

**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

Liberty Mutual Insurance Company - PAC

ADDRESS (number and street) ▼

175 Berkeley Street

☐ Check if different than previously reported. (ACC)

Boston

MA

02117

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00171843

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

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

in the State of

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

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

Election on

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

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
06 01 2016

through

M M M / D D D / Y Y Y Y Y Y
06 30 2016

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

Type or Print Name of Treasurer Renee Harper

Signature of Treasurer

Renee Harper

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
08 15 2016

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Liberty Mutual Insurance Company - PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		163474.74
(b) Cash on Hand at Beginning of Reporting Period.....	166634.81	
(c) Total Receipts (from Line 19)	62537.00	408657.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	229171.81	572131.81
7. Total Disbursements (from Line 31)	197200.00	540160.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	31971.81	31971.81
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)

Page 3

Write or Type Committee Name

Liberty Mutual Insurance Company - PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

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).....	49038.37	293422.50
(ii) Unitemized	8498.63	110051.97
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	57537.00	403474.47
(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) ►	57537.00	403474.47
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.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	182.60
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)) ►	62537.00	408657.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	62537.00	408657.07

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	156700.00	463700.00
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	40500.00	76460.00
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)) ..	197200.00	540160.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	197200.00	540160.00

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)	57537.00	403474.47
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	57537.00	403474.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: F3XA

Transaction ID :

This report is being amended to correct errors in election designation. Contributions to the Richard Burr Committee (6/7/16), Randy Hultgren for Congress (6/7/16 & 6/23/16), Andy Barr for Congress (6/7/16 & 6/23/16), and McHenry for Congress (6/15/16 & 6/22/16) have been corrected to reflect the accurate election. Please note that the contribution to the Richard Burr Committee (6/7/16) was voided in July, and the voided contribution is disclosed on the August monthly report. Additionally, this report discloses that the contribution to Andy Barr for Congress on 6/7/16 was voided

Form/Schedule:

Transaction ID:

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 182

☒ 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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Joseph M Amante

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Real Estate & WPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.56

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463138618250

Amount of Each Receipt this Period

36.36

☐ Memo Item

P/R Deduction (\$18.18 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James M. McGlennon

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2912.10

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463140418250

Amount of Each Receipt this Period

457.88

☐ Memo Item

P/R Deduction (\$228.94 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Terri Campbell

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1133.85

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463142318250

Amount of Each Receipt this Period

176.00

☐ Memo Item

P/R Deduction (\$88.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

670.24

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Susan M. Flinn

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager Human Resources

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

211.57

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463143718250

Amount of Each Receipt this Period

32.84

☐ Memo Item

P/R Deduction (\$16.42 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Stephen Whalen

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

481.66

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463144018250

Amount of Each Receipt this Period

74.36

☐ Memo Item

P/R Deduction (\$37.18 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Patrick Hannah

Mailing Address 2530 Meridian Parkway
Ste 300

City

Durham

State

NC

Zip Code

27713-5273

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Public Aff Off & Counsel

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

283.29

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463144118250

Amount of Each Receipt this Period

43.96

☐ Memo Item

P/R Deduction (\$21.98 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

151.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 182

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Thomas Lovvoll

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director III, Taxation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463144718250

Amount of Each Receipt this Period

136.62

☐ Memo Item

P/R Deduction (\$68.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Heath A Merrill

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.71

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463145618250

Amount of Each Receipt this Period

143.70

☐ Memo Item

P/R Deduction (\$71.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. George S Ryan

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1473.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463145818250

Amount of Each Receipt this Period

230.76

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

511.08

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Dean R Peasley

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

GM, Claims Field Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

342.29

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463146918250

Amount of Each Receipt this Period

53.38

☐ Memo Item

P/R Deduction (\$26.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Angela M Hensley

Mailing Address 310 E 96th St

City

Indianapolis

State

IN

Zip Code

46240-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Claims Field Ops

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

294.63

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463147318250

Amount of Each Receipt this Period

46.06

☐ Memo Item

P/R Deduction (\$23.03 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DeAnna J Kerrick

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Nat'l Account Sales

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

291.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463147718250

Amount of Each Receipt this Period

45.30

☐ Memo Item

P/R Deduction (\$22.65 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

144.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Gary Strannigan

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.16

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463147918250

Amount of Each Receipt this Period

40.62

☐ Memo Item

P/R Deduction (\$20.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Cecil C Booher

Mailing Address 2055 Sugarloaf Circle

City

Duluth

State

GA

Zip Code

30097-4363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Mng Dir II, Nat Brokerage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.23

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463148318250

Amount of Each Receipt this Period

108.76

☐ Memo Item

P/R Deduction (\$54.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. David G Smith

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Claims Svc Centers

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.11

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463148418250

Amount of Each Receipt this Period

56.76

☐ Memo Item

P/R Deduction (\$28.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

206.14

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 182

(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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey D Estes

Mailing Address 1400 S Hwy Dr
Ste 100

City State Zip Code
Fenton MO 63026-2281

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Dir I, State Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463148818250

Amount of Each Receipt this Period

42.26

☐ Memo Item

P/R Deduction (\$21.13 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Lee A Allison

Mailing Address 100 Corporate Pkwy
Ste 225

City State Zip Code
Birmingham AL 35242-2982

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager II, P/L Agency Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463149618250

Amount of Each Receipt this Period

61.72

☐ Memo Item

P/R Deduction (\$30.86 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. David M Green

Mailing Address 650 NE Holladay

City State Zip Code
Portland OR 97232-2045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, App Portfolio & Soft Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463149718250

Amount of Each Receipt this Period

39.44

☐ Memo Item

P/R Deduction (\$19.72 Bi-Weekly)

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

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

143.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 OF 182

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey M Breor

Mailing Address 1600 N Collins Blvd
 # 3000 4000

City State Zip Code
 Richardson TX 75080-3580

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager II, P/L Agency Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463150318250

Amount of Each Receipt this Period

67.96

☐ Memo Item

P/R Deduction (\$33.98 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michael J Donich

Mailing Address 1001 4th Ave
 Fls 8-18 27-31 & 41

City State Zip Code
 Seattle WA 98154-1119

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr Sales Enrich, Proc & Dvlpt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463150618250

Amount of Each Receipt this Period

32.38

☐ Memo Item

P/R Deduction (\$16.19 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Peggy A Kingman

Mailing Address 3011 Sutton Gate Dr
 Ste 400

City State Zip Code
 Suwanee GA 30024-4364

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Claims Team Manager, PM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463150718250

Amount of Each Receipt this Period

62.58

☐ Memo Item

P/R Deduction (\$31.29 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

162.92

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:
(check only one)

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Myrna L Estrada

Mailing Address 1600 N Collins Blvd
3000 4000

City State Zip Code
Richardson TX 75080-3580

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional General Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.73

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463151418250

Amount of Each Receipt this Period

61.88

☐ Memo Item

P/R Deduction (\$30.94 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Israel Abraham

Mailing Address 150 Liberty Way

City State Zip Code
Dover NH 03820-9320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director, IT Mkt Apps

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.67

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463151818250

Amount of Each Receipt this Period

73.54

☐ Memo Item

P/R Deduction (\$36.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. James Clark Howe

Mailing Address 2055 Sugarloaf Circle

City State Zip Code
Duluth GA 30097-4363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

906.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463151918250

Amount of Each Receipt this Period

142.46

☐ Memo Item

P/R Deduction (\$71.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

277.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Paul Koehler

Mailing Address 650 NE Holladay

City

Portland

State

OR

Zip Code

97232-2045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Reg'l Pres, Business Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.58

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463152018250

Amount of Each Receipt this Period

117.02

☐ Memo Item

P/R Deduction (\$58.51 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Sean J Vizyak

Mailing Address 14123 Denver W Parkway

City

Lakewood

State

CO

Zip Code

80401-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director-Special Projects, MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.49

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463152118250

Amount of Each Receipt this Period

42.16

☐ Memo Item

P/R Deduction (\$21.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Hani Rizkalla

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Surety Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.56

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463153518250

Amount of Each Receipt this Period

80.74

☐ Memo Item

P/R Deduction (\$40.37 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

239.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Kelly Rene Ridgwell

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Operations Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.01

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463153918250

Amount of Each Receipt this Period

44.24

☐ Memo Item

P/R Deduction (\$22.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Hamid Mirza

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.07

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463154118250

Amount of Each Receipt this Period

108.30

☐ Memo Item

P/R Deduction (\$55.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Kimberly A Haza

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.04

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463154218250

Amount of Each Receipt this Period

85.38

☐ Memo Item

P/R Deduction (\$42.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

237.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mark R Whiting

Mailing Address 24001 E Mission Ave
Ste 100

City State Zip Code
Liberty Lake WA 99019-9529

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Cust/Agency Srv Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : PR463154718250

Amount of Each Receipt this Period

59.72

☐ Memo Item

P/R Deduction (\$29.86 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. John B Wilcox

Mailing Address 1001 4th Ave
Fls 8-18 27-31 & 41

City State Zip Code
Seattle WA 98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Claims Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : PR463155218250

Amount of Each Receipt this Period

40.74

☐ Memo Item

P/R Deduction (\$20.37 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Paul J Chmura

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

LMS Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

861.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : PR463155318250

Amount of Each Receipt this Period

132.92

☐ Memo Item

P/R Deduction (\$66.46 Bi-Weekly)

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

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

233.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Kris L Hill

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Field Ops

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1188.29

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463155818250

Amount of Each Receipt this Period

184.30

☐ Memo Item

P/R Deduction (\$92.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Spencer J Donkin

Mailing Address 1615 Murray Canyon Rd

Ste 300

City

San Diego

State

CA

Zip Code

92108-4314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Reg'l Pres, Business Insurance

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

874.22

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463156118250

Amount of Each Receipt this Period

135.12

☐ Memo Item

P/R Deduction (\$67.56 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Suzanne M Rapier

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Customer Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

734.97

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463156918250

Amount of Each Receipt this Period

113.60

☐ Memo Item

P/R Deduction (\$56.80 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

433.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Ross A Powell

Mailing Address International Financial Services C
Dublin 1 Ireland

City Dublin State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Head of Claims, Ireland

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.40

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463157018250

Amount of Each Receipt this Period

57.18

☐ Memo Item

P/R Deduction (\$28.59 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Judith M Gonsalves

Mailing Address 10 St James Ave

City Boston State MA Zip Code 02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager-Corp Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1499.94

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463157318250

Amount of Each Receipt this Period

230.76

☐ Memo Item

P/R Deduction (\$115.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Tyler C Asher

Mailing Address 1001 4th Ave
Fls 8-18 27-31 & 41

City Seattle State WA Zip Code 98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Distribution Insights

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.69

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463157418250

Amount of Each Receipt this Period

77.84

☐ Memo Item

P/R Deduction (\$38.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

365.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Thomas M Troy

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

General Mgr, Field Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1249.05

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463157718250

Amount of Each Receipt this Period

194.24

☐ Memo Item

P/R Deduction (\$97.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Timothy A Mikolajewski

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Pres-Liberty Mutual Surety

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1853.69

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463157818250

Amount of Each Receipt this Period

288.08

☐ Memo Item

P/R Deduction (\$144.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Santosh Perumbadi

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Agent/Broker Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

811.43

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463157918250

Amount of Each Receipt this Period

126.16

☐ Memo Item

P/R Deduction (\$63.08 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

608.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Amy M. Wixon

Mailing Address 10 St James Ave

City
Boston

State
MA

Zip Code
02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director Catastrophe Modeling

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.28

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463158318250

Amount of Each Receipt this Period

62.16

☐ Memo Item

P/R Deduction (\$31.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Lisa M. Perricone

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Compensation Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.28

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463158718250

Amount of Each Receipt this Period

35.60

☐ Memo Item

P/R Deduction (\$17.80 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Nicole L Carter

Mailing Address 2055 Sugarloaf Circle

City
Duluth

State
GA

Zip Code
30097-4363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, A/B Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.56

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463159318250

Amount of Each Receipt this Period

65.86

☐ Memo Item

P/R Deduction (\$32.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

163.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Trevor G Schneider

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director II, Taxation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

789.24

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0		2	0	1	6		

Transaction ID : PR463159718250

Amount of Each Receipt this Period

123.08

☐ Memo Item

P/R Deduction (\$61.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. William J Adams

Mailing Address 225 Borthwick Ave

City

Portsmouth

State

NH

Zip Code

03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Dir, Infr & App Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.86

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0		2	0	1	6		

Transaction ID : PR463160518250

Amount of Each Receipt this Period

34.38

☐ Memo Item

P/R Deduction (\$17.19 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Julie M Haase

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Financial Officer, GCM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1883.09

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0		2	0	1	6		

Transaction ID : PR463161018250

Amount of Each Receipt this Period

346.16

☐ Memo Item

P/R Deduction (\$173.08 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

503.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. John C. Heveran

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Market CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2078.46

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463161718250

Amount of Each Receipt this Period

323.08

☐ Memo Item

P/R Deduction (\$161.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michael Mahoney

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.92

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463162118250

Amount of Each Receipt this Period

33.38

☐ Memo Item

P/R Deduction (\$16.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Keith D Thompson

Mailing Address 2400 Lakeside Blvd
Ste 400

City

Richardson

State

TX

Zip Code

75082-4341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

889.32

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463164018250

Amount of Each Receipt this Period

137.26

☐ Memo Item

P/R Deduction (\$68.63 Bi-Weekly)

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

493.72

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Thomas P. Kalmbach

Mailing Address 10 St James Ave

City

Boston

State

MA

Zip Code

02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Financial Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1360.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463164318250

Amount of Each Receipt this Period

210.38

☐ Memo Item

P/R Deduction (\$105.19 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Lara Sojka

Mailing Address 10 St James Ave

City

Boston

State

MA

Zip Code

02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Financial Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

477.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463164518250

Amount of Each Receipt this Period

74.92

☐ Memo Item

P/R Deduction (\$37.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Roger Robert Grenier

Mailing Address 10 St James Ave

City

Boston

State

MA

Zip Code

02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, CAT Research&Development

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

940.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463164918250

Amount of Each Receipt this Period

146.46

☐ Memo Item

P/R Deduction (\$73.23 Bi-Weekly)

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

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

431.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mojgan Lefebvre

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Market CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.56

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463165018250

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Eugene N Harris

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

808.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463185018250

Amount of Each Receipt this Period

125.84

☐ Memo Item

P/R Deduction (\$62.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Arlene Zalayet

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

General Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2092.31

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463198718250

Amount of Each Receipt this Period

325.62

☐ Memo Item

P/R Deduction (\$162.81 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

601.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Daniel O'Sullivan

Mailing Address 225 Borthwick Ave

City State Zip Code
 Portsmouth NH 03801-4152

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463199418250

Amount of Each Receipt this Period

45.02

☐ Memo Item

P/R Deduction (\$27.01 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Lawrence John McTaggartMailing Address 1 N Franklin
Ste 2200

City State Zip Code
 Chicago IL 60606-3601

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463199918250

Amount of Each Receipt this Period

68.12

☐ Memo Item

P/R Deduction (\$34.06 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. John Probolus

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Construction Wraps

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463200118250

Amount of Each Receipt this Period

35.36

☐ Memo Item

P/R Deduction (\$17.68 Bi-Weekly)

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

148.50

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Diane C Mitchell

Mailing Address 120 Vantis
Ste 130

City State Zip Code
Aliso Viejo CA 92656-2677

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional General Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.97

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463201218250

Amount of Each Receipt this Period

71.26

☐ Memo Item

P/R Deduction (\$35.63 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Kimberly Borgelt Anderson

Mailing Address 1001 4th Ave
Fls 8-18 27-31 & 41

City State Zip Code
Seattle WA 98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Dir II, Prod Design & Model

