amount of Each Receipt this Period **83.33**

C. Raymond Rafferty
Full Name (Last, First, Middle Initial)
Mailing Address 9903 Cape Ct
City Dublin State OH Zip Code 43017-7063
FEC ID number of contributing federal political committee. **C**
Name of Employer SPECIALTY PROPERTY Occupation VP, SERVICE CENTER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **749.97**

Date of Receipt **09 / 30 / 2014**
Transaction ID : 20141008165233-21
Amount of Each Receipt this Period **83.33**

SUBTOTAL of Receipts This Page (optional)..... **187.49**
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 66
	<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)
Assurant Inc. Political Action Committee

A. John Roberts
Full Name (Last, First, Middle Initial)

Mailing Address 11 Mitchellwood Dr

City Falmouth	State ME	Zip Code 04105-1244
------------------	-------------	------------------------

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

Name of Employer ASSURANT BENEFITS	Occupation PRESIDENT & CEO
---------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3749.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-36

Amount of Each Receipt this Period
208.33

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

Mailing Address 11 Mitchellwood Dr

City Falmouth	State ME	Zip Code 04105-1244
------------------	-------------	------------------------

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

Name of Employer ASSURANT BENEFITS	Occupation PRESIDENT & CEO
---------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3749.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-36

Amount of Each Receipt this Period
208.33

C. John Rogers III
Full Name (Last, First, Middle Initial)

Mailing Address 67 Chester St

City Arlington	State MA	Zip Code 02476-7606
-------------------	-------------	------------------------

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

Name of Employer ASSURANT CORPORATE	Occupation SVP, STRATEGIC PROJECTS
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-60

Amount of Each Receipt this Period
62.50

SUBTOTAL of Receipts This Page (optional).....▶	479.16
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 66
	<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)
Assurant Inc. Political Action Committee

A. John Rogers III
Full Name (Last, First, Middle Initial)

Mailing Address 67 Chester St

City Arlington State MA Zip Code 02476-7606

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

Name of Employer ASSURANT CORPORATE Occupation SVP, STRATEGIC PROJECTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1125.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-60

Amount of Each Receipt this Period
62.50

B. Lisa Salter
Full Name (Last, First, Middle Initial)

Mailing Address 2524 N 90th St

City Wauwatosa State WI Zip Code 53226-1812

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

Name of Employer ASSURANT HEALTH Occupation VP, BUSINESS CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.06**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-106

Amount of Each Receipt this Period
16.67

C. Lisa Salter
Full Name (Last, First, Middle Initial)

Mailing Address 2524 N 90th St

City Wauwatosa State WI Zip Code 53226-1812

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

Name of Employer ASSURANT HEALTH Occupation VP, BUSINESS CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.06**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-106

Amount of Each Receipt this Period
16.67

SUBTOTAL of Receipts This Page (optional).....▶	95.84
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 50 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Judith Sawyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 13807 Knotty Pine Ln
 City State Zip Code
 Rapid City SD 57702-7342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT SOLUTIONS DIR, OPERATIONAL EXCELLENCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-72
 Amount of Each Receipt this Period
 15.00

B. Judith Sawyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 13807 Knotty Pine Ln
 City State Zip Code
 Rapid City SD 57702-7342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT SOLUTIONS DIR, OPERATIONAL EXCELLENCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-72
 Amount of Each Receipt this Period
 15.00

C. Tammy Schultz
 Full Name (Last, First, Middle Initial)
 Mailing Address 3431 Nicklaus Dr
 City State Zip Code
 Rapid City SD 57702-0572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT SOLUTIONS EXEC VP & PRES, PRENEED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 374.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-73
 Amount of Each Receipt this Period
 20.83

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.83
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 51 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Tammy Schultz

Mailing Address 3431 Nicklaus Dr

City State Zip Code
 Rapid City SD 57702-0572

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

Name of Employer Occupation
 ASSURANT SOLUTIONS EXEC VP & PRES, PRENEED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 374.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-73

Amount of Each Receipt this Period
 20.83

Full Name (Last, First, Middle Initial)
B. Joseph Sevcik

Mailing Address 9510 W 129th St

City State Zip Code
 Overland Park KS 66213-3243

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

Name of Employer Occupation
 ASSURANT BENEFITS SVP, MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1499.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-38

Amount of Each Receipt this Period
 83.33

Full Name (Last, First, Middle Initial)
c. Joseph Sevcik

Mailing Address 9510 W 129th St

City State Zip Code
 Overland Park KS 66213-3243

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

Name of Employer Occupation
 ASSURANT BENEFITS SVP, MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1499.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-38

