

 **EMC**
Insurance Companies

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

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FEC MAIL CENTER

2008 OCT 29 AM 10:58

COMMITTEE FOR RESPONSIBLE STATE GOVERNMENT

Multi-Candidate Committee

October 2, 2008

Federal Election Commission
Public Records Office
999 E Street N.W.
Washington, D. C. 20463

Enclosed are the following reports for the period July 1, 2008 through September 30, 2008:

Report of Receipts and Disbursements
Summary Page of Receipts and Disbursements
Detailed Summary Page – Receipts
Detailed Summary Page - Disbursements



Bruce G. Kelley
Treasurer

BGK/sb
Enc.

28039851474

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5 MAY 10 10: 58

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

ADDRESS (number and street) 717 Mulberry Street

Check if different than previously reported. (ACC) Des Moines IA 50309

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

C 00163873

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on MM / DD / YYYY in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on MM / DD / YYYY in the State of

5. Covering Period MM / DD / YYYY 07 / 01 / 2008 through MM / DD / YYYY 09 / 30 / 2008

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 Bruce G. Kelley

Signature of Treasurer *Bruce G. Kelley* Date MM / DD / YYYY 10 / 02 / 2008

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

28039851475

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period: From:

07 / 01 / 2008

To:

09 / 30 / 2008

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, 2008	5,600.54
(b) Cash on Hand at Beginning of Reporting Period.....	3,682.91
(c) Total Receipts (from Line 19).....	1,749.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	5,431.99
7. Total Disbursements (from Line 31).....	7,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	3,431.99
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0



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

28039851476

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name **Employers Mutual Casualty Co. Political Action
Committee for Responsible Federal Government**

Report Covering the Period: From: **07 / 01 / 2008** To: **09 / 30 / 2008**

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).....

944.06

2,384.11

(ii) Unitemized

805.02

2,947.34

(iii) TOTAL (add
Lines 11(a)(i) and (ii)).....▶

1,749.08

5,331.45

(b) Political Party Committees

0

0

(c) Other Political Committees
(such as PACs).....

0

0

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

1,749.08

5,331.45

12. Transfers From Affiliated/Other
Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

0

0

17. Other Federal Receipts
(Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds
(a) Non-Federal Account
(from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

1,749.08

5,331.45

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶

1,749.08

5,331.45

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DETAILED SUMMARY PAGE
of Disbursements

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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2,000.00	7,500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2,000.00	7,500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2,000.00	7,500.00

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DETAILED SUMMARY PAGE
of Disbursements

**III. Net Contributions/Operating Ex-
penditures**

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

- 33. Total Contributions (other than loans)
(from Line 11(d), page 3)
- 34. Total Contribution Refunds
(from Line 28(d))
- 35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))
- 37. Offsets to Operating Expenditures
(from Line 15, page 3)
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)

1,749.08
0
1,749.08
0
0
0

5,331.45
0
5,331.45
0
0
0

28039851479

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 1 OF 3

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

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

NAME OF COMMITTEE (In Full) **Employers Mutual Casualty Co. Political Action Committee for Responsible Federal Government**

Full Name (Last, First, Middle Initial)

A. James C. Fontanini

Mailing Address

929 43rd Street

City **West Des Moines**

State **IA** Zip Code **50265**

FEC ID number of contributing federal political committee.

C

Name of Employer **EMC Insurance Companies**

Occupation **Resident Vice President**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **142.50**

Payroll Deductions - See Date of Receipt Attached.

MM / DD / YYYY

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

B. Raymond L. Geary

Mailing Address

39 Althea Dr

City **Cranston**

State **RI** Zip Code **02920**

FEC ID number of contributing federal political committee.

C

Name of Employer **EMC Insurance Companies**

Occupation **Resident Vice President**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **130.60**

Payroll Deductions - See Date of Receipt Attached.

MM / DD / YYYY

Amount of Each Receipt this Period

27.60

Full Name (Last, First, Middle Initial)

C. Ron Hallenbeck

Mailing Address

5880 Brentwood Circle

City **Johnston**

State **IA** Zip Code **50131**

FEC ID number of contributing federal political committee.

C

Name of Employer **EMC Insurance Companies**

Occupation **Vice President**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **171.75**

Payroll Deductions - See Date of Receipt Attached.

MM / DD / YYYY

Amount of Each Receipt this Period

55.50

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

128.10

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

128.10

28039851480

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 2 OF 3

(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)

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

Full Name (Last, First, Middle Initial)

A. Jerry Harlow

Mailing Address

6490 Devonshire Dr

City State Zip Code
Chanhassen MN 55317

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
EMC Insurance Companies Resident Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
124.26

Payroll Deductions - See Date of Receipt Attached.

MM / DD / YYYY

Amount of Each Receipt this Period

45.96

Full Name (Last, First, Middle Initial)

B. Bruce Kelley

Mailing Address

14 Glenview Dr

City State Zip Code
Des Moines IA 50312

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
EMC Insurance Companies President & CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,225.00

Payroll Deductions - See Date of Receipt Attached.

MM / DD / YYYY

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

C. Robert C. Morlan

Mailing Address

3404 Wakonda Ct

City State Zip Code
Des Moines IA 50321

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
EMC Insurance Companies Asst VP & Community Relations

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
190.00

Payroll Deductions - See Date of Receipt Attached.

MM / DD / YYYY

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

555.96

TOTAL This Period (last page this line number only)

28039851481

**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 3 OF 3

<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)

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

Full Name (Last, First, Middle Initial)

A. Lonnie Schwab

Mailing Address

16455 West Bluemound Rd

City State Zip Code

Brookfield WI 53005

FEC ID number of contributing federal political committee.

C

Name of Employer
EMC Insurance Companies

Occupation
Resident Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

170.00

Payroll Deductions - See
Date of Receipt Attached.

MM	DD	YYYY
----	----	------

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. R. David Orr

Mailing Address

8263 Quail Hollow Dr

City State Zip Code

Harrisburg NC 28075

FEC ID number of contributing federal political committee.

C

Name of Employer
EMC Insurance Companies

Occupation
Resident Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Check
Date of Receipt

MM	DD	YYYY
----	----	------

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM	DD	YYYY
----	----	------

Amount of Each Receipt this Period

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

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

944.06

28039851482

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

<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)

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

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Iowa Victory		Date of Disbursement	
Mailing Address 621 East Ninth Street		MM / DD / YYYY 07 / 23 / 2008	
City Des Moines	State IA	Zip Code 50309	Amount of Each Disbursement this Period 1,000.00
Purpose of Disbursement Contribution		Category/ Type 011	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

B. NAMIC PAC		Date of Disbursement	
Mailing Address 122 C St., NW, Ste 540		MM / DD / YYYY 09 / 15 / 2008	
City Washington,	State DC	Zip Code 20001	Amount of Each Disbursement this Period 1,000.00
Purpose of Disbursement		Category/ Type 011	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

C.		Date of Disbursement	
Mailing Address		MM / DD / YYYY	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	
Candidate Name			
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:		

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

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

2,000.00

28039851484

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
10/2/08

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

 10/9/08
PREPARER **DATE PREPARED**

28039851485