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.11

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463201318250

Amount of Each Receipt this Period

32.76

☐ Memo Item

P/R Deduction (\$16.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michael Edward Robon

Mailing Address 1001 4th Ave
Fls 8-18 27-31 & 41

City State Zip Code
Seattle WA 98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

739.45

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463201618250

Amount of Each Receipt this Period

115.00

☐ Memo Item

P/R Deduction (\$57.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

219.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Rita Irene Stollar

Mailing Address 100 Domain Dr
Ste 200

City State Zip Code
Exeter NH 03833-4904

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr Regulatory Reporting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463204918250

Amount of Each Receipt this Period

31.98

☐ Memo Item

P/R Deduction (\$15.99 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. John J McKenna

Mailing Address 225 Borthwick Ave

City State Zip Code
Portsmouth NH 03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Info Security Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1511.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463205618250

Amount of Each Receipt this Period

234.62

☐ Memo Item

P/R Deduction (\$117.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Carl Cressey Jr

Mailing Address 150 Liberty Way

City State Zip Code
Dover NH 03820-9320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Facility Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463207618250

Amount of Each Receipt this Period

41.90

☐ Memo Item

P/R Deduction (\$20.95 Bi-Weekly)

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

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

308.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Robert P Pare

Mailing Address 150 Liberty Way

City
Dover

State
NH

Zip Code
03820-9320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Business Systems Projects

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.55

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463208018250

Amount of Each Receipt this Period

32.50

☐ Memo Item

P/R Deduction (\$16.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Randall E Kneeland

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Controller-Comm Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1361.57

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463208118250

Amount of Each Receipt this Period

211.54

☐ Memo Item

P/R Deduction (\$105.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Edward E Hanlon

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Gen Mgr, Commercial Svc Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.26

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463209618250

Amount of Each Receipt this Period

35.92

☐ Memo Item

P/R Deduction (\$17.96 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

279.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. J Paul Condrin

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

President Commercial Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3006.92

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463209918250

Amount of Each Receipt this Period

467.04

☐ Memo Item

P/R Deduction (\$233.52 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. John P Salmon

Mailing Address 100 Liberty Way

City
Dover

State
NH

Zip Code
03820-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Assistant Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1013.38

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463210518250

Amount of Each Receipt this Period

157.24

☐ Memo Item

P/R Deduction (\$78.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Geoffrey D Day

Mailing Address 225 Borthwick Ave

City
Portsmouth

State
NH

Zip Code
03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Operations Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.66

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463210818250

Amount of Each Receipt this Period

48.46

☐ Memo Item

P/R Deduction (\$24.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

672.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. John T Cooney

Mailing Address 230 Hanscom Dr

City State Zip Code
 Bedford MA 01730-2630

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director of Aviation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1309.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463211318250

Amount of Each Receipt this Period

203.08

☐ Memo Item

P/R Deduction (\$101.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Christopher C Conway

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463211718250

Amount of Each Receipt this Period

76.92

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Reuben M Parker

Mailing Address 100 Liberty Way

City State Zip Code
 Dover NH 03820-4597

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Assistant Controller II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463211818250

Amount of Each Receipt this Period

32.86

☐ Memo Item

P/R Deduction (\$16.43 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

312.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Joyce A Witham

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager-Special Projects, STP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

200.41

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463212018250

Amount of Each Receipt this Period

31.22

☐ Memo Item

P/R Deduction (\$15.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James T Masterson Jr

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Division Underwriting Manager

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

808.07

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463212218250

Amount of Each Receipt this Period

126.30

☐ Memo Item

P/R Deduction (\$63.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michael J Johnson

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Corp Counsel, HO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

474.01

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463213118250

Amount of Each Receipt this Period

73.70

☐ Memo Item

P/R Deduction (\$36.85 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

231.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Alan Schlosberg

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

President, LM PL Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463213718250

Amount of Each Receipt this Period

725.73

☐ Memo Item

P/R Deduction (\$330.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. David H Long

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chairman & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4445.05

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463214018250

Amount of Each Receipt this Period

699.32

☐ Memo Item

P/R Deduction (\$205.29 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. James M MacPhee

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

COO, US Consumer Markets

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463217218250

Amount of Each Receipt this Period

76.84

☐ Memo Item

P/R Deduction (\$76.84 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

1501.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Steven A Rusconi

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Corporate Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.67

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463218518250

Amount of Each Receipt this Period

35.36

☐ Memo Item

P/R Deduction (\$17.68 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Grahame K Wells

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Corporate Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1271.56

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463218618250

Amount of Each Receipt this Period

197.80

☐ Memo Item

P/R Deduction (\$98.90 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Lori L Doyle Place

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Assistant General Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1235.96

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463219018250

Amount of Each Receipt this Period

192.30

☐ Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

425.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Laurance H Yahia

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1167.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463219418250

Amount of Each Receipt this Period

181.74

☐ Memo Item

P/R Deduction (\$90.87 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Carl P Brigada Jr

Mailing Address 100 Liberty Way

City State Zip Code
 Dover NH 03820-4597

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Claims Examining

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463220218250

Amount of Each Receipt this Period

48.24

☐ Memo Item

P/R Deduction (\$24.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Hans A Hagen

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, PAL Field Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.61

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463220418250

Amount of Each Receipt this Period

99.24

☐ Memo Item

P/R Deduction (\$49.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

329.22

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mary Madden

Mailing Address 100 Liberty Way

City
Dover

State
NH

Zip Code
03820-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Actuary, Life

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.99

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463221818250

Amount of Each Receipt this Period

33.52

☐ Memo Item

P/R Deduction (\$16.76 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. William F Cupelo

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Corporate Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.91

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463221918250

Amount of Each Receipt this Period

35.50

☐ Memo Item

P/R Deduction (\$17.75 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michael J Fallon

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

President, National Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.29

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463222618250

Amount of Each Receipt this Period

136.03

☐ Memo Item

P/R Deduction (\$66.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

205.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Nancy R Moore

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir of State Operations-WC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.13

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463225818250

Amount of Each Receipt this Period

34.84

☐ Memo Item

P/R Deduction (\$17.42 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Pamela M McIntyre

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.34

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463226018250

Amount of Each Receipt this Period

36.12

☐ Memo Item

P/R Deduction (\$24.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mark D'Amato

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Asst Treasurer-Treasury Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463226118250

Amount of Each Receipt this Period

31.84

☐ Memo Item

P/R Deduction (\$15.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

102.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Edward Anthony Lopes

Mailing Address 10 St James Ave

City State Zip Code
 Boston MA 02116-3813

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Internal Audit Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463226418250

Amount of Each Receipt this Period

51.34

☐ Memo Item

P/R Deduction (\$25.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Daniel R Eckerson

Mailing Address 225 Borthwick Ave

City State Zip Code
 Portsmouth NH 03801-4152

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director, Data Center Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463226918250

Amount of Each Receipt this Period

53.76

☐ Memo Item

P/R Deduction (\$26.88 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Constance Bayne

Mailing Address 9450 Seward Rd

City State Zip Code
 Fairfield OH 45014-5412

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Reg'l Pres, Business Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463227318250

Amount of Each Receipt this Period

56.86

☐ Memo Item

P/R Deduction (\$28.43 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

161.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. William H Kratch

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Claims Field Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.88

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463230018250

Amount of Each Receipt this Period

33.23

☐ Memo Item

P/R Deduction (\$44.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Frank C Radack

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Claims - Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.61

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463230618250

Amount of Each Receipt this Period

64.00

☐ Memo Item

P/R Deduction (\$32.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. John P Lemire

Mailing Address 10 St James Ave

City State Zip Code
 Boston MA 02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Claims Officer, LMB

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.03

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463231118250

Amount of Each Receipt this Period

39.14

☐ Memo Item

P/R Deduction (\$19.57 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

136.37

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Gary M Bennett

Mailing Address 150 Motor Parkway
Ste 210

City State Zip Code
Hauppauge NY 11788-5180

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Area Manager, PM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.26

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463232118250

Amount of Each Receipt this Period

70.26

☐ Memo Item

P/R Deduction (\$35.13 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Paul Mattera

Mailing Address 175 Berkeley St

City State Zip Code
Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2237.21

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463233318250

Amount of Each Receipt this Period

345.92

☐ Memo Item

P/R Deduction (\$69.18 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Edward S Carmody

Mailing Address 225 Borthwick Ave

City State Zip Code
Portsmouth NH 03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463234218250

Amount of Each Receipt this Period

36.00

☐ Memo Item

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

452.18

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Robert J Chizmadia

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director, CI

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

272.87

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463236618250

Amount of Each Receipt this Period

41.98

☐ Memo Item

P/R Deduction (\$20.99 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Susan J Mellody

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, WC Field Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

422.64

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463237018250

Amount of Each Receipt this Period

65.56

☐ Memo Item

P/R Deduction (\$32.78 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Maureen Sweeney

Mailing Address 10 St James Ave

City

Boston

State

MA

Zip Code

02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir II Spec Projects-Intl, STP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

444.99

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463237518250

Amount of Each Receipt this Period

68.46

☐ Memo Item

P/R Deduction (\$34.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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176.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Gary DeGruttola

Mailing Address 150 Liberty Way

City
Dover

State
NH

Zip Code
03820-9320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Market CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2103.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463239118250

Amount of Each Receipt this Period

326.92

☐ Memo Item

P/R Deduction (\$163.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Barbara S Mahoney

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463239618250

Amount of Each Receipt this Period

57.84

☐ Memo Item

P/R Deduction (\$28.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. David M Carey

Mailing Address 450 Plymouth Rd
Ste 400 Interchange Corp Center

City
Plymouth Meeting

State
PA

Zip Code
19462-1644

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

COO, US Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1154.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463241618250

Amount of Each Receipt this Period

179.44

☐ Memo Item

P/R Deduction (\$89.72 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

564.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Thomas J Burke

Mailing Address 10 Bank St
Ste 1200

City State Zip Code
White Plains NY 10606-1947

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Resident Attorney IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.19

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463246318250

Amount of Each Receipt this Period

52.26

☐ Memo Item

P/R Deduction (\$26.13 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Stephen E Leavitt

Mailing Address 150 Liberty Way

City State Zip Code
Dover NH 03820-9320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir II, Adv Analytics-Modeling

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463246418250

Amount of Each Receipt this Period

53.46

☐ Memo Item

P/R Deduction (\$26.73 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Christopher G Cuniff

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1574.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463247218250

Amount of Each Receipt this Period

244.00

☐ Memo Item

P/R Deduction (\$122.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

349.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Michael J Gwozdz

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, UW Technical Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

849.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463248418250

Amount of Each Receipt this Period

131.94

☐ Memo Item

P/R Deduction (\$65.97 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Kelly J Kahler

Mailing Address 7894 Oakland Dr

City
Portage

State
MI

Zip Code
49024-4936

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Branch Manager, PM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.94

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463249118250

Amount of Each Receipt this Period

34.76

☐ Memo Item

P/R Deduction (\$17.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Julia K Johnson

Mailing Address 100 Liberty Way

City
Dover

State
NH

Zip Code
03820-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Operations Mgr-Disability Clms

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.32

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463249718250

Amount of Each Receipt this Period

33.76

☐ Memo Item

P/R Deduction (\$16.88 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

200.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Dennis J Goebel

Mailing Address 1000 AAA Dr
Ste 150

City State Zip Code
Heathrow FL 32746-5060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Channel Enablement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463250418250

Amount of Each Receipt this Period

37.54

☐ Memo Item

P/R Deduction (\$18.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mary E Connolly

Mailing Address 175 Berkeley St

City State Zip Code
Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, ER & HR Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.62

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463250818250

Amount of Each Receipt this Period

90.76

☐ Memo Item

P/R Deduction (\$45.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Charles W Hunnell

Mailing Address 3550 Buschwood Park Dr
Ste 300

City State Zip Code
Tampa FL 33618-4437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Account Manager, NM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463251318250

Amount of Each Receipt this Period

37.38

☐ Memo Item

P/R Deduction (\$18.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

165.68

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Caren Latona

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir Distribution Mgmt-Natl Acc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

873.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463252818250

Amount of Each Receipt this Period

135.84

☐ Memo Item

P/R Deduction (\$67.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Denise S Block

Mailing Address 150 Liberty Way

City State Zip Code
 Dover NH 03820-9320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director, IT Mkt Apps

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.34

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463254918250

Amount of Each Receipt this Period

36.00

☐ Memo Item

P/R Deduction (\$18.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Maureen McCarthy

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, WC Field Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463258618250

Amount of Each Receipt this Period

108.36

☐ Memo Item

P/R Deduction (\$54.18 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

280.20

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Barbara Pennell Vanhorn

Mailing Address Suite 1655 16th Floor
520 Walnut Street

City State Zip Code
Philadelphia PA 19106-3600

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional General Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463258918250

Amount of Each Receipt this Period

46.52

☐ Memo Item

P/R Deduction (\$23.26 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mark A Butler

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

President, National Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2587.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463259518250

Amount of Each Receipt this Period

398.08

☐ Memo Item

P/R Deduction (\$199.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. David B May

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Manager, Sales & Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463264118250

Amount of Each Receipt this Period

40.16

☐ Memo Item

P/R Deduction (\$20.08 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

484.76

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Daniel W Ryan

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463264318250

Amount of Each Receipt this Period

46.15

☐ Memo Item

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Candace L Sutcliffe

Mailing Address 175 Berkeley St

City State Zip Code
Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1034.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463265318250

Amount of Each Receipt this Period

161.20

☐ Memo Item

P/R Deduction (\$80.60 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Meredith L Barnes-Cook

Mailing Address 150 Liberty Way

City State Zip Code
Dover NH 03820-9320

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager Systems & Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.47

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463266218250

Amount of Each Receipt this Period

143.84

☐ Memo Item

P/R Deduction (\$71.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

351.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. John M Sasien

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director, CI

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

244.87

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463270018250

Amount of Each Receipt this Period

37.92

☐ Memo Item

P/R Deduction (\$18.96 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James F Kelleher

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Legal Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463277718250

Amount of Each Receipt this Period

692.26

☐ Memo Item

P/R Deduction (\$288.41 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Maryellen E Debellis

Mailing Address 111 Presidential Blvd
Ste 127

City

Bala Cynwyd

State

PA

Zip Code

19004-1011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, WC Field Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

564.08

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463278418250

Amount of Each Receipt this Period

87.60

☐ Memo Item

P/R Deduction (\$43.80 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

817.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Dennis J Langwell

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3093.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463280018250

Amount of Each Receipt this Period

484.96

☐ Memo Item

P/R Deduction (\$242.48 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. David P Wooler

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463280218250

Amount of Each Receipt this Period

110.76

☐ Memo Item

P/R Deduction (\$55.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Erik S McdowellMailing Address 3011 Sutton Gate Dr
Ste 400

City State Zip Code
 Suwanee GA 30024-4364

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Claims Field Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463280618250

Amount of Each Receipt this Period

40.40

☐ Memo Item

P/R Deduction (\$20.20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

636.12

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Margaret Dillon

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Customer Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463280718250

Amount of Each Receipt this Period

727.53

☐ Memo Item

P/R Deduction (\$332.48 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Stephen R Kenney

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Referral

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463281018250

Amount of Each Receipt this Period

54.76

☐ Memo Item

P/R Deduction (\$27.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Kevin P Heffernan

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Real Estate Transactions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463283418250

Amount of Each Receipt this Period

54.76

☐ Memo Item

P/R Deduction (\$27.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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837.05

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Christopher Felton

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Executive Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1648.10

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463284418250

Amount of Each Receipt this Period

257.70

☐ Memo Item

P/R Deduction (\$128.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Jeffrey W Tipton

Mailing Address 2100 W Walnut Hill Lane
Ste 100

City
Irving

State
TX

Zip Code
75038-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Division General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.16