Amount of Each Receipt this Period
 83.33

SUBTOTAL of Receipts This Page (optional)..... ▶ 187.49

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 52 OF 66
	<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)
Assurant Inc. Political Action Committee

A. John Sheehan
Full Name (Last, First, Middle Initial)

Mailing Address 117 Antonia Ct

City Lincroft	State NJ	Zip Code 07738-1537
------------------	-------------	------------------------

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

Name of Employer ASSURANT CORPORATE	Occupation VP, LAW
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-61

Amount of Each Receipt this Period
30.00

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

Mailing Address 117 Antonia Ct

City Lincroft	State NJ	Zip Code 07738-1537
------------------	-------------	------------------------

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

Name of Employer ASSURANT CORPORATE	Occupation VP, LAW
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-61

Amount of Each Receipt this Period
30.00

C. Terri Sloan
Full Name (Last, First, Middle Initial)

Mailing Address 5016 Lynnwood Ct

City Loveland	State CO	Zip Code 80537-8782
------------------	-------------	------------------------

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

Name of Employer ASSURANT SOLUTIONS	Occupation SYSTEMS DIRECTOR
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **299.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-22

Amount of Each Receipt this Period
16.66

SUBTOTAL of Receipts This Page (optional).....▶	76.66
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 53 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Terri Sloan

Mailing Address 5016 Lynnwood Ct

City Loveland State CO Zip Code 80537-8782

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

Name of Employer ASSURANT SOLUTIONS Occupation SYSTEMS DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **299.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-22

Amount of Each Receipt this Period
16.66

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

Mailing Address 439 Kimberly Dr

City Waukesha State WI Zip Code 53188-3319

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

Name of Employer ASSURANT HEALTH Occupation VP, MEDICAL RISK MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : 20140917172248-98

Amount of Each Receipt this Period
41.66

Full Name (Last, First, Middle Initial)
C. Jean Smith

Mailing Address 439 Kimberly Dr

City Waukesha State WI Zip Code 53188-3319

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

Name of Employer ASSURANT HEALTH Occupation VP, MEDICAL RISK MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-98

Amount of Each Receipt this Period
41.66

SUBTOTAL of Receipts This Page (optional)..... ▶ **99.98**

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 54 OF 66
	<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)
Assurant Inc. Political Action Committee

A. Karen Smith
Full Name (Last, First, Middle Initial)

Mailing Address 26645 Oak Ln

City Wind Lake State WI Zip Code 53185-2105

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

Name of Employer ASSURANT HEALTH Occupation VP, IT PMO & INTEGRATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-107

Amount of Each Receipt this Period
 75.00

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

Mailing Address 26645 Oak Ln

City Wind Lake State WI Zip Code 53185-2105

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

Name of Employer ASSURANT HEALTH Occupation VP, IT PMO & INTEGRATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
 09 / 30 / 2014
Transaction ID : 20141008165233-107

Amount of Each Receipt this Period
 75.00

C. Charles Steele
Full Name (Last, First, Middle Initial)

Mailing Address W355S2905 Old Stonewall Ct

City Oconomowoc State WI Zip Code 53066-8785

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

Name of Employer ASSURANT HEALTH Occupation SVP, EXEC SALES OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 749.88

Date of Receipt
 09 / 15 / 2014
Transaction ID : 20140917172248-110

Amount of Each Receipt this Period
 41.66

SUBTOTAL of Receipts This Page (optional).....▶	191.66
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 55 OF 66
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
Assurant Inc. Political Action Committee

A. Charles Steele
Full Name (Last, First, Middle Initial)

Mailing Address W355S2905 Old Stonewall Ct

City Oconomowoc State WI Zip Code 53066-8785

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

Name of Employer ASSURANT HEALTH Occupation SVP, EXEC SALES OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **749.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : 20141008165233-110

Amount of Each Receipt this Period
41.66

B. Jack Stewart
Full Name (Last, First, Middle Initial)

Mailing Address 133 Forty Love Pt

City Chapin State SC Zip Code 29036-8869

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

Name of Employer SPECIALTY PROPERTY Occupation DIR, P&C CLAIMS

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 / 2014

Transaction ID : 20140917172248-9

Amount of Each Receipt this Period
100.00

C. Jack Stewart
Full Name (Last, First, Middle Initial)

Mailing Address 133 Forty Love Pt

City Chapin State SC Zip Code 29036-8869

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

Name of Employer SPECIALTY PROPERTY Occupation DIR, P&C CLAIMS

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 / 30 / 2014

Transaction ID : 20141008165233-9

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **241.66**

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 56 OF 66
	<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)
Assurant Inc. Political Action Committee

