

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.

American Insurance Association Political Action Committee

ADDRESS (number and street)

 -

Check if different than previously reported. (ACC)

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

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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day **POST-Election** Report for the:

General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

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 Mrs. Leigh Ann Pusey

Signature of Treasurer Mrs. Leigh Ann Pusey *[Electronically Filed]* Date / /

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

Office Use Only									FEC FORM 3X Rev. 12/2004
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Insurance Association 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="2013"/>		11931.34
(b) Cash on Hand at Beginning of Reporting Period.....	51913.79	
(c) Total Receipts (from Line 19)	874.73	80518.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	52788.52	92449.60
7. Total Disbursements (from Line 31).....	3520.08	43181.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	49268.44	49268.44
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Insurance Association 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).....	818.18	41471.09
(ii) Unitemized	52.50	2019.12
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	870.68	43490.21
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	37000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	870.68	80490.21
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.).....	4.05	28.05
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))..... ▶	874.73	80518.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	874.73	80518.26

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	20.08	181.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	20.08	181.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	43000.00
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	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3520.08	43181.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3520.08	43181.16

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)	870.68	80490.21
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	870.68	80490.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	20.08	181.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	20.08	181.16

**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 11
<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)
American Insurance Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Fred Bosse		Date of Receipt MM / DD / YYYY 09 / 06 / 2013 Transaction ID : 20130904--1
Mailing Address 28224 Equestrian		Amount of Each Receipt this Period 39.40
City Fair Oaks Ranch	State TX	Zip Code 78015-4655
FEC ID number of contributing federal political committee. C	Name of Employer American Insurance Association	Occupation Vice President, Southwest Region
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 748.60	

Full Name (Last, First, Middle Initial) B. Fred Bosse		Date of Receipt MM / DD / YYYY 09 / 20 / 2013 Transaction ID : 20130916--1
Mailing Address 28224 Equestrian		Amount of Each Receipt this Period 39.40
City Fair Oaks Ranch	State TX	Zip Code 78015-4655
FEC ID number of contributing federal political committee. C	Name of Employer American Insurance Association	Occupation Vice President, Southwest Region
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 748.60	

Full Name (Last, First, Middle Initial) C. Gary Henning		Date of Receipt MM / DD / YYYY 09 / 06 / 2013 Transaction ID : 20130904--4
Mailing Address 14 Cambridge Rd		Amount of Each Receipt this Period 25.00
City Albany	State NY	Zip Code 12203-3002
FEC ID number of contributing federal political committee. C	Name of Employer American Insurance Association	Occupation Assistant Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

SUBTOTAL of Receipts This Page (optional).....▶	103.80
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 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

A. Gary Henning
Full Name (Last, First, Middle Initial)

Mailing Address 14 Cambridge Rd

City Albany State NY Zip Code 12203-3002

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

Name of Employer American Insurance Association Occupation Assistant Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt **09 / 20 / 2013**

Transaction ID : 20130916--4

Amount of Each Receipt this Period **25.00**

B. Leigh Ann Pusey
Full Name (Last, First, Middle Initial)

Mailing Address 1119 Alexandria Ave

City Alexandria State VA Zip Code 22308-1015

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

Name of Employer American Insurance Association Occupation Senior Vice President - Federal Affair

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3653.70**

Date of Receipt **09 / 06 / 2013**

Transaction ID : 20130904--6

Amount of Each Receipt this Period **192.30**

C. Leigh Ann Pusey
Full Name (Last, First, Middle Initial)

Mailing Address 1119 Alexandria Ave

City Alexandria State VA Zip Code 22308-1015

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

Name of Employer American Insurance Association Occupation Senior Vice President - Federal Affair

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3653.70**

Date of Receipt **09 / 20 / 2013**

Transaction ID : 20130916--6

Amount of Each Receipt this Period **192.30**

SUBTOTAL of Receipts This Page (optional)..... **409.60**

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

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NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Willem Rijkxen

Mailing Address 2101 L St NW

City Washington	State DC	Zip Code 20037-1526
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Insurance Association	Occupation Vice President, Public Affairs
----------------------------------------------------	----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.74**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	06	/	2013

Transaction ID : 20130904--7

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)
B. Willem Rijkxen

Mailing Address 2101 L St NW

City Washington	State DC	Zip Code 20037-1526
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Insurance Association	Occupation Vice President, Public Affairs
----------------------------------------------------	----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.74**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	20	/	2013

Transaction ID : 20130916--7

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)
C. Melissa W. Shelk

Mailing Address 4845 Yorktown Blvd

City Arlington	State VA	Zip Code 22207-2737
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Insurance Association	Occupation Vice President-Federal Affairs
----------------------------------------------------	----------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1425.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	06	/	2013

Transaction ID : 20130904--8

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional).....▶	151.92
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 9 OF 11
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Melissa W. Shelk

Mailing Address 4845 Yorktown Blvd

City State Zip Code
 Arlington VA 22207-2737

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

Name of Employer Occupation
 American Insurance Association Vice President-Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1425.00

Date of Receipt
 09 / 20 / 2013
Transaction ID : 20130916--8

Amount of Each Receipt this Period
 75.00

Full Name (Last, First, Middle Initial)
B. Steve Suschil

Mailing Address 3050 Bastone Ct

City State Zip Code
 West Sacramento CA 95691-5186

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

Name of Employer Occupation
 American Insurance Association Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 264.67

Date of Receipt
 09 / 06 / 2013
Transaction ID : 20130904--9

Amount of Each Receipt this Period
 13.93

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

Mailing Address 3050 Bastone Ct

City State Zip Code
 West Sacramento CA 95691-5186

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

Name of Employer Occupation
 American Insurance Association Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 264.67

Date of Receipt
 09 / 20 / 2013
Transaction ID : 20130916--9

Amount of Each Receipt this Period
 13.93

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.86

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 11
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

A. J. Stephen Zielezienski
Full Name (Last, First, Middle Initial)

Mailing Address 10514 James Wren Way

City State Zip Code
Fairfax VA 22030-8119

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

Name of Employer Occupation
American Insurance Association Sr. Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 06 / 2013
Transaction ID : 20130904--13

Amount of Each Receipt this Period
25.00

B. J. Stephen Zielezienski
Full Name (Last, First, Middle Initial)

Mailing Address 10514 James Wren Way

City State Zip Code
Fairfax VA 22030-8119

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

Name of Employer Occupation
American Insurance Association Sr. Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 20 / 2013
Transaction ID : 20130916--13

Amount of Each Receipt this Period
25.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	818.18

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American Insurance Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Grimm for Congress

Mailing Address PO Box 61806

City Staten Island State NY Zip Code 10306-7806

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Michael G. Grimm

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2013

Transaction ID : 9FF3A51028F0E5A7528

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Montanans for Tester

Mailing Address PO Box 1135

City Helena State MT Zip Code 59624

Purpose of Disbursement
2018 Primary

011

Category/
Type

Candidate Name

Jon Tester

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MT District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2013

Transaction ID : 7F51A16FF148A9D6EBC

Amount of Each Disbursement this Period

1000.00

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

3500.00

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

3500.00