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463284818250

Amount of Each Receipt this Period

54.72

☐ Memo Item

P/R Deduction (\$27.36 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Robert E Dodson

Mailing Address 9450 Seward Rd

City
Fairfield

State
OH

Zip Code
45014-5412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.22

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463285118250

Amount of Each Receipt this Period

34.40

☐ Memo Item

P/R Deduction (\$17.20 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

346.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. William R Adams Jr

Mailing Address 150 Liberty Way

City
DoverState
NHZip Code
03820-9320FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.43

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463285318250

Amount of Each Receipt this Period

35.86

☐ Memo Item

P/R Deduction (\$17.93 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Gerald F Nisbett

Mailing Address 225 Borthwick Ave

City

Portsmouth

State

NH

Zip Code

03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Technology Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463285718250

Amount of Each Receipt this Period

55.44

☐ Memo Item

P/R Deduction (\$27.72 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michelle P Ciullo

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Mgr, Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463287018250

Amount of Each Receipt this Period

42.92

☐ Memo Item

P/R Deduction (\$21.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

134.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Sean B McSweeney

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463287518250

Amount of Each Receipt this Period

149.88

☐ Memo Item

P/R Deduction (\$74.94 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mark C Touhey

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Corp Sec'y&Chief of Staff-CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463288218250

Amount of Each Receipt this Period

307.70

☐ Memo Item

P/R Deduction (\$153.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Charles W Farber

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463288318250

Amount of Each Receipt this Period

80.56

☐ Memo Item

P/R Deduction (\$40.28 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

538.14

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mark A Pare

Mailing Address 157 Berkeley St

City	State	Zip Code
Boston	MA	02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463290118250

Amount of Each Receipt this Period

103.38

☐ Memo Item

P/R Deduction (\$51.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Frederick R Calcinari

Mailing Address 225 Borthwick Ave

City	State	Zip Code
Portsmouth	NH	03801-4152

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463290718250

Amount of Each Receipt this Period

48.72

☐ Memo Item

P/R Deduction (\$24.36 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Nancy Chrissinger CobbMailing Address Three Mill Rd
Ste 301

City	State	Zip Code
Wilmington	DE	19806-2164

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Resident Attorney I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463292618250

Amount of Each Receipt this Period

55.68

☐ Memo Item

P/R Deduction (\$27.84 Bi-Weekly)

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

207.78

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Robert G Taylor

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Corporate Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.49

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463293918250

Amount of Each Receipt this Period

38.16

☐ Memo Item

P/R Deduction (\$19.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. John F Rhodes

Mailing Address Suite 300
 13830 Ballantyne Corporate Place

City State Zip Code
 Charlotte NC 28277-3806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

716.43

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463296918250

Amount of Each Receipt this Period

110.22

☐ Memo Item

P/R Deduction (\$55.11 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ethan Tarby

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Distribution Insights

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1405.12

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463297018250

Amount of Each Receipt this Period

225.92

☐ Memo Item

P/R Deduction (\$113.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

374.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Robert D Blauvelt

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Executive Managing Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463297518250

Amount of Each Receipt this Period

392.67

☐ Memo Item

P/R Deduction (\$392.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Susan B Jackson

Mailing Address 22 Century Blvd
Ste 120

City

Nashville

State

TN

Zip Code

37214-3775

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

878.23

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463297618250

Amount of Each Receipt this Period

136.76

☐ Memo Item

P/R Deduction (\$68.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Shannon M Griepsma

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director, Financial Analysis

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

336.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463297718250

Amount of Each Receipt this Period

51.90

☐ Memo Item

P/R Deduction (\$25.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

581.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. W. Sean Conner

Mailing Address 150 Liberty Way

City
DoverState
NHZip Code
03820-9320FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director, IT Mkt Apps

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463299918250

Amount of Each Receipt this Period

35.24

☐ Memo Item

P/R Deduction (\$17.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Karen L Whiteknact

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Enterprise Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1692.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463300818250

Amount of Each Receipt this Period

263.46

☐ Memo Item

P/R Deduction (\$131.73 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Amy J Leddy

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Category Strategist III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.54

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463301318250

Amount of Each Receipt this Period

49.16

☐ Memo Item

P/R Deduction (\$24.58 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

347.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Timothy Sweeney

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Pres, Global Consumer Markets

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4115.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463303118250

Amount of Each Receipt this Period

653.84

☐ Memo Item

P/R Deduction (\$230.81 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Lawrence M PaulaskiMailing Address Suite 100, Canyon Corporate Center
2510 W. DunlapCity
PhoenixState
AZZip Code
85021-2737FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463304218250

Amount of Each Receipt this Period

33.54

☐ Memo Item

P/R Deduction (\$16.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Angela B TaylorMailing Address Suite 1660 16th Floor
520 Walnut StreetCity
PhiladelphiaState
PAZip Code
19106-3600FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Reg Mgr-Enterprise Legal Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463306618250

Amount of Each Receipt this Period

129.84

☐ Memo Item

P/R Deduction (\$64.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

817.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. John M Cusolito

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Public & Media Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.53

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463306818250

Amount of Each Receipt this Period

68.08

☐ Memo Item

P/R Deduction (\$34.04 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Charles F Greer

Mailing Address 2400 Lakeside Blvd
Ste 400

City

Richardson

State

TX

Zip Code

75082-4341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Commercial Lines UW Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.38

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463308518250

Amount of Each Receipt this Period

51.72

☐ Memo Item

P/R Deduction (\$25.86 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Scott E Aiello

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.64

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463309218250

Amount of Each Receipt this Period

46.38

☐ Memo Item

P/R Deduction (\$23.19 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

166.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Christopher L Peirce

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

President Global Specialty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3160.30

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463310718250

Amount of Each Receipt this Period

486.20

☐ Memo Item

P/R Deduction (\$243.10 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Myron C Harrington

Mailing Address Suite 300

13830 Ballantyne Corporate Place

City

Charlotte

State

NC

Zip Code

28277-3806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

882.60

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463311118250

Amount of Each Receipt this Period

136.98

☐ Memo Item

P/R Deduction (\$68.49 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Demetrios Fifis

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.62

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463311418250

Amount of Each Receipt this Period

81.54

☐ Memo Item

P/R Deduction (\$40.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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704.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Walter H Houghton

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Talent Mgmt Practices

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

410.02

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463314018250

Amount of Each Receipt this Period

63.08

☐ Memo Item

P/R Deduction (\$31.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Renee L Harper

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Controller

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

449.17

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463314218250

Amount of Each Receipt this Period

70.04

☐ Memo Item

P/R Deduction (\$35.02 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Kristin A Denison

Mailing Address 135 Commerce Way

City

Portsmouth

State

NH

Zip Code

03801-3243

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager Systems & Ops

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

239.97

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463315318250

Amount of Each Receipt this Period

37.08

☐ Memo Item

P/R Deduction (\$18.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

170.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Debra B Pooley

Mailing Address 650 NE Holladay

City State Zip Code
Portland OR 97232-2045

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : PR463318118250

Amount of Each Receipt this Period

148.96

☐ Memo Item

P/R Deduction (\$74.48 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Melanie M Foley

Mailing Address 175 Berkeley St

City State Zip Code
Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Talent & Ent Svcs Offcr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3952.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : PR463318518250

Amount of Each Receipt this Period

636.70

☐ Memo Item

P/R Deduction (\$318.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Steven Zagoren

Mailing Address 175 Berkeley St

City State Zip Code
Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : PR463319018250

Amount of Each Receipt this Period

130.38

☐ Memo Item

P/R Deduction (\$65.19 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

916.04

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Jeffrey F Woodcock

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.57

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463319118250

Amount of Each Receipt this Period

48.84

☐ Memo Item

P/R Deduction (\$24.42 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michael J Plavnick

Mailing Address 13830 Ballantyne Corporate Place
Ste 150

City
Charlotte

State
NC

Zip Code
28277-3806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Complex Claims & HIU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.68

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463319418250

Amount of Each Receipt this Period

36.72

☐ Memo Item

P/R Deduction (\$18.36 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Rich A Possanza

Mailing Address 1615 Murray Canyon Rd
Ste 300

City
San Diego

State
CA

Zip Code
92108-4314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director-Special Projects, MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.37

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463320618250

Amount of Each Receipt this Period

48.98

☐ Memo Item

P/R Deduction (\$9.80 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

134.54

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Deborah Jaquith Oates

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1283.07

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463321218250

Amount of Each Receipt this Period

223.08

☐ Memo Item

P/R Deduction (\$111.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Stephen J McAnena

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

President, Business Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3128.53

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463321618250

Amount of Each Receipt this Period

540.95

☐ Memo Item

P/R Deduction (\$88.16 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Kristen M Bessette

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

SBU Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1998.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463322518250

Amount of Each Receipt this Period

311.54

☐ Memo Item

P/R Deduction (\$155.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

1075.57

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Francis J Mcgrath

Mailing Address 450 Plymouth Rd

Ste 400 Interchange Corp Center

City

Plymouth Meeting

State

PA

Zip Code

19462-1644

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

CUO, Contract

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463322618250

Amount of Each Receipt this Period

33.16

☐ Memo Item

P/R Deduction (\$16.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. William M Lynch

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

State Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1388.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463326918250

Amount of Each Receipt this Period

216.16

☐ Memo Item

P/R Deduction (\$108.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Douglas J Wood

Mailing Address 100 Liberty Way

City

Dover

State

NH

Zip Code

03820-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Actuary, Life

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

448.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463327018250

Amount of Each Receipt this Period

68.98

☐ Memo Item

P/R Deduction (\$34.49 Bi-Weekly)

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

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

318.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Richard P Quinlan

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1956.72

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463327418250

Amount of Each Receipt this Period

304.76

☐ Memo Item

P/R Deduction (\$152.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Rodolfo Ortiz

Mailing Address 1 N Franklin
Ste 2200

City

Chicago

State

IL

Zip Code

60606-3601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director, NI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.01

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463328718250

Amount of Each Receipt this Period

39.54

☐ Memo Item

P/R Deduction (\$19.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Deborah S McGonigle

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

639.22

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463332118250

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

444.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Wendy A Schultz

Mailing Address 150 Liberty Way

City
Dover

State
NH

Zip Code
03820-9320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, App Portfolio & Soft Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.03

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463336318250

Amount of Each Receipt this Period

34.62

☐ Memo Item

P/R Deduction (\$17.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Richard A Bouchard

Mailing Address 13830 Ballantyne Corporate Place
Ste 150

City
Charlotte

State
NC

Zip Code
28277-3806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Claims Mgr I, CI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.81

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463336918250

Amount of Each Receipt this Period

46.74

☐ Memo Item

P/R Deduction (\$23.37 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Brian M OConnor

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Claims Field Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1386.53

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463337418250

Amount of Each Receipt this Period

215.38

☐ Memo Item

P/R Deduction (\$107.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

296.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Dianne E Winslow

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Business Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.54

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463337818250

Amount of Each Receipt this Period

32.12

☐ Memo Item

P/R Deduction (\$16.06 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Kathy M Wallace

Mailing Address 13830 Ballantyne Corporate Place
 Ste 150

City State Zip Code
 Charlotte NC 28277-3806

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.34

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463338118250

Amount of Each Receipt this Period

46.24

☐ Memo Item

P/R Deduction (\$23.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Matthew M Mahan

Mailing Address 10 St James Ave

City State Zip Code
 Boston MA 02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Planning & Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.94

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463340218250

Amount of Each Receipt this Period

37.46

☐ Memo Item

P/R Deduction (\$18.73 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

115.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. James C Norris

Mailing Address 201 E Pine St
Ste 875

City State Zip Code
Orlando FL 32801-2765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Resident Attorney III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.03

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463340518250

Amount of Each Receipt this Period

64.62

☐ Memo Item

P/R Deduction (\$32.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James R Koenig

Mailing Address One S Wacker Dr
Ste 2200

City State Zip Code
Chicago IL 60606-4689

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Surety Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.63

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463341418250

Amount of Each Receipt this Period

34.56

☐ Memo Item

P/R Deduction (\$17.28 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. James E Thayer

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, AL Field Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.68

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463343118250

Amount of Each Receipt this Period

40.56

☐ Memo Item

P/R Deduction (\$20.28 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

139.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mark A Smith

Mailing Address 2530 Sever Rd
Ste 200

City State Zip Code
Lawrenceville GA 30043-4024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Technical Consultant II, RC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.54

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR46334318250

Amount of Each Receipt this Period

39.40

☐ Memo Item

P/R Deduction (\$19.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Gregory S VanDam

Mailing Address 100 Liberty Way

City State Zip Code
Dover NH 03820-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

General Manager-Claims & Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463347318250

Amount of Each Receipt this Period

56.24

☐ Memo Item

P/R Deduction (\$28.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Johnathan M Reardon

Mailing Address 135 Commerce Way

City State Zip Code
Portsmouth NH 03801-3243

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director, IT Mkt Apps

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463351918250

Amount of Each Receipt this Period

44.76

☐ Memo Item

P/R Deduction (\$22.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

140.40

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Daniel R Azrin

Mailing Address 157 Berkeley St

City	State	Zip Code
Boston	MA	02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463354818250

Amount of Each Receipt this Period

36.38

☐ Memo Item

P/R Deduction (\$18.19 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. John M DickeyMailing Address 1340 Treat Blvd
Ste 400

City	State	Zip Code
Walnut Creek	CA	94597-7591

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463357318250

Amount of Each Receipt this Period

35.62

☐ Memo Item

P/R Deduction (\$17.81 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Deborah L Michel

Mailing Address 27201 Bella Vista Pkwy

City	State	Zip Code
Warrenville	IL	60555-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Gen'l Mgr, Nat'l Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1024.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463357518250

Amount of Each Receipt this Period

158.08

☐ Memo Item

P/R Deduction (\$79.04 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

230.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Neal R Zonfrelli

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1327.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463359118250

Amount of Each Receipt this Period

207.30

☐ Memo Item

P/R Deduction (\$103.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Erin Rodliff

Mailing Address 10 St James Ave

City State Zip Code
 Boston MA 02116-3813

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Product & UW Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1387.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463359918250

Amount of Each Receipt this Period

218.46

☐ Memo Item

P/R Deduction (\$109.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Jay Millstone

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director, Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463360718250

Amount of Each Receipt this Period

53.90

☐ Memo Item

P/R Deduction (\$26.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

479.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Anne P King

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

LMS Senior Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.88

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463361718250

Amount of Each Receipt this Period

63.10

☐ Memo Item

P/R Deduction (\$31.55 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Jack D Armstrong

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Regulatory Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.19

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463362918250

Amount of Each Receipt this Period

143.38

☐ Memo Item

P/R Deduction (\$71.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Kathleen G Bissell

Mailing Address 71 Stevenson St
Ste 700

City

San Francisco

State

CA

Zip Code

94105-2984

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.46

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463363318250

Amount of Each Receipt this Period

56.72

☐ Memo Item

P/R Deduction (\$28.36 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

263.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Kathleen E McGrath

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Corporate Counsel, HO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.37

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463364218250

Amount of Each Receipt this Period

37.12

☐ Memo Item

P/R Deduction (\$18.56 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Victor C. Saratella

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

455.95

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463367018250

Amount of Each Receipt this Period

71.04

☐ Memo Item

P/R Deduction (\$35.52 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Alison M McCormack

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Strategy & Insights, CRE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

474.86

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463368518250

Amount of Each Receipt this Period

75.82

☐ Memo Item

P/R Deduction (\$37.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

183.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Matthew T Hayden

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Actuary

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.47

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463369018250

Amount of Each Receipt this Period

85.84

☐ Memo Item

P/R Deduction (\$42.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Thomas E April

Mailing Address 100 Liberty Way

City

Dover

State

NH

Zip Code

03820-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager-Special Projects, STP