A. Sheila Sweeney
 Full Name (Last, First, Middle Initial)
 Mailing Address 10255 67th Dr
 City Forest Hills State NY Zip Code 11375-2887
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation VP,HEALTH POLICY & SHARED SERV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1499.94**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-62
 Amount of Each Receipt this Period
83.33

B. Sheila Sweeney
 Full Name (Last, First, Middle Initial)
 Mailing Address 10255 67th Dr
 City Forest Hills State NY Zip Code 11375-2887
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation VP,HEALTH POLICY & SHARED SERV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1499.94**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-62
 Amount of Each Receipt this Period
83.33

C. Connie Turnipseed
 Full Name (Last, First, Middle Initial)
 Mailing Address 11803 E 47th Ter
 City Kansas City State MO Zip Code 64133-2487
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ASSURANT CORPORATE Occupation SR PARALEGAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **524.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-63
 Amount of Each Receipt this Period
29.16

SUBTOTAL of Receipts This Page (optional).....▶	195.82
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 57 OF 66
	<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)
Assurant Inc. Political Action Committee

A. Connie Turnipseed
Full Name (Last, First, Middle Initial)
Mailing Address 11803 E 47th Ter
City Kansas City State MO Zip Code 64133-2487
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT CORPORATE Occupation SR PARALEGAL
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **524.88**

Date of Receipt
09 / 30 / 2014
Transaction ID : 20141008165233-63
Amount of Each Receipt this Period
29.16

B. Stacey Vogler
Full Name (Last, First, Middle Initial)
Mailing Address 210 Hialeah Way
City Roswell State GA Zip Code 30075-2166
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT SOLUTIONS Occupation US DIGITAL BUSINESS LEADER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **374.94**

Date of Receipt
09 / 15 / 2014
Transaction ID : 20140917172248-13
Amount of Each Receipt this Period
20.83

c. Stacey Vogler
Full Name (Last, First, Middle Initial)
Mailing Address 210 Hialeah Way
City Roswell State GA Zip Code 30075-2166
FEC ID number of contributing federal political committee. **C**
Name of Employer ASSURANT SOLUTIONS Occupation US DIGITAL BUSINESS LEADER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **374.94**

Date of Receipt
09 / 30 / 2014
Transaction ID : 20141008165233-13
Amount of Each Receipt this Period
20.83

SUBTOTAL of Receipts This Page (optional)..... **70.82**
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 58 OF 66
	<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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Jayne Waggoner

Mailing Address 907 Enchanted Pines Dr

City	State	Zip Code
Rapid City	SD	57701-9266

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

Name of Employer	Occupation
ASSURANT CORPORATE	DIR, ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **810.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-74

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)
B. Jayne Waggoner

Mailing Address 907 Enchanted Pines Dr

City	State	Zip Code
Rapid City	SD	57701-9266

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

Name of Employer	Occupation
ASSURANT CORPORATE	DIR, ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **810.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : 20141008165233-74

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)
C. Kelly Whiting

Mailing Address 4811 Riva Ridge Rd

City	State	Zip Code
Rapid City	SD	57702-6951

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

Name of Employer	Occupation
ASSURANT CORPORATE	VP, SR ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : 20140917172248-75

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional).....▶	105.00
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 59 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Kelly Whiting
 Mailing Address 4811 Riva Ridge Rd
 City State Zip Code
 Rapid City SD 57702-6951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT CORPORATE VP, SR ACTUARY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-75
 Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
B. Matthew Wieck
 Mailing Address 2028 N Hubbard St
 City State Zip Code
 Milwaukee WI 53212-3340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT HEALTH VP, DIRECT MARKETS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-99
 Amount of Each Receipt this Period
 62.50

Full Name (Last, First, Middle Initial)
C. Matthew Wieck
 Mailing Address 2028 N Hubbard St
 City State Zip Code
 Milwaukee WI 53212-3340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ASSURANT HEALTH VP, DIRECT MARKETS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1125.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-99
 Amount of Each Receipt this Period
 62.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 60 OF 66
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Craig Yopp

Mailing Address 1388 141st St

City State Zip Code
 New Richmond WI 54017-6824

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

Name of Employer Occupation
 ASSURANT CORPORATE VP, INVESTMENT ACCOUNTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1080.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014
Transaction ID : 20140917172248-64