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

243.27

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463369218250

Amount of Each Receipt this Period

37.48

☐ Memo Item

P/R Deduction (\$18.74 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Beth C Kreidenweis

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Real Estate Delivery

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

910.76

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463369718250

Amount of Each Receipt this Period

143.38

☐ Memo Item

P/R Deduction (\$71.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

266.70

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Thomas R Walker

Mailing Address 9130 S Dadeland Blvd

Ste 1705 Two Datan Center

City

Miami

State

FL

Zip Code

33156-7818

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Chief of Staff

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

344.44

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463369918250

Amount of Each Receipt this Period

54.24

☐ Memo Item

P/R Deduction (\$27.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Stephen R Myers

Mailing Address 175 Running Hill Rd

Ste 1A

City

South Portland

State

ME

Zip Code

04106-3220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

417.39

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463370918250

Amount of Each Receipt this Period

64.86

☐ Memo Item

P/R Deduction (\$32.43 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Daniel G Ferrari

Mailing Address 14123 Denver W Parkway

City

Lakewood

State

CO

Zip Code

80401-3116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional General Manager II

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

996.47

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463372118250

Amount of Each Receipt this Period

156.62

☐ Memo Item

P/R Deduction (\$78.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

275.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Charles H Burhan

Mailing Address 2815 Forbs Ave
Ste 200

City State Zip Code
Hoffman Estates IL 60192-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463372818250

Amount of Each Receipt this Period

42.00

☐ Memo Item

P/R Deduction (\$21.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Gary J Waggoner

Mailing Address 701A Rte 73 S
Ste 201

City State Zip Code
Marlton NJ 08053-9637

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463375518250

Amount of Each Receipt this Period

65.66

☐ Memo Item

P/R Deduction (\$32.83 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. William M Finn

Mailing Address 10 St James Ave

City State Zip Code
Boston MA 02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

SBU Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1207.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463375718250

Amount of Each Receipt this Period

189.10

☐ Memo Item

P/R Deduction (\$94.55 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

296.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Michael D Weaver

Mailing Address 350 E 96th St

City

Indianapolis

State

IN

Zip Code

46240-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, App Portfolio & Soft Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.93

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463376418250

Amount of Each Receipt this Period

58.66

☐ Memo Item

P/R Deduction (\$29.33 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Henry J Rauch

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

726.63

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463376618250

Amount of Each Receipt this Period

113.20

☐ Memo Item

P/R Deduction (\$56.60 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Brian Levy

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Strategy & Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1383.14

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463377318250

Amount of Each Receipt this Period

220.00

☐ Memo Item

P/R Deduction (\$110.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

391.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. John M Watkins

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager Complex Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.57

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463380918250

Amount of Each Receipt this Period

85.54

☐ Memo Item

P/R Deduction (\$42.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James Warren Luce

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

CUO, Commercial Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.67

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463381118250

Amount of Each Receipt this Period

78.76

☐ Memo Item

P/R Deduction (\$39.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Joshua Charles Raymond

Mailing Address 100 International Dr
Ste 200

City
Portsmouth

State
NH

Zip Code
03801-6881

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Financial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.57

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463382318250

Amount of Each Receipt this Period

133.84

☐ Memo Item

P/R Deduction (\$66.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

298.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Michael Grove

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463382818250

Amount of Each Receipt this Period

102.04

☐ Memo Item

P/R Deduction (\$56.73 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James D Purvis

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Marketing Strategy & Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463383018250

Amount of Each Receipt this Period

101.46

☐ Memo Item

P/R Deduction (\$50.73 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Norman R BeeseMailing Address 2530 Sever Rd
Ste 200

City State Zip Code
Lawrenceville GA 30043-4024

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director, NI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463383218250

Amount of Each Receipt this Period

31.70

☐ Memo Item

P/R Deduction (\$15.85 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

235.20

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Timothy M Jackson

Mailing Address 2400 Lakeside Blvd
Ste 400

City State Zip Code
Richardson TX 75082-4341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Territory Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463383918250

Amount of Each Receipt this Period

34.04

☐ Memo Item

P/R Deduction (\$17.02 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Josephine M Waldman

Mailing Address 450 Plymouth Rd
Ste 400 Interchange Corp Center

City State Zip Code
Plymouth Meeting PA 19462-1644

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463385718250

Amount of Each Receipt this Period

40.18

☐ Memo Item

P/R Deduction (\$20.09 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Robbie J Meitler

Mailing Address 10 St James Ave

City State Zip Code
Boston MA 02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Business Info Sec Cnslt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463386118250

Amount of Each Receipt this Period

38.44

☐ Memo Item

P/R Deduction (\$19.22 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

112.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Donald F Baldini

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Public Aff Off & Sr Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463386218250

Amount of Each Receipt this Period

43.24

☐ Memo Item

P/R Deduction (\$21.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Matt L Warye

Mailing Address 9450 Seward Rd

City
Fairfield

State
OH

Zip Code
45014-5412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional General Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.26

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463388918250

Amount of Each Receipt this Period

52.66

☐ Memo Item

P/R Deduction (\$26.33 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Hieng Chang

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director, Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.93

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463389418250

Amount of Each Receipt this Period

52.92

☐ Memo Item

P/R Deduction (\$26.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

148.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. James P McKenney

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

509.71

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463389518250

Amount of Each Receipt this Period

79.16

☐ Memo Item

P/R Deduction (\$39.58 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michael L Peak

Mailing Address 9450 Seward Rd

City
Fairfield

State
OH

Zip Code
45014-5412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Technical Consultant I, RC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.99

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463390318250

Amount of Each Receipt this Period

35.62

☐ Memo Item

P/R Deduction (\$17.81 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mark Moccia

Mailing Address 150 Liberty Way

City
Dover

State
NH

Zip Code
03820-9320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director, IT Mkt Apps

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.72

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463391918250

Amount of Each Receipt this Period

34.76

☐ Memo Item

P/R Deduction (\$17.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

149.54

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Adam J Miarka

Mailing Address 350 E 96th St

City
Indianapolis

State
IN

Zip Code
46240-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Princ Software/Sys Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.03

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463392718250

Amount of Each Receipt this Period

41.32

☐ Memo Item

P/R Deduction (\$20.66 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Helen E O'Rourke

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1401.50

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463392818250

Amount of Each Receipt this Period

218.76

☐ Memo Item

P/R Deduction (\$109.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Patricia L. Pelletier

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1613.84

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463393518250

Amount of Each Receipt this Period

250.76

☐ Memo Item

P/R Deduction (\$125.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

510.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Michael J Dirusso

Mailing Address 62 Maple Ave

City State Zip Code
 Keene NH 03431-1625

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Liberty Mutual Sr Corporate Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463396218250

Amount of Each Receipt this Period

34.52

☐ Memo Item

P/R Deduction (\$17.26 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michael C Brewer

Mailing Address 5975 S Quebec St
 Ste 300

City State Zip Code
 Centennial CO 80111-4566

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Liberty Mutual Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463397318250

Amount of Each Receipt this Period

52.28

☐ Memo Item

P/R Deduction (\$26.14 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Loralie Thostenson

Mailing Address 225 Borthwick Ave

City State Zip Code
 Portsmouth NH 03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Liberty Mutual Manager, IT HR & Admin Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463398918250

Amount of Each Receipt this Period

37.70

☐ Memo Item

P/R Deduction (\$18.85 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

124.50

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Bhasker Natarajan

Mailing Address 10 St James Ave

City

Boston

State

MA

Zip Code

02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

COO, Global Consumer Mkts East

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2080.96

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463401818250

Amount of Each Receipt this Period

327.60

☐ Memo Item

P/R Deduction (\$163.80 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Alison B. Erbig

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

SVP & Comptroller, Corp Fin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1746.15

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463402218250

Amount of Each Receipt this Period

276.92

☐ Memo Item

P/R Deduction (\$138.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Christopher Capone

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Gen Mgr, PLD Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.33

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463403918250

Amount of Each Receipt this Period

110.46

☐ Memo Item

P/R Deduction (\$55.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

714.98

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Joseph B LeskoMailing Address 6230 Old Dobbin Lane
Ste 200

City	State	Zip Code
Columbia	MD	21045-5884

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager II, P/L Agency Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463404318250

Amount of Each Receipt this Period

38.76

☐ Memo Item

P/R Deduction (\$19.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Luciano Suzuki

Mailing Address 175 Berkeley St

City	State	Zip Code
Boston	MA	02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

COO, Asia Pacific

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1541.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463405518250

Amount of Each Receipt this Period

237.12

☐ Memo Item

P/R Deduction (\$53.44 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Robert Keith Dixon

Mailing Address 175 Berkeley St

City	State	Zip Code
Boston	MA	02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Assumed Reinsurance Und Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463406918250

Amount of Each Receipt this Period

104.76

☐ Memo Item

P/R Deduction (\$52.38 Bi-Weekly)

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

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

380.64

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Kathleen F. Noren

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463407018250

Amount of Each Receipt this Period

66.76

☐ Memo Item

P/R Deduction (\$33.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Lawrence G. Cheesman

Mailing Address 2 Bridgewater Rd
Ste 201

City

Farmington

State

CT

Zip Code

06032-2269

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Dir II, State Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463411618250

Amount of Each Receipt this Period

69.84

☐ Memo Item

P/R Deduction (\$34.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Thomas Rees

Mailing Address 450 Plymouth Rd
Ste 400 Interchange Corp Center

City

Plymouth Meeting

State

PA

Zip Code

19462-1644

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Contract UW Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463413018250

Amount of Each Receipt this Period

63.36

☐ Memo Item

P/R Deduction (\$34.14 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

199.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. William Gaines

Mailing Address 2100 W Walnut Hill Lane
Ste 100

City State Zip Code
Irving TX 75038-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

National Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463413418250

Amount of Each Receipt this Period

75.04

☐ Memo Item

P/R Deduction (\$37.52 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Timothy G. Daily

Mailing Address 7901 NW 112th St

City State Zip Code
Kansas City MO 64153-1195

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Operations Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.31

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463413618250

Amount of Each Receipt this Period

36.22

☐ Memo Item

P/R Deduction (\$18.11 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Andrew S Morgan

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Claims Practices

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

906.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463415518250

Amount of Each Receipt this Period

140.92

☐ Memo Item

P/R Deduction (\$70.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

252.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Robert M O'Neil

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.90

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463415618250

Amount of Each Receipt this Period

85.24

☐ Memo Item

P/R Deduction (\$42.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Trinidad Flores

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr Shared Service Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1154.28

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463415718250

Amount of Each Receipt this Period

179.24

☐ Memo Item

P/R Deduction (\$89.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Robert J Thomas

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director, Broker Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.23

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463416118250

Amount of Each Receipt this Period

61.54

☐ Memo Item

P/R Deduction (\$30.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

326.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Deana Lauria

Mailing Address 150 Liberty Way

City
Dover

State
NH

Zip Code
03820-9320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Dir App Port & SW Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.61

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463416318250

Amount of Each Receipt this Period

48.23

☐ Memo Item

P/R Deduction (\$16.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Tyree Wayne Harris

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Product Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463422818250

Amount of Each Receipt this Period

335.87

☐ Memo Item

P/R Deduction (\$335.87 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Marilyn Anaya

Mailing Address 55 Water St
23rd Flr

City
New York

State
NY

Zip Code
10041-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Accounting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.96

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463423418250

Amount of Each Receipt this Period

33.58

☐ Memo Item

P/R Deduction (\$16.79 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

417.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Edmund C. Kenealy

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1817.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463423618250

Amount of Each Receipt this Period

311.96

☐ Memo Item

P/R Deduction (\$157.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Sheila Finnerty

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Executive Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1979.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463424418250

Amount of Each Receipt this Period

305.38

☐ Memo Item

P/R Deduction (\$152.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Margaret Cronin Wilson

Mailing Address 100 Liberty Way

City State Zip Code
 Dover NH 03820-4597

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Tech Claims Specialist II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463424818250

Amount of Each Receipt this Period

41.28

☐ Memo Item

P/R Deduction (\$20.64 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

658.62

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Richard E Meuret

Mailing Address 2400 Lakeside Blvd
Ste 400

City State Zip Code
Richardson TX 75082-4341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Reg'l Pres, Business Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.97

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463425018250

Amount of Each Receipt this Period

91.44

☐ Memo Item

P/R Deduction (\$45.72 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. George John Perrotta

Mailing Address 55 Water St
23rd Flr

City State Zip Code
New York NY 10041-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.28

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463425218250

Amount of Each Receipt this Period

40.62

☐ Memo Item

P/R Deduction (\$20.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Amit Khanna

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Strategic Prog-PI Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.96

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463426318250

Amount of Each Receipt this Period

60.34

☐ Memo Item

P/R Deduction (\$30.17 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

192.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Michele Leigh Streton

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Claims Field Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1362.53

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463428018250

Amount of Each Receipt this Period

209.62

☐ Memo Item

P/R Deduction (\$62.88 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Robert A Howard

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

711.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463428618250

Amount of Each Receipt this Period

109.80

☐ Memo Item

P/R Deduction (\$54.90 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Jeffrey Brian Duncan

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

CUO, Custom Risk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463429818250

Amount of Each Receipt this Period

40.72

☐ Memo Item

P/R Deduction (\$24.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

360.14

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Phillip Andrew Pincus

Mailing Address 4000 Legato Rd

Ste 500 Center Pointe II

City

Fairfax

State

VA

Zip Code

22033-2892

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Branch Manager, PM

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.75

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463431918250

Amount of Each Receipt this Period

33.68

☐ Memo Item

P/R Deduction (\$16.84 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Daniel Yang

Mailing Address 10 St James Ave

City

Boston

State

MA

Zip Code

02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director-Special Projects, MGR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.75

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463432018250

Amount of Each Receipt this Period

43.38

☐ Memo Item

P/R Deduction (\$21.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Roxanne E. Martinez

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Talent Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1886.51

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463432318250

Amount of Each Receipt this Period

292.30

☐ Memo Item

P/R Deduction (\$146.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

369.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Stephen J DuPont

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

849.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463432518250

Amount of Each Receipt this Period

132.50

☐ Memo Item

P/R Deduction (\$66.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Laura M Gaiero

Mailing Address 10 St James Ave

City State Zip Code
 Boston MA 02116-3813

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

LMS Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463433018250

Amount of Each Receipt this Period

53.36

☐ Memo Item

P/R Deduction (\$26.68 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Russell Murphy

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr Corp Risk Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463433118250

Amount of Each Receipt this Period

70.76

☐ Memo Item

P/R Deduction (\$35.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

256.62

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mark W Cressey

Mailing Address 225 Borthwick Ave

City State Zip Code
Portsmouth NH 03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

General Manager Infrastructure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1898.09

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463433918250

Amount of Each Receipt this Period

296.16

☐ Memo Item

P/R Deduction (\$148.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Francis John Hyatt

Mailing Address 175 Berkeley St

City State Zip Code
Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Enterprise Talent&HR Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2184.56

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463434018250

Amount of Each Receipt this Period

342.30

☐ Memo Item

P/R Deduction (\$171.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Jonathon Jay Grayson

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Mgr, Customer Loyalty Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

997.68

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463434318250

Amount of Each Receipt this Period

156.30

☐ Memo Item

P/R Deduction (\$78.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

794.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Frank W Robinson

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

CFO, Global Specialty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.76

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463434518250

Amount of Each Receipt this Period

326.92

☐ Memo Item

P/R Deduction (\$163.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Matthew D Nickerson

Mailing Address 1001 4th Ave

FIs 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

President, Safeco Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.32

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463434818250

Amount of Each Receipt this Period

77.70

☐ Memo Item

P/R Deduction (\$38.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Gregory A Lazar

Mailing Address 100 Liberty Way

City

Dover

State

NH

Zip Code

03820-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, PM Life Sales Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.79

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463435018250

Amount of Each Receipt this Period

35.98

☐ Memo Item

P/R Deduction (\$17.99 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

440.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Patricia Ryan

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director, PMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

379.99

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463436018250

Amount of Each Receipt this Period

58.46

☐ Memo Item

P/R Deduction (\$29.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. David P Blessing

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

CUO, Commercial Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.83

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463436118250

Amount of Each Receipt this Period

114.26

☐ Memo Item

P/R Deduction (\$57.13 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. David M Falvo

Mailing Address 225 Borthwick Ave

City
Portsmouth

State
NH

Zip Code
03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director, Hosting Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.71

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463436218250

Amount of Each Receipt this Period

65.46

☐ Memo Item

P/R Deduction (\$32.73 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

238.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Michele V McCormick

Mailing Address 10 St James Ave

City
Boston

State
MA

Zip Code
02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Grp Disability Claims Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

924.17

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463437318250

Amount of Each Receipt this Period

142.18

☐ Memo Item

P/R Deduction (\$71.09 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James C McLaughlin

Mailing Address 360 Interstate North Parkway
Suite 375

City
Atlanta

State
GA

Zip Code
30339-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Resident Attorney II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.83

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463438818250

Amount of Each Receipt this Period

40.06

☐ Memo Item

P/R Deduction (\$20.03 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. J Eric Brosius

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Corporate Actuary & Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463438918250

Amount of Each Receipt this Period

769.18

☐ Memo Item

P/R Deduction (\$384.56 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

951.42

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Teresa Schell

Mailing Address 5975 S Quebec St
Ste 300

City State Zip Code
Centennial CO 80111-4566

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional UW Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463439318250

Amount of Each Receipt this Period

54.64

☐ Memo Item

P/R Deduction (\$27.32 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Tracy A Ryan

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Claims Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463442818250

Amount of Each Receipt this Period

733.78

☐ Memo Item

P/R Deduction (\$340.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Pamela S Heenan

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

742.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463443518250

Amount of Each Receipt this Period

115.08

☐ Memo Item

P/R Deduction (\$57.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

903.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Steven J Butler

Mailing Address 10 St James Ave

City State Zip Code
 Boston MA 02116-3813

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, App Portfolio & Soft Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463443818250

Amount of Each Receipt this Period

59.50

☐ Memo Item

P/R Deduction (\$29.75 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Gary J Ostrow

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director-Corporate Taxation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1193.31

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463444818250

Amount of Each Receipt this Period

184.62

☐ Memo Item

P/R Deduction (\$92.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ian J McNeilMailing Address 600 Wilshire Boulevard
Suite 1200

City State Zip Code
 Los Angeles CA 90017-3200

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional General Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR463445118250

Amount of Each Receipt this Period

31.06

☐ Memo Item

P/R Deduction (\$31.06 Bi-Weekly)

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

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

275.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Shawn M Mulvay

Mailing Address 2501 Wilmington Rd

City

New Castle

State

PA

Zip Code

16105-1613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Assistant Claims Product Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.26

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463445318250

Amount of Each Receipt this Period

46.68

☐ Memo Item

P/R Deduction (\$23.34 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. David R Dworz

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Distribution Strategy&Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.28

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463446618250

Amount of Each Receipt this Period

131.84

☐ Memo Item

P/R Deduction (\$65.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Robert G Brisee

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager-Accounts Svc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

677.04

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463446818250

Amount of Each Receipt this Period

104.16

☐ Memo Item

P/R Deduction (\$52.08 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

282.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Robert M Rooney

Mailing Address 62 Maple Ave

City State Zip Code
 Keene NH 03431-1625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.53

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463447518250

Amount of Each Receipt this Period

34.38

☐ Memo Item

P/R Deduction (\$17.19 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Robert J Maloney

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Manager, Sales & Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.45

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463450118250

Amount of Each Receipt this Period

111.92

☐ Memo Item

P/R Deduction (\$55.96 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Thais S.E. Kirschner

Mailing Address 1221 Brickell Ave
 Ste 820

City State Zip Code
 Miami FL 33131-3260

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Field Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1387.67

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463450718250

Amount of Each Receipt this Period

215.76

☐ Memo Item

P/R Deduction (\$107.88 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

362.06

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Edward J Gramer

Mailing Address 10 St James Ave

City

Boston

State

MA

Zip Code

02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Global Best Prac & Innov

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3630.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463450818250

Amount of Each Receipt this Period

561.70

☐ Memo Item

P/R Deduction (\$112.34 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Li-Chuan L. Chou

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463452318250

Amount of Each Receipt this Period

60.16

☐ Memo Item

P/R Deduction (\$30.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. John S Murphy

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Design & Construction

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463453018250

Amount of Each Receipt this Period

63.70

☐ Memo Item

P/R Deduction (\$31.85 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

685.56

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 107 OF 182
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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Russell Carlson

Mailing Address 175 Berkeley St

City	State	Zip Code
Boston	MA	02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463453418250

Amount of Each Receipt this Period

35.88

☐ Memo Item

P/R Deduction (\$17.94 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Jeffrey Alan Wright

Mailing Address 157 Berkeley St

City	State	Zip Code
Boston	MA	02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Dir II, Telematics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463453718250

Amount of Each Receipt this Period

64.62

☐ Memo Item

P/R Deduction (\$32.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Janelle Maria Brown Edem

Mailing Address 157 Berkeley St

City	State	Zip Code
Boston	MA	02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

GM - UPS Dedicated Unit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR463453918250

Amount of Each Receipt this Period

31.62

☐ Memo Item

P/R Deduction (\$15.81 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

132.12

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Anthony J Rotondi Jr.

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Segment Manager II (STP)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.74

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463454118250

Amount of Each Receipt this Period

45.96

☐ Memo Item

P/R Deduction (\$22.98 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Linsey Bibler

Mailing Address 9450 Seward Rd

City

Fairfield

State

OH

Zip Code

45014-5412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

CI Territory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.15

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463456118250

Amount of Each Receipt this Period

33.00

☐ Memo Item

P/R Deduction (\$16.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Caroline C Santangelo

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Insights & Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.22

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463456218250

Amount of Each Receipt this Period

129.48

☐ Memo Item

P/R Deduction (\$64.74 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

208.44

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Peter Sullivan

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Executive Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.62

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463457018250

Amount of Each Receipt this Period

101.54

☐ Memo Item

P/R Deduction (\$50.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. James B Quade

Mailing Address 477 S 3rd St
Ste 148

City
Geneva

State
IL

Zip Code
60134-2731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Area Manager, PM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.95

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463458218250

Amount of Each Receipt this Period

54.30

☐ Memo Item

P/R Deduction (\$27.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Karen Victoria Morton Grooms

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1809.64

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463459018250

Amount of Each Receipt this Period

284.62

☐ Memo Item

P/R Deduction (\$142.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

440.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Joanne S Bragg

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Workplace Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.99

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463460018250

Amount of Each Receipt this Period

63.77

☐ Memo Item

P/R Deduction (\$31.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Stephen D Hylka

Mailing Address 27201 Bella Vista Pkwy
Ste 400

City

Warrenville

State

IL

Zip Code

60555-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Dir II, State Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.23

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463461318250

Amount of Each Receipt this Period

59.30

☐ Memo Item

P/R Deduction (\$29.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Sergio Cartagena

Mailing Address 2055 Sugarloaf Circle

City

Duluth

State

GA

Zip Code

30097-4363

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.84

Date of Receipt

06 / 30 / 2016

Transaction ID : PR463461718250

Amount of Each Receipt this Period

35.88

☐ Memo Item

P/R Deduction (\$17.94 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

158.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Glenn S Pransky

Mailing Address 71 Frankland Rd

City State Zip Code
 Hopkinton MA 01748-1231

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Center Director II, Rsch Inst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463463218250

Amount of Each Receipt this Period

33.30

☐ Memo Item

P/R Deduction (\$16.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Melissa A. Dunn

Mailing Address 27201 Bella Vista Pkwy

City State Zip Code
 Warrenville IL 60555-1619

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director, NI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463463518250

Amount of Each Receipt this Period

43.98

☐ Memo Item

P/R Deduction (\$21.99 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Elena Raffensperger

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR463466418250

Amount of Each Receipt this Period

89.54

☐ Memo Item

P/R Deduction (\$44.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

166.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. John A Mileski

Mailing Address 1001 4th Ave

Fls 8-18 27-31 & 41

City

Seattle

State

WA

Zip Code

98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr Safeco Field Distribution

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1693.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463466918250

Amount of Each Receipt this Period

261.54

☐ Memo Item

P/R Deduction (\$130.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Charisse Howse

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Human Resources

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

343.19

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR463467218250

Amount of Each Receipt this Period

53.38

☐ Memo Item

P/R Deduction (\$26.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Teodora R Abbatine

Mailing Address 71 Frankland Rd

City

Hopkinton

State

MA

Zip Code

01748-1231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director Knowledge Translation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

320.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR464484918250

Amount of Each Receipt this Period

49.84

☐ Memo Item

P/R Deduction (\$24.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

364.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Cameron Finch

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr,Ops Strat & Implementation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

721.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR464592718250

Amount of Each Receipt this Period

121.24

☐ Memo Item

P/R Deduction (\$60.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Hector D BousoMailing Address 2815 Forbs Ave
Ste 200

City State Zip Code
 Hoffman Estates IL 60192-3702

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Comm'l UW Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR464646418250

Amount of Each Receipt this Period

51.34

☐ Memo Item

P/R Deduction (\$25.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Carl L PursianoMailing Address 55 Water St
23rd Flr

City State Zip Code
 New York NY 10041-0024

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Head of Specialty Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.38

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : PR464656218250

Amount of Each Receipt this Period

38.16

☐ Memo Item

P/R Deduction (\$19.08 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

210.74

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Stephanie Neyenhouse

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Actuary

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

240.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR464665318250

Amount of Each Receipt this Period

37.54

☐ Memo Item

P/R Deduction (\$18.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Brian A Monteiro

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director, Public Affairs, I

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

262.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR465390618250

Amount of Each Receipt this Period

27.98

☐ Memo Item

P/R Deduction (\$6.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Janet Clay

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

711.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR465392718250

Amount of Each Receipt this Period

110.00

☐ Memo Item

P/R Deduction (\$55.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

175.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Joel LePard

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

538.32

Date of Receipt

06 / 30 / 2016

Transaction ID : PR465395718250

Amount of Each Receipt this Period

84.62

☐ Memo Item

P/R Deduction (\$42.31 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michael Joseph Markett

Mailing Address 55 Water St
23rd Flr

City

New York

State

NY

Zip Code

10041-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Assistant General Counsel, HO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1387.17

Date of Receipt

06 / 30 / 2016

Transaction ID : PR465446118250

Amount of Each Receipt this Period

216.16

☐ Memo Item

P/R Deduction (\$108.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Chad Davis

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director II, Product Mgt

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

853.31

Date of Receipt

06 / 30 / 2016

Transaction ID : PR465563718250

Amount of Each Receipt this Period

134.10

☐ Memo Item

P/R Deduction (\$67.05 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

434.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Joseph Mattaini

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, eBusiness

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR465688218250

Amount of Each Receipt this Period

60.00

☐ Memo Item

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. John Sheldon Peters

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Gen'l Mgr, Comm'l Operations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1114.53

Date of Receipt

06 / 30 / 2016

Transaction ID : PR465706218250

Amount of Each Receipt this Period

172.50

☐ Memo Item

P/R Deduction (\$86.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Jamie Trish

Mailing Address One Battery Park Plaza
30th Fl

City

New York

State

NY

Zip Code

10004-1437

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Reg'l Pres, Business Insurance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1364.81

Date of Receipt

06 / 30 / 2016

Transaction ID : PR465739118250

Amount of Each Receipt this Period

212.62

☐ Memo Item

P/R Deduction (\$106.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

445.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Lucas J Bills

Mailing Address 5975 S Quebec St
Ste 300

City State Zip Code
Centennial CO 80111-4566

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Reg'l Pres, Business Insurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR465862818250

Amount of Each Receipt this Period

114.06

☐ Memo Item

P/R Deduction (\$57.03 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Christopher DePuy

Mailing Address 55 Water St
23rd Flr

City State Zip Code
New York NY 10041-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Underwriting Exec I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR465894018250

Amount of Each Receipt this Period

119.32

☐ Memo Item

P/R Deduction (\$59.66 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Benedikt R Sander

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1291.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR466164218250

Amount of Each Receipt this Period

201.16

☐ Memo Item

P/R Deduction (\$100.58 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

434.54

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Marc B Orloff

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Division General Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR466378518250

Amount of Each Receipt this Period

100.76

☐ Memo Item

P/R Deduction (\$50.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Harish Maruvada

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir II, Advanced Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.41

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR466397118250

Amount of Each Receipt this Period

93.54

☐ Memo Item

P/R Deduction (\$23.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Brendan Smyth

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Product Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.23

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR466439318250

Amount of Each Receipt this Period

150.76

☐ Memo Item

P/R Deduction (\$75.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

345.06

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Thomas A Greene

Mailing Address 600 Summer St
Ste 601

City State Zip Code
Stamford CT 06901-4404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Assumed Reinsurance Und Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

597.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR466448418250

Amount of Each Receipt this Period

92.30

☐ Memo Item

P/R Deduction (\$46.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Curtis W Grove

Mailing Address 8700 Indian Creek Pkwy
Ste 350 Bldg 3 Corporate Woods

City State Zip Code
Overland Park KS 66210-1563

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Contract UW Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR466520118250

Amount of Each Receipt this Period

87.00

☐ Memo Item

P/R Deduction (\$44.73 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Shawn Tubman

Mailing Address 175 Berkeley St

City State Zip Code
Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Campus Recruiting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR466558918250

Amount of Each Receipt this Period

31.64

☐ Memo Item

P/R Deduction (\$15.82 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

210.94

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mark C Morneau

Mailing Address 111 Presidential Blvd
Ste 127

City State Zip Code
Bala Cynwyd PA 19004-1011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Division Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

998.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : PR466893018250

Amount of Each Receipt this Period

156.76

☐ Memo Item

P/R Deduction (\$78.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Debra Basaraba

Mailing Address 100 Liberty Way

City State Zip Code
Dover NH 03820-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, LMB Sales Ops & Insights

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : PR466910318250

Amount of Each Receipt this Period

88.46

☐ Memo Item

P/R Deduction (\$44.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Trevor A Howard

Mailing Address 55 Water St
23rd Flr

City State Zip Code
New York NY 10041-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Underwriting Exec II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2016

Transaction ID : PR467038118250

Amount of Each Receipt this Period

135.58

☐ Memo Item

P/R Deduction (\$67.79 Bi-Weekly)

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

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

380.80

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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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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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Michael Prestileo

Mailing Address 10 St James Ave

City
BostonState
MAZip Code
02116-3813FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director, LMB Ideas

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

802.09

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR467048618250

Amount of Each Receipt this Period

126.64

☐ Memo Item

P/R Deduction (\$63.32 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Bradley McCreedy

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Mng Dir II, Partnerships

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR467098018250

Amount of Each Receipt this Period

35.04

☐ Memo Item

P/R Deduction (\$17.52 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Richard Carl NiehausMailing Address 55 Water St
23rd FlrCity
New YorkState
NYZip Code
10041-0024FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Underwriting Exec II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR467117418250

Amount of Each Receipt this Period

51.54

☐ Memo Item

P/R Deduction (\$25.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

213.22

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Andrew J Marsh

Mailing Address 100 International Dr
Ste 100

City Portsmouth State NH Zip Code 03801-6881

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director, IT Mkt Apps

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR467119818250

Amount of Each Receipt this Period

170.74

☐ Memo Item

P/R Deduction (\$85.37 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ernesto Schirmacher