Amount of Each Receipt this Period
 60.00

Full Name (Last, First, Middle Initial)
B. Craig Yopp

Mailing Address 1388 141st St

City State Zip Code
 New Richmond WI 54017-6824

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

Name of Employer Occupation
 ASSURANT CORPORATE VP, INVESTMENT ACCOUNTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1080.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014
Transaction ID : 20141008165233-64

Amount of Each Receipt this Period
 60.00

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

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
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	9497.74

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

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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. USbank

Mailing Address PO BOX 3050

City Milwaukee State WI Zip Code 53201-3050

Purpose of Disbursement
Bank Fee

001
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2014

Transaction ID : C3D0F039767C5FCBE25

Amount of Each Disbursement this Period

21.48

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

21.48

21.48

**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

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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bob Casey for Senate Inc

Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
2018 Primary

011

Candidate Name
Robert P. Casey Jr

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : **BD3B4CFEF1A1C5351CE**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Chris Coons for Delaware

Mailing Address PO Box 9900

City Newark State DE Zip Code 19714

Purpose of Disbursement
2014 General

011

Candidate Name
Christopher Andrew Coons

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: DE District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : **735C006B7EEF348A00F**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Clay Jr. for Congress

Mailing Address PO Box 4544

City St. Louis State MO Zip Code 63108

Purpose of Disbursement
2014 General

011

Candidate Name
William Lacy Clay Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MO District: 01

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : **3C41B13582CB75F6FE3**

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

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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Democratic Party of Wisconsin

Mailing Address 15 N. Pinckney
Suite 200

City Madison State WI Zip Code 53703

Purpose of Disbursement
2014 Contribution

011

Category/
Type

Candidate Name

Democratic Party of Wisconsin

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : AE02BFEA728432CDF9F

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Frederica S. Wilson for Congress

Mailing Address 19821 NW 2nd Avenue
Box 354

City Miami Gardens State FL Zip Code 33169

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Frederica S. Wilson

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 24

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : E1C35159AE7502EA242

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Kind for Congress Committee

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement
2014 General

011

Category/
Type

Candidate Name

Ron Kind

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : 653572A65C791624EF4

Amount of Each Disbursement this Period

2500.00

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

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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kline for Congress

Mailing Address 350 W Burnsville Pkwy
Ste 375

City Burnsville State MN Zip Code 55337

Purpose of Disbursement
2014 General

011

Candidate Name

John Kline

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MN District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 / 09 / 2014

Transaction ID : 1ABA942F7E19EA74E14

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Moran for Kansas

Mailing Address PO Box 1151

City Hays State KS Zip Code 67601

Purpose of Disbursement
2016 Primary

011

Candidate Name

Jerry Moran

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 / 15 / 2014

Transaction ID : DB646E265241365E0C1

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Pat Meehan for Congress

Mailing Address 50 S. Providence Road

City Media State PA Zip Code 19063

Purpose of Disbursement
2014 General

011

Candidate Name

Patrick L. Meehan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 / 26 / 2014

Transaction ID : 4D273F53D8D125B052C

Amount of Each Disbursement this Period

2500.00

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

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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pioneer Political Action Committee

Mailing Address 701 8th Street, NW
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement
2014 Contribution

011

Candidate Name

Pioneer Political Action Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 09 / 2014

Transaction ID : C579249E96A33C310D9

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Randy Hultgren for Congress

Mailing Address PO Box 717

City St Charles State IL Zip Code 60174-0717

Purpose of Disbursement
2014 General

011

Candidate Name

Randall M. Hultgren

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: IL District: 14

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2014

Transaction ID : C1F935A998437538E6C

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Roskam for Congress Committee

Mailing Address PO Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
2014 General

011

Candidate Name

Peter J. Roskam

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) **Contribution**

State: IL District: 06

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2014

Transaction ID : 000E32391029CC69D39

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

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)
Assurant Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stivers for Congress

Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220-8113

Purpose of Disbursement
2014 General

011

Candidate Name

Steve Stivers

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

MM / DD / YYYY
09 / 15 / 2014

Transaction ID : 93D2B7AD9DCAFECE494

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Tim Scott for Senate

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407

Purpose of Disbursement
2014 Special General

011

Candidate Name

Timothy Eugene Scott

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : 546BC70583F33D656C3

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Wyden for Senate

Mailing Address 232 NE 9th Avenue

City Portland State OR Zip Code 97232

Purpose of Disbursement
2016 Primary

011

Candidate Name

Ron Wyden

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2014

Transaction ID : 5C2F13328033E15D88F

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)..... ▶

20000.00