Mailing Address 10 St James Ave

City Boston State MA Zip Code 02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Managing Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR467129918250

Amount of Each Receipt this Period

131.64

☐ Memo Item

P/R Deduction (\$65.82 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michael T. Finnegan

Mailing Address 55 Water St
23rd Flr

City New York State NY Zip Code 10041-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Head of US Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2187.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR467138218250

Amount of Each Receipt this Period

343.16

☐ Memo Item

P/R Deduction (\$171.58 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

645.54

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Ronald David Hall

Mailing Address 14000 Quail Springs Parkway
Ste 310

City State Zip Code
Oklahoma City OK 73134-2632

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Manager, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.40

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467151918250

Amount of Each Receipt this Period

78.06

☐ Memo Item

P/R Deduction (\$39.03 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michelle Lee Wertz

Mailing Address 100 Liberty Way

City State Zip Code
Dover NH 03820-4597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, LMB Integration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1118.48

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467294018250

Amount of Each Receipt this Period

175.38

☐ Memo Item

P/R Deduction (\$87.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Catherine E. Stevenson

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Finl Plan & Analysis, GCM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

856.61

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467294818250

Amount of Each Receipt this Period

153.84

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

407.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Paul Ivanovskis

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Actuary, GCM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1786.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR467354118250

Amount of Each Receipt this Period

307.70

☐ Memo Item

P/R Deduction (\$153.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Prashant Jain

Mailing Address 175 Berkeley St

City State Zip Code
Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

General Mgr, Strat & Bus Dvlpt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR467355118250

Amount of Each Receipt this Period

90.76

☐ Memo Item

P/R Deduction (\$45.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Wesley Therese Hyatt

Mailing Address 157 Berkeley St

City State Zip Code
Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr Claims Strategy&Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR467388118250

Amount of Each Receipt this Period

54.24

☐ Memo Item

P/R Deduction (\$27.12 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

452.70

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

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Elizabeth J Morahan

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1737.68

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467415318250

Amount of Each Receipt this Period

272.30

☐ Memo Item

P/R Deduction (\$136.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Steven Robert Chauby

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Direct Response Centers

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1380.76

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467423518250

Amount of Each Receipt this Period

223.08

☐ Memo Item

P/R Deduction (\$111.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Brendan Monaghan

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Talent Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

796.98

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467479818250

Amount of Each Receipt this Period

125.10

☐ Memo Item

P/R Deduction (\$62.55 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

620.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Charles Dal Corobbo

Mailing Address 10 St James Ave

City

Boston

State

MA

Zip Code

02116-3813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Actuarial&Analytics, CERC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.19

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467532018250

Amount of Each Receipt this Period

213.84

☐ Memo Item

P/R Deduction (\$106.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Randall Poole

Mailing Address Suite 600
255 Primera Blvd

City

Lake Mary

State

FL

Zip Code

32746-2182

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Property CAT Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1035.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467553918250

Amount of Each Receipt this Period

159.24

☐ Memo Item

P/R Deduction (\$79.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Cara W Hadley

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.77

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467676918250

Amount of Each Receipt this Period

120.24

☐ Memo Item

P/R Deduction (\$60.12 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

493.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Andrew C. Palmer

Mailing Address 10 St James Ave

City
BostonState
MAZip Code
02116-3813FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Director, IT Mkt Apps

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR467683118250

Amount of Each Receipt this Period

148.92

☐ Memo Item

P/R Deduction (\$74.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Valencia R Augusta

Mailing Address 225 Borthwick Ave

City
PortsmouthState
NHZip Code
03801-4152FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR467724818250

Amount of Each Receipt this Period

34.16

☐ Memo Item

P/R Deduction (\$17.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Kevin Hansberry

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Fin'l Planning & Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR467727418250

Amount of Each Receipt this Period

125.84

☐ Memo Item

P/R Deduction (\$62.92 Bi-Weekly)

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

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

308.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Jesse A Antosiewicz

Mailing Address 225 Borthwick Ave

City

Portsmouth

State

NH

Zip Code

03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Dir, Infr & App Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.96

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467832618250

Amount of Each Receipt this Period

71.84

☐ Memo Item

P/R Deduction (\$35.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Michael B. Dworman

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director III, Taxation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

812.02

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467873618250

Amount of Each Receipt this Period

127.08

☐ Memo Item

P/R Deduction (\$63.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Michael M Emery

Mailing Address 175 Berkeley St

City

Boston

State

MA

Zip Code

02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, LMS Academy & Method

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.36

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467892818250

Amount of Each Receipt this Period

33.62

☐ Memo Item

P/R Deduction (\$16.81 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

232.54

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Sarah A Cioffi

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Director, Financial Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR467893418250

Amount of Each Receipt this Period

92.76

☐ Memo Item

P/R Deduction (\$46.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Alexander R Keeler

Mailing Address 10 St James Ave

City State Zip Code
 Boston MA 02116-3813

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Internal Audit Manager, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

909.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR467912718250

Amount of Each Receipt this Period

141.54

☐ Memo Item

P/R Deduction (\$70.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mark J. Kirby

Mailing Address 225 Borthwick Ave

City State Zip Code
 Portsmouth NH 03801-4152

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Technology Officer, IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

934.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR467932118250

Amount of Each Receipt this Period

145.38

☐ Memo Item

P/R Deduction (\$72.69 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

379.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Lori B. Andrews

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Compensation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.31

Date of Receipt

06 / 30 / 2016

Transaction ID : PR467973318250

Amount of Each Receipt this Period

45.38

☐ Memo Item

P/R Deduction (\$22.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Jessica Rogin

Mailing Address 55 Water St
23rd Flr

City
New York

State
NY

Zip Code
10041-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Chief Claims Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1434.61

Date of Receipt

06 / 30 / 2016

Transaction ID : PR468168718250

Amount of Each Receipt this Period

238.46

☐ Memo Item

P/R Deduction (\$120.19 Bi-Weekly)

Full Name (Last, First, Middle Initial)

c. Cheryl M Bendtsen

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Claims Shared Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.36

Date of Receipt

06 / 30 / 2016

Transaction ID : PR468433118250

Amount of Each Receipt this Period

36.92

☐ Memo Item

P/R Deduction (\$18.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

320.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Carolyn Louise Maier

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Sr Mgr, Customer Loyalty Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

804.77

Date of Receipt

06 / 30 / 2016

Transaction ID : PR469101818250

Amount of Each Receipt this Period

126.46

☐ Memo Item

P/R Deduction (\$63.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Andrew Prychodko

Mailing Address 2100 W Walnut Hill Lane
Ste 100

City
Irving

State
TX

Zip Code
75038-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Regional Medical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.89

Date of Receipt

06 / 30 / 2016

Transaction ID : PR480123918250

Amount of Each Receipt this Period

57.38

☐ Memo Item

P/R Deduction (\$28.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Nik Vasilakos

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Dir, Mergers & Acquisitions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1541.52

Date of Receipt

06 / 30 / 2016

Transaction ID : PR480125618250

Amount of Each Receipt this Period

244.62

☐ Memo Item

P/R Deduction (\$122.31 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

428.46

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

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(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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Emily Fink

Mailing Address 157 Berkeley St

City	State	Zip Code
Boston	MA	02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Digital & Direct Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR491697118250

Amount of Each Receipt this Period

45.24

☐ Memo Item

P/R Deduction (\$22.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Maria Van Brown

Mailing Address 175 Berkeley St

City	State	Zip Code
Boston	MA	02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Ent Chief Talent Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR508237018250

Amount of Each Receipt this Period

49.10

☐ Memo Item

P/R Deduction (\$24.55 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Anurag Bairathi

Mailing Address 157 Berkeley St

City	State	Zip Code
Boston	MA	02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Claims Field Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : PR508238418250

Amount of Each Receipt this Period

147.70

☐ Memo Item

P/R Deduction (\$85.38 Bi-Weekly)

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

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

242.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Steven Colin Dowling

Mailing Address 444 N Capitol St
Ste 740

City Washington State DC Zip Code 20001-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Federal Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1983.88

Date of Receipt

06 / 30 / 2016

Transaction ID : PR583312718250

Amount of Each Receipt this Period

307.70

☐ Memo Item

P/R Deduction (\$153.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Carmen Sharp

Mailing Address 157 Berkeley St

City Boston State MA Zip Code 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Claims Practices

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.59

Date of Receipt

06 / 30 / 2016

Transaction ID : PR587313418250

Amount of Each Receipt this Period

109.80

☐ Memo Item

P/R Deduction (\$54.90 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Sandeep K Gupta

Mailing Address 157 Berkeley St

City Boston State MA Zip Code 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Gen Mgr, Strat Partnerships

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

984.09

Date of Receipt

06 / 30 / 2016

Transaction ID : PR600982518250

Amount of Each Receipt this Period

160.00

☐ Memo Item

P/R Deduction (\$80.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

577.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Edmund Scanlon

Mailing Address 55 Water St
23rd Flr

City State Zip Code
New York NY 10041-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Managing Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR611767018250

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Viji Rangaswami

Mailing Address 444 N Capitol St
Ste 740

City State Zip Code
Washington DC 20001-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Intl Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1319.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR632003818250

Amount of Each Receipt this Period

205.00

☐ Memo Item

P/R Deduction (\$102.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Thomas E Oksanen

Mailing Address 175 Berkeley St

City State Zip Code
Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager-Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1311.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : PR672894518250

Amount of Each Receipt this Period

203.84

☐ Memo Item

P/R Deduction (\$101.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

458.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Damon Gilbert Barber

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1239.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR684588118250

Amount of Each Receipt this Period

190.76

☐ Memo Item

P/R Deduction (\$95.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Richard J Friedl

Mailing Address One Battery Park Plaza
30th Fl

City State Zip Code
 New York NY 10004-1437

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Division Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.77

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR695201118250

Amount of Each Receipt this Period

88.84

☐ Memo Item

P/R Deduction (\$44.42 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Damon Paul Hart

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2016

Transaction ID : PR727316618250

Amount of Each Receipt this Period

92.30

☐ Memo Item

P/R Deduction (\$46.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

371.90

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
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Stephen Bertolami

Mailing Address 175 Berkeley St

City State Zip Code
 Boston MA 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Manager, Procurement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1124.81

Date of Receipt

06 / 30 / 2016

Transaction ID : PR735232418250

Amount of Each Receipt this Period

194.93

☐ Memo Item

P/R Deduction (\$95.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Charles Wesley Sellers

Mailing Address 200 Galleria Parkway SE
 Ste 550

City State Zip Code
 Atlanta GA 30339-5966

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Division Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.77

Date of Receipt

06 / 30 / 2016

Transaction ID : PR739439318250

Amount of Each Receipt this Period

82.46

☐ Memo Item

P/R Deduction (\$41.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Thomas Shevlin

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1069.26

Date of Receipt

06 / 30 / 2016

Transaction ID : PR745156418250

Amount of Each Receipt this Period

166.16

☐ Memo Item

P/R Deduction (\$83.08 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

443.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Timothy Daryl Williams

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Brand & Integrated Mktg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.31

Date of Receipt

06 / 30 / 2016

Transaction ID : PR768700818250

Amount of Each Receipt this Period

75.38

☐ Memo Item

P/R Deduction (\$37.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Christopher Russell

Mailing Address 444 N Capitol St
 Ste 740

City State Zip Code
 Washington DC 20001-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Senior Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.40

Date of Receipt

06 / 30 / 2016

Transaction ID : PR792052018250

Amount of Each Receipt this Period

125.54

☐ Memo Item

P/R Deduction (\$62.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ann Tansamrit Stanberry

Mailing Address 157 Berkeley St

City State Zip Code
 Boston MA 02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Liberty Mutual

Occupation

Mgr, Finl Strat & Anlytcs, GCM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1203.06

Date of Receipt

06 / 30 / 2016

Transaction ID : PR793487618250

Amount of Each Receipt this Period

200.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

400.92

49038.37

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Crenshaw For Congress Campaign

Mailing Address 7235 Bonneval Rd
Ste 228

City State Zip Code
Jacksonville FL 32256

FEC ID number of contributing
federal political committee.

C C00352849

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

06 / 15 / 2016

Transaction ID : 8132275

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Refund

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

5000.00

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Kyrsten Sinema For Congress

Mailing Address PO Box 25879

City	State	Zip Code
Tempe	AZ	85285

Purpose of Disbursement

011

Candidate Name

Rep. Kyrsten Sinema

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: AZ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8100820

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of John McCain Inc

Mailing Address 228 S Washington Street Suite 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement

011

Candidate Name

Sen. John S. McCain

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: AZ District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101322

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Richard Burr Committee; The

Mailing Address Post Office Box 5928

City	State	Zip Code
Winston-Salem	NC	27113

Purpose of Disbursement

011

Candidate Name

Sen. Richard M. Burr

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: NC District: 2016 General

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101324

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

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

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

7500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. John Thune for Us SenateMailing Address 224 North Phillips Avenue
Suite 210City State Zip Code
Sioux Falls SD 57104Purpose of Disbursement
John Thune

Candidate Name

John Thune

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: SD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101325

Amount of Each Disbursement this Period

2500.00

☐ Memo Item
John Thune

Full Name (Last, First, Middle Initial)

B. Markey Committee; The

Mailing Address PO Box 120029

City State Zip Code
Boston MA 02112

Purpose of Disbursement

Candidate Name

Sen. Edward Markey

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101326

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Isakson for U S SenateMailing Address 6065 Roswell Road Northeast # 2274
6065 Roswell RoadCity State Zip Code
Atlanta GA 30328-4011

Purpose of Disbursement

Candidate Name

Johnny Isakson

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101389

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

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

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

7500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Blumenauer For CongressMailing Address 901 Se Oak Street
Suite 105

City Portland State OR Zip Code 97214

Purpose of Disbursement

Candidate Name

Rep. Earl Blumenauer

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101391

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Levin For Congress

Mailing Address PO Box 37

City Roseville State MI Zip Code 48066

Purpose of Disbursement

Candidate Name

Rep. Sandy M. Levin

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101392

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Randy Hultgren For Congress

Mailing Address PO Box 717

City St Charles State IL Zip Code 60174

Purpose of Disbursement

Candidate Name

Rep. Randy Hultgren

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101393

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Graves For Congress

Mailing Address PO Box 335

City	State	Zip Code
Calhoun	GA	30703

Purpose of Disbursement

011

Candidate Name

Rep. Tom Graves

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: GA District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101394

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City	State	Zip Code
Lexington	KY	40588

Purpose of Disbursement

011

Candidate Name

Rep. Andy Barr

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: KY District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101395

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kurt Schrader For Congress

Mailing Address PO Box 3314

City	State	Zip Code
Oregon City	OR	97045

Purpose of Disbursement

011

Candidate Name

Rep. Kurt Schrader

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: OR District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101396

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

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

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

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. French Hill For Arkansas

Mailing Address PO Box 7841

City	State	Zip Code
Little Rock	AR	72217

Purpose of Disbursement

011

Candidate Name

Rep. French Hill

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: AR District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101397

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens To Elect Rick Larsen

Mailing Address PO Box 326

City	State	Zip Code
Everett	WA	98206

Purpose of Disbursement

011

Candidate Name

Rep. Rick Larsen

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: WA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101398

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Larson For Congress

Mailing Address PO Box 261172

City	State	Zip Code
Hartford	CT	06126

Purpose of Disbursement

011

Candidate Name

Rep. John B. Larson

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CT District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101406

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

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

8000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Friends Of David SchweikertMailing Address 228 S Washington Street
Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Rep. David Schweikert

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101407

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Meeks for Congress

Mailing Address 153-01 Jamaica Ave. Suite 535

City Jamaica State NY Zip Code 11432

Purpose of Disbursement
Void

Candidate Name

Gregory Meeks

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101409

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Void

Full Name (Last, First, Middle Initial)

C. Pittenger For Congress Llc

Mailing Address PO Box 11207

City Charlotte State NC Zip Code 28220

Purpose of Disbursement

Candidate Name

Rep. Robert Pittenger

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101410

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Dennis Ross

Mailing Address Post Office Box 7310

City Lakeland	State FL	Zip Code 33807
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Purpose of Disbursement
Void

Candidate Name

Rep. Dennis A. Ross

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: FL	District: 15

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
------------------------	--	---

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : 8101411

Amount of Each Disbursement this Period

2000.00

☐ Memo Item
Void

Full Name (Last, First, Middle Initial)

B. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield	State MA	Zip Code 01108
---------------------	-------------	-------------------

Purpose of Disbursement

Candidate Name

Rep. Richard E. Neal

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: MA	District: 01

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
------------------------	--	---

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : 8101412

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Kuster For Congress, Inc

Mailing Address PO Box 1498

City Concord	State NH	Zip Code 03302
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Purpose of Disbursement

Candidate Name

Rep. Ann McLane Kuster

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NH	District: 02

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
------------------------	--	---

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : 8101413

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

8000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Luke Messer For Congress

Mailing Address PO Box 917

City	State	Zip Code
Shelbyville	IN	46176

Purpose of Disbursement

011

Candidate Name

Rep. Luke Messer

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101414

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Capuano For Congress Committee

Mailing Address PO Box 440305

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement

011

Candidate Name

Rep. Michael E. Capuano

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101415

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Capuano For Congress Committee

Mailing Address PO Box 440305

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement

011

Candidate Name

Rep. Michael E. Capuano

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101417

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

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

9500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Joe Kennedy For Congress

Mailing Address PO Box 590464

City Newton	State MA	Zip Code 02459
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Purpose of Disbursement

011

Category/
Type

Candidate Name

Joseph Kennedy III

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101422

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens For Waters

Mailing Address 249 E Ocean Blvd # 685

City Long Beach	State CA	Zip Code 90802
--------------------	-------------	-------------------

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Maxine Waters

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 43

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101426

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Erik PaulsenMailing Address P.O. Box 44369
250 Prairie Center Drive

City Eden Prairie	State MN	Zip Code 55344
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Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Erik P. Paulsen

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101429

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

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

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

7500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 149 OF 182

<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City	State	Zip Code
Lexington	KY	40588

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Andy Barr

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: KY District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101430

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Poliquin For Congress

Mailing Address PO Box 50

City	State	Zip Code
Oakland	ME	04963

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Bruce Poliquin

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: ME District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101431

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Poliquin For Congress

Mailing Address PO Box 50

City	State	Zip Code
Oakland	ME	04963

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Bruce Poliquin

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: ME District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101433

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

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

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

4500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mulvaney For Congress

Mailing Address P.O. Box 1975

City	State	Zip Code
Lancaster	SC	29721

Purpose of Disbursement

011

Candidate Name

Rep. Mick Mulvaney

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: SC District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101435

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kenny Marchant For Congress

Mailing Address PO Box 110187

City	State	Zip Code
Carrollton	TX	75011

Purpose of Disbursement

011

Candidate Name

Rep. Kenny Marchant

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101436

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Terri Sewell For Congress

Mailing Address P.O. Box 1964

City	State	Zip Code
Birmingham	AL	35201

Purpose of Disbursement

011

Candidate Name

Rep. Terri A. Sewell

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AL District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101437

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

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

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

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Moulton For Congress

Mailing Address PO Box 2013

City	State	Zip Code
Salem	MA	01970

Purpose of Disbursement

011

Category/
Type

Candidate Name

Seth Moulton

 Office Sought: ☒ House
☐ Senate
☐ President

 Disbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101438

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Kyrsten Sinema For Congress

Mailing Address PO Box 25879

City	State	Zip Code
Tempe	AZ	85285

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Kyrsten Sinema

 Office Sought: ☒ House
☐ Senate
☐ President

 Disbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: AZ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101439

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Garret Graves For Congress

Mailing Address PO Box 64845

City	State	Zip Code
Baton Rouge	LA	70896

Purpose of Disbursement
Void

011

Category/
Type

Candidate Name

Rep. Garret Graves

 Office Sought: ☒ House
☐ Senate
☐ President

 Disbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101440

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Void

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

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

4500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Graves For CongressMailing Address 2345 Grand Blvd
Ste 2400

City Kansas City State MO Zip Code 64108

Purpose of Disbursement
Void

Candidate Name

Rep. Samuel B. Graves Jr.

Office Sought: ☒ House
☐ Senate
☐ President
State: MO District: 06Disbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101441

Amount of Each Disbursement this Period

1000.00

☐ Memo Item
Void

Full Name (Last, First, Middle Initial)

B. Blum For Congress

Mailing Address 2728 Asbury Road Suite 400

City Dubuque State IA Zip Code 52001

Purpose of Disbursement

Candidate Name

Rep. Rod Blum

Office Sought: ☒ House
☐ Senate
☐ President
State: IA District: 01Disbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101442

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. National Republican Senatorial Committee

Mailing Address 425 Second Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

National Republican Senatorial Committee

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

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101443

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

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

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

18500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. People For Pearce

Mailing Address PO Box 2696

City	State	Zip Code
Hobbs	NM	88241

Purpose of Disbursement

Candidate Name

Rep. Steve Pearce

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NM District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102778

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Jared Polis Committee

Mailing Address P.O. Box 4572

City	State	Zip Code
Boulder	CO	80306

Purpose of Disbursement

Void - Friends Of Jared Polis Committee

Candidate Name

Rep. Jared Polis

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CO District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2016

Transaction ID : 8109687

Amount of Each Disbursement this Period

-2500.00

☐ Memo Item

Void - Friends Of Jared Polis Committee

Full Name (Last, First, Middle Initial)

C. Friends Of David SchweikertMailing Address 228 S Washington Street
Ste 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement

Void - David Schweikert for Congress

Candidate Name

Rep. David Schweikert

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: AZ District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2016

Transaction ID : 8109688

Amount of Each Disbursement this Period

-2500.00

☐ Memo Item

Void - David Schweikert for Congress

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

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

-3000.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Liberty Mutual Insurance Company - PAC

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Roy Blunt

Mailing Address PO Box 10178

City	State	Zip Code
Columbia	MO	65205

Purpose of Disbursement
Re-issue of lost primary check

011

Candidate Name

Sen. Roy Blunt

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2016

Transaction ID : 8128087

Amount of Each Disbursement this Period

5000.00

☐ Memo Item
Re-issue of lost primary check

Full Name (Last, First, Middle Initial)

B. Mchenry For Congress

Mailing Address PO Box 2165

City	State	Zip Code
Gastonia	NC	28053

Purpose of Disbursement

011

Candidate Name

Rep. Patrick Timothy McHenry

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2016

Transaction ID : 8128402

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Patrick Murphy

Mailing Address 4521 Pga Blvd #412

City	State	Zip Code
Palm Beach Gardens	FL	33418

Purpose of Disbursement

011

Candidate Name

Rep. Patrick E. Murphy

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2016

Transaction ID : 8131615

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Patrick Murphy

Mailing Address 4521 Pga Blvd #412

City	State	Zip Code
Palm Beach Gardens	FL	33418

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Patrick E. Murphy

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: FL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2016

Transaction ID : 8131624

Amount of Each Disbursement this Period

1700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Todd Young, Inc.

Mailing Address PO Box 1053

City	State	Zip Code
Bloomington	IN	47402

Purpose of Disbursement

011

Category/
Type

Candidate Name

Todd Young

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: IN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132020

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Katherine Clark For Congress

Mailing Address PO Box 361

City	State	Zip Code
Malden	MA	02148

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Katherine M Clark

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132025

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

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

11700.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Kyrsten Sinema For Congress

Mailing Address PO Box 25879

City	State	Zip Code
Tempe	AZ	85285

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Kyrsten Sinema

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: AZ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132028

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Perlmutter For CongressMailing Address 3440 Youngfield Street
#264

City	State	Zip Code
Wheat Ridge	CO	80033

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Edwin Perlmutter

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132030

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tim Murphy For Congress

Mailing Address PO Box 24551

City	State	Zip Code
Pittsburgh	PA	15234

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Tim F. Murphy

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: PA District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132032

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Yoder For Congress, Inc

Mailing Address PO Box 26742

City	State	Zip Code
Overland Park	KS	66225

Purpose of Disbursement

011

Candidate Name

Rep. Kevin Yoder

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KS District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132036

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Yoder For Congress, Inc

Mailing Address PO Box 26742

City	State	Zip Code
Overland Park	KS	66225

Purpose of Disbursement

011

Candidate Name

Rep. Kevin Yoder

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KS District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132037

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pat Meehan For Congress

Mailing Address 50 S Providence Rd

City	State	Zip Code
Media	PA	19063

Purpose of Disbursement

011

Candidate Name

Rep. Patrick L. Meehan

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: PA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132038

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

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

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

5500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Denham For Congress

Mailing Address 2150 River Plaza Dr., #150

City	State	Zip Code
Sacramento	CA	95833

Purpose of Disbursement

011

Candidate Name

Rep. Jeff Denham

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132039

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Dave Reichert

Mailing Address PO Box 2032

City	State	Zip Code
Issaquah	WA	98027

Purpose of Disbursement

011

Candidate Name

Rep. Dave George Reichert

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132040

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Team Ryan

Mailing Address 320 First Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement

011

Candidate Name

Team Ryan

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132078

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

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

8000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. AX PAC

Mailing Address PO Box 538

City	State	Zip Code
Wausau	WI	54402

Purpose of Disbursement

011

Candidate Name

AX PAC

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
06		22		2016

Transaction ID : 8132080

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Majority Committee PAC (McPAC)

Mailing Address PO Box 10134

City	State	Zip Code
Bakersfield	CA	93389

Purpose of Disbursement

011

Candidate Name

Majority Committee PAC (McPAC)

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
06		22		2016

Transaction ID : 8132094

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jobs, Economy and Budget Fund (JEB FUND)

Mailing Address PO BOX 30844

City	State	Zip Code
Bethesda	MD	20824

Purpose of Disbursement

011

Candidate Name

Jobs, Economy and Budget Fund (JEB FUND)

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
06		22		2016

Transaction ID : 8132103

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

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

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mchenry For Congress

Mailing Address PO Box 2165

City	State	Zip Code
Gastonia	NC	28053

Purpose of Disbursement

Candidate Name

Rep. Patrick Timothy McHenry

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NC District: 10

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132252

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Upper Hand Fund

Mailing Address PO Box 2485

City	State	Zip Code
Springfield	VA	22152

Purpose of Disbursement

Candidate Name

Upper Hand Fund

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132272

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. John Thune for Us SenateMailing Address 224 North Phillips Avenue
Suite 210

City	State	Zip Code
Sioux Falls	SD	57104

Purpose of Disbursement
Void - John Thune for Us Senate

Candidate Name

John Thune

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: SD District:

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132287

Amount of Each Disbursement this Period

-2500.00

☐ Memo Item

Void - John Thune for Us Senate

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

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

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Randy Hultgren For Congress

Mailing Address PO Box 717

City	State	Zip Code
St Charles	IL	60174

Purpose of Disbursement
Void - Randy Hultgren For Congress

011

Candidate Name

Rep. Randy Hultgren

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2016

Transaction ID : 8132289

Amount of Each Disbursement this Period

-1000.00

☐ Memo Item

Void - Randy Hultgren For Congress

Full Name (Last, First, Middle Initial)

B. Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City	State	Zip Code
Lexington	KY	40588

Purpose of Disbursement
Void - Andy Barr For Congress, Inc.

011

Candidate Name

Rep. Andy Barr

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2016

Transaction ID : 8132292

Amount of Each Disbursement this Period

-3500.00

☐ Memo Item

Void - Andy Barr For Congress, Inc.

Full Name (Last, First, Middle Initial)

C. Citizens To Elect Rick Larsen

Mailing Address PO Box 326

City	State	Zip Code
Everett	WA	98206

Purpose of Disbursement
Void - Citizens To Elect Rick Larsen

011

Candidate Name

Rep. Rick Larsen

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

State: WA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2016

Transaction ID : 8132296

Amount of Each Disbursement this Period

-1500.00

☐ Memo Item

Void - Citizens To Elect Rick Larsen

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

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

-6000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Meeks for Congress

Mailing Address 153-01 Jamaica Ave. Suite 535

City Jamaica	State NY	Zip Code 11432
-----------------	-------------	-------------------

Purpose of Disbursement
Void - Meeks for Congress

Candidate Name

Gregory Meeks

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NY	District: 06

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
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011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132298

Amount of Each Disbursement this Period

-2500.00

☐ Memo Item
Void - Meeks for Congress

Full Name (Last, First, Middle Initial)

B. Friends Of Dennis Ross

Mailing Address Post Office Box 7310

City Lakeland	State FL	Zip Code 33807
------------------	-------------	-------------------

Purpose of Disbursement
Void - Friends Of Dennis Ross

Candidate Name

Rep. Dennis A. Ross

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: FL	District: 15

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
------------------------	--	---

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132302

Amount of Each Disbursement this Period

-2000.00

☐ Memo Item
Void - Friends Of Dennis Ross

Full Name (Last, First, Middle Initial)

C. Garret Graves For Congress

Mailing Address PO Box 64845

City Baton Rouge	State LA	Zip Code 70896
---------------------	-------------	-------------------

Purpose of Disbursement
Void - Garret Graves For Congress

Candidate Name

Rep. Garret Graves

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: LA	District: 06

Disbursement For: 2016	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General
------------------------	--	---

011

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8132305

Amount of Each Disbursement this Period

-1000.00

☐ Memo Item
Void - Garret Graves For Congress

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

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

-5500.00


<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

Liberty Mutual Insurance Company - PAC

011
Category/
Type

-1000.00

Category/
Type

 Memo Item
Void - Graves For Congress

011
Category/
Type

1500.00

Category/
Type

 Memo Item

011
Category/
Type

2500.00

Category/
Type

 Memo Item

3000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Dennis Ross

Mailing Address Post Office Box 7310

City
LakelandState
FLZip Code
33807

Purpose of Disbursement

011

Candidate Name

Rep. Dennis A. Ross

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2016

Transaction ID : 8135918

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City
LexingtonState
KYZip Code
40588

Purpose of Disbursement

011

Candidate Name

Rep. Andy Barr

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: KY

District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2016

Transaction ID : 8135921

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City
LexingtonState
KYZip Code
40588

Purpose of Disbursement

011

Candidate Name

Rep. Andy Barr

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: KY

District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2016

Transaction ID : 8135922

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

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

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

5500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Garret Graves For Congress

Mailing Address PO Box 64845

City
Baton RougeState
LAZip Code
70896

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Garret Graves

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2016

Transaction ID : 8135923

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Graves For CongressMailing Address 2345 Grand Blvd
Ste 2400City
Kansas CityState
MOZip Code
64108

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Samuel B. Graves Jr.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2016

Transaction ID : 8135924

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Bill Posey

Mailing Address P. O. Box 411486

City
MelbourneState
FLZip Code
32941

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Bill Posey

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2016

Transaction ID : 8135926

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

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

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

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<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)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Randy Hultgren For Congress

Mailing Address PO Box 717

City	State	Zip Code
St Charles	IL	60174

Purpose of Disbursement

011

Candidate Name

Rep. Randy Hultgren

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2016

Transaction ID : 8135927

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. John Thune for Us SenateMailing Address 224 North Phillips Avenue
Suite 210

City	State	Zip Code
Sioux Falls	SD	57104

Purpose of Disbursement

011

Candidate Name

John Thune

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: SD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2016

Transaction ID : 8141678

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City	State	Zip Code
Lexington	KY	40588

Purpose of Disbursement
Void - Andy Barr For Congress, Inc.

011

Candidate Name

Rep. Andy Barr

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KY District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2016

Transaction ID : 8205917

Amount of Each Disbursement this Period

-1000.00

☐ Memo Item

Void - Andy Barr For Congress, Inc.

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

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

2500.00

156700.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Jay Inslee for Washington

Mailing Address PO Box 21067

City	State	Zip Code
Seattle	WA	9811

Purpose of Disbursement
Jay Inslee, GOVERNOR WA

Candidate Name

Jay Inslee

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101453

Amount of Each Disbursement this Period

200.00

☐ Memo Item
Jay Inslee, GOVERNOR WA

Full Name (Last, First, Middle Initial)

B. Jay Inslee for Washington

Mailing Address PO Box 21067

City	State	Zip Code
Seattle	WA	9811

Purpose of Disbursement
Jay Inslee, GOVERNOR WA

Candidate Name

Jay Inslee

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101454

Amount of Each Disbursement this Period

1300.00

☐ Memo Item
Jay Inslee, GOVERNOR WA

Full Name (Last, First, Middle Initial)

C. Committee to Elect Ron Richard

Mailing Address 1419 W. 4th St

City	State	Zip Code
Joplin	MO	64801

Purpose of Disbursement
Ron Richard, STATE SENATE 32nd MO

Candidate Name

MO Sen. Ron Richard

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101455

Amount of Each Disbursement this Period

1000.00

☐ Memo Item
Ron Richard, STATE SENATE 32nd MO

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

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

2500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Jay Wasson

Mailing Address PO Box 1231

City	State	Zip Code
Nixa	MO	65714

Purpose of Disbursement
Jay Wasson, STATE SENATE 20th MO

Candidate Name

MO Sen. Jay Wasson

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101456

Amount of Each Disbursement this Period

500.00

☐ Memo Item
Jay Wasson, STATE SENATE 20th MO

Full Name (Last, First, Middle Initial)

B. Parson for State Senate

Mailing Address 940 N. Redel Pl.

City	State	Zip Code
Bolivar	MO	65613

Purpose of Disbursement
Mike Parson, STATE SENATE 28th MO

Candidate Name

Mike Parson

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101457

Amount of Each Disbursement this Period

1000.00

☐ Memo Item
Mike Parson, STATE SENATE 28th MO

Full Name (Last, First, Middle Initial)

C. Wieland Now

Mailing Address 1015 Castleman Dr.

City	State	Zip Code
Imperial	MO	63052

Purpose of Disbursement
Paul Wieland, STATE HOUSE 102nd MO

Candidate Name

MO Rep. Paul Wieland

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101458

Amount of Each Disbursement this Period

1000.00

☐ Memo Item
Paul Wieland, STATE HOUSE 102nd MO

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

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

2500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Citizens to Elect Mike Kehoe

Mailing Address PO Box 105527

City	State	Zip Code
Jefferson City	MO	65110

Purpose of Disbursement
Mike Kehoe, STATE SENATE 6th MO

011

Candidate Name

MO Sen. Mike Kehoe

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101459

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Mike Kehoe, STATE SENATE 6th MO

Full Name (Last, First, Middle Initial)

B. Scott Sifton for Senate

Mailing Address 9785 Mackenzie Road Ste 100

City	State	Zip Code
St. Louis	MO	63123

Purpose of Disbursement
Scott Sifton, STATE SENATE 1st MO

011

Candidate Name

MO Sen. Scott Sifton

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101460

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Scott Sifton, STATE SENATE 1st MO

Full Name (Last, First, Middle Initial)

C. Friends of Mike Cunningham 16

Mailing Address 515 Landslide Road

City	State	Zip Code
Rogersville	MO	65742

Purpose of Disbursement
Mike Cunningham, STATE SENATE 33rd MO

011

Candidate Name

MO Sen. Mike Cunningham

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101466

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Mike Cunningham, STATE SENATE 33rd MO

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

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

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Silvey for Missouri

Mailing Address PO Box 10626

City	State	Zip Code
Gladstone	MO	64118

Purpose of Disbursement
Ryan Silvey, STATE SENATE 17th MO

Candidate Name

MO Sen. Ryan SilveyOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101467

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Ryan Silvey, STATE SENATE 17th MO

Full Name (Last, First, Middle Initial)

B. Friends of Todd Richardson

Mailing Address PO Box 310

City	State	Zip Code
Poplar Bluff	MO	63902

Purpose of Disbursement
Todd Richardson, STATE HOUSE 154th MO

Candidate Name

MO Rep. Todd RichardsonOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101468

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Todd Richardson, STATE HOUSE 154th MO

Full Name (Last, First, Middle Initial)

C. Citizens for Kevin Bacon

Mailing Address 5325 Ponderosa Drive

City	State	Zip Code
Columbus	OH	43231

Purpose of Disbursement
Kevin Bacon, STATE SENATE 3rd OH

Candidate Name

Kevin BaconOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101469

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Kevin Bacon, STATE SENATE 3rd OH

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Robert Hackett for State Representative

Mailing Address 2050 Palouse Drive

City	State	Zip Code
London	OH	43140

Purpose of Disbursement
Robert Hackett, STATE HOUSE 84th OH

Candidate Name

Robert Hackett

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2016

Transaction ID : 8101470

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Robert Hackett, STATE HOUSE 84th OH

Full Name (Last, First, Middle Initial)

B. Citizens for Hottinger

Mailing Address 2135 HORNS HILL RD

City	State	Zip Code
Newark	OH	43055

Purpose of Disbursement
Jay Hottinger, STATE HOUSE 71st OH

Candidate Name

Jay Hottinger

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2016

Transaction ID : 8101471

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Jay Hottinger, STATE HOUSE 71st OH

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT CLIFF ROSENBERGER

Mailing Address 7027 STATE ROUTE 350 WEST, P.O. BO

City	State	Zip Code
CLARKSVILLE	OH	45113

Purpose of Disbursement
Cliff Rosenberger, STATE HOUSE 91st OH

Candidate Name

OH Rep. Cliff Rosenberger

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2016

Transaction ID : 8101472

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Cliff Rosenberger, STATE HOUSE 91st OH

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

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

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Sears

Mailing Address 6711 Monroe Street, Bldg 3, Ste. D

City	State	Zip Code
Sylvania	OH	43560

Purpose of Disbursement
Barbara Sears, STATE HOUSE 46th OH

Candidate Name

Barbara Sears

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101473

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Barbara Sears, STATE HOUSE 46th OH

Full Name (Last, First, Middle Initial)

B. Citizens for Schuring Committee

Mailing Address 330 Third St. NW

City	State	Zip Code
Canton	OH	44702

Purpose of Disbursement
Kirk Schuring, STATE HOUSE 48th OH

Candidate Name

OH Rep. Kirk Schuring

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101474

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Kirk Schuring, STATE HOUSE 48th OH

Full Name (Last, First, Middle Initial)

C. Cupp for State Representative Committee

Mailing Address 3003 W Hume Road

City	State	Zip Code
Lima	OH	45806

Purpose of Disbursement
Bob Cupp, STATE HOUSE 4th OH

Candidate Name

OH Rep. Bob Cupp

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		07		2016

Transaction ID : 8101475

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Bob Cupp, STATE HOUSE 4th OH

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

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Citizens to Elect Carl Wilson

Mailing Address 560-A NE F St #442

City	State	Zip Code
Grants Pass	OR	97526

Purpose of Disbursement
Carl Wilson, STATE HOUSE OR

011

Candidate Name

Carl Wilson

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8101756

Amount of Each Disbursement this Period

500.00

☐ Memo Item
Carl Wilson, STATE HOUSE OR

Full Name (Last, First, Middle Initial)

B. Jodi Hack for Oregon

Mailing Address 4742 Liberty Road S #161

City	State	Zip Code
Salem	OR	97302

Purpose of Disbursement
Jodi Hack, STATE HOUSE OR

011

Candidate Name

Jodi Hack

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8101758

Amount of Each Disbursement this Period

500.00

☐ Memo Item
Jodi Hack, STATE HOUSE OR

Full Name (Last, First, Middle Initial)

C. Friends of Bill Kennemer

Mailing Address 21041 S. HWY 99 E

City	State	Zip Code
Oregon City	OR	97045

Purpose of Disbursement
Bill Kennemer, STATE HOUSE 39th OR

011

Candidate Name

Bill Kennemer

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8101997

Amount of Each Disbursement this Period

500.00

☐ Memo Item
Bill Kennemer, STATE HOUSE 39th OR

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

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

1500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Friends of Mark Johnson

Mailing Address 3370 Fir Mountain Road

City	State	Zip Code
Hood River	OR	97031

Purpose of Disbursement
Mark Johnson, STATE HOUSE 52nd OR

Candidate Name

Mark Johnson

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8101998

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Mark Johnson, STATE HOUSE 52nd OR

Full Name (Last, First, Middle Initial)

B. Committee to Elect Gene Whisnant

Mailing Address 17960 Hickory Lane #5

City	State	Zip Code
Sunriver	OR	97707

Purpose of Disbursement
Gene Whisnant, STATE HOUSE 53rd OR

Candidate Name

Gene Whisnant

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8101999

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Gene Whisnant, STATE HOUSE 53rd OR

Full Name (Last, First, Middle Initial)

C. Buehler for a United Oregon

Mailing Address 1000 NW Wall St. Suite 220

City	State	Zip Code
Bend	OR	97701

Purpose of Disbursement
Knut Buehler, STATE HOUSE OR

Candidate Name

Knut Buehler

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102000

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Knut Buehler, STATE HOUSE OR

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

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Doug Libla for Senate

Mailing Address 5287 Hwy 67 North

City	State	Zip Code
Poplar Bluff	MO	63901

Purpose of Disbursement
Doug Libla, STATE SENATE 25th MO

Candidate Name

MO Sen. Doug Libla

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102030

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Doug Libla, STATE SENATE 25th MO

Full Name (Last, First, Middle Initial)

B. Citizens for Wiemann

Mailing Address 92 Myrtle Wood Court

City	State	Zip Code
O'Fallon	MO	63368

Purpose of Disbursement
John Wiemann, STATE HOUSE 103rd MO

Candidate Name

MO Rep. John Wiemann

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102031

Amount of Each Disbursement this Period

500.00

☐ Memo Item

John Wiemann, STATE HOUSE 103rd MO

Full Name (Last, First, Middle Initial)

C. Bob Burns for State Rep Committee

Mailing Address 9057 Southview Lane

City	State	Zip Code
St. Louis	MO	63123

Purpose of Disbursement
Bob Burns, STATE HOUSE 93rd MO

Candidate Name

MO Rep. Bob Burns

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102032

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Bob Burns, STATE HOUSE 93rd MO

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

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

1500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Engler for Missouri

Mailing Address 108 W. Columbia

City	State	Zip Code
Farmington	MO	63640

Purpose of Disbursement
Kevin Engler, STATE HOUSE 116th MO

Candidate Name

MO Rep. Kevin Engler

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102033

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Kevin Engler, STATE HOUSE 116th MO

Full Name (Last, First, Middle Initial)

B. Koster for Governor

Mailing Address PO Box 440173

City	State	Zip Code
St. Louis	MO	63144

Purpose of Disbursement
Chris Koster, GOVERNOR MO

Candidate Name

Chris Koster

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102034

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Chris Koster, GOVERNOR MO

Full Name (Last, First, Middle Initial)

C. Citizens for Obhof

Mailing Address 5206 Crown Pointe Dr.

City	State	Zip Code
Medina	OH	44256

Purpose of Disbursement
Larry Obhof, STATE SENATE 22nd OH

Candidate Name

OH Sen. Larry Obhof

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102109

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Larry Obhof, STATE SENATE 22nd OH

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

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Friends of Ryan Smith

Mailing Address 63 Cedar Street

City	State	Zip Code
Gallipolis	OH	45631

Purpose of Disbursement
Ryan Smith, STATE HOUSE 93rd OH

011

Candidate Name

OH Rep. Ryan Smith

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102110

Amount of Each Disbursement this Period

1000.00

☐ Memo Item
Ryan Smith, STATE HOUSE 93rd OH

Full Name (Last, First, Middle Initial)

B. Hayden for Oregon

Mailing Address P.O. Box 459

City	State	Zip Code
Lowell	OR	97452

Purpose of Disbursement
Cedric Hayden, STATE HOUSE 7th OR

011

Candidate Name

OR Rep. Cedric Hayden

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102121

Amount of Each Disbursement this Period

500.00

☐ Memo Item
Cedric Hayden, STATE HOUSE 7th OR

Full Name (Last, First, Middle Initial)

C. Friends of Sherrie Sprenger

Mailing Address PO Box 702

City	State	Zip Code
Scio	OR	97374

Purpose of Disbursement
Sherrie Sprenger, STATE HOUSE 17th OR

011

Candidate Name

OR Rep. Sherrie Sprenger

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102122

Amount of Each Disbursement this Period

500.00

☐ Memo Item
Sherrie Sprenger, STATE HOUSE 17th OR

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

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

2000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Nearman4Oregon

Mailing Address 2570 Greenwood Road S

City Independence	State OR	Zip Code 97351
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Purpose of Disbursement
Mike Nearman, STATE HOUSE 23rd OR

Candidate Name

OR Rep. Mike NearmanOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102123

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Mike Nearman, STATE HOUSE 23rd OR

Full Name (Last, First, Middle Initial)

B. Ron Noble for Oregon

Mailing Address 89286 Cranberry Lane

City Brandon	State OR	Zip Code 97411
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Purpose of Disbursement
Ron Noble, STATE HOUSE OR

Candidate Name

Ron NobleOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102124

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Ron Noble, STATE HOUSE OR

Full Name (Last, First, Middle Initial)

C. Friends of Bill Post

Mailing Address 5434 River Rd N #142

City Keizer	State OR	Zip Code
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Purpose of Disbursement
Bill Post, STATE HOUSE 25th OR

Candidate Name

OR Rep. Bill PostOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102125

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Bill Post, STATE HOUSE 25th OR

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Friends of Julie Parrish

Mailing Address 1968 Carriage Way

City	State	Zip Code
West Linn	OR	97068

Purpose of Disbursement
Julie Parrish, STATE HOUSE 37th OR

Candidate Name

OR Rep. Julie Parrish

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102126

Amount of Each Disbursement this Period

500.00

☐ Memo Item
Julie Parrish, STATE HOUSE 37th OR

Full Name (Last, First, Middle Initial)

B. Committee to Re-Elect Greg Smith

Mailing Address PO Box 215

City	State	Zip Code
Heppner	OR	97836

Purpose of Disbursement
Greg Smith, STATE HOUSE 57th OR

Candidate Name

OR Rep. Greg Smith

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102127

Amount of Each Disbursement this Period

500.00

☐ Memo Item
Greg Smith, STATE HOUSE 57th OR

Full Name (Last, First, Middle Initial)

C. Washington State Democratic Central Committee

Mailing Address PO Box 4027

City	State	Zip Code
Seattle	WA	98194

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102153

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

2000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

Full Name (Last, First, Middle Initial)

A. Mainstream Republicans of Washington

Mailing Address 7620 West 21st Ave.

City	State	Zip Code
Kennewick	WA	99338

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102154

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Newsom for California Governor 2018

Mailing Address 268 Bush St. #4600

City	State	Zip Code
San Francisco	CA	94104

Purpose of Disbursement
Gavin Newsom, GOVERNOR CA

Candidate Name

Gavin Newsom

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2016

Transaction ID : 8102347

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Gavin Newsom, GOVERNOR CA

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item

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

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

6000.00

40500.00
