

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Independent Insurance Agents of America Political Action Committee (INSURPAC)

ADDRESS (number and street) 412 First Street, SE Suite 300
 Check if different than previously reported. (ACC)
Washington DC 20003

2. **FEC IDENTIFICATION NUMBER** C00022343
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 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 02 01 2006 through 02 28 2006

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 Robert A. Rusbuldt

Signature of Treasurer Electronically Filed by Robert A. Rusbuldt Date 03 20 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		150585.73
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	158539.60									
(c) Total Receipts (from Line 19)	101326.00	138951.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	259865.60	289536.73								
7. Total Disbursements (from Line 31)	54413.51	84084.64								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	205452.09	205452.09								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Independent Insurance Agents of America Political Action Committee (INSURPAC)

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	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	72561.00	105671.00
(i) Itemized (use Schedule A)	28765.00	33280.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	101326.00	138951.00
(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)	101326.00	138951.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (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))	101326.00	138951.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	101326.00	138951.00

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) Shared 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.....	1913.51	3084.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1913.51	3084.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52500.00	76000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	5000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	54413.51	84084.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	54413.51	84084.64

DETAILED SUMMARY PAGE
of Disbursements

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)	101326.00	138951.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	101326.00	138951.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1913.51	3084.64
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1913.51	3084.64

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Al Adams

Mailing Address PO Box 9375

City Greensboro State NC Zip Code 27429

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

Name of Employer Senn, Dunn, Marsh & Roland, In
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47501

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 950 17th St. Ste. 1000

City Denver State CO Zip Code 80202

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

Name of Employer ISU Insurance Services of Colo
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2006

Transaction ID: 60220.C47630

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 777 Sunrise Hwy Ste 202

City Lynbrook State NY Zip Code 11563-2950

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

Name of Employer MRW Group, Inc.
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60220.C47817

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. W. Cloyce Anders		Date of Receipt MM / DD / YYYY 02 / 07 / 2006
Mailing Address 845 Holt Drive		Transaction ID: 60220.C47615
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer VFIS Of North Carolina	Occupation Owner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. W. Cloyce Anders		Date of Receipt MM / DD / YYYY 02 / 10 / 2006
Mailing Address 845 Holt Drive		Transaction ID: 60220.C47663
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer VFIS Of North Carolina	Occupation Owner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2510.00	

Full Name (Last, First, Middle Initial) C. Neil Annas		Date of Receipt MM / DD / YYYY 02 / 06 / 2006
Mailing Address P O Drawer 620		Transaction ID: 60220.C47460
City Granite Falls	State NC	Zip Code 28630
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Granite Insurance Agency, Inc.	Occupation President	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	3010.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Neil Annas

Mailing Address P O Drawer 620

City State Zip Code
Granite Falls NC 28630

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

Name of Employer
Granite Insurance Agency, Inc.

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: 60220.C47664

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address PO Box 1010

City State Zip Code
Gatlinburg TN 37738-1010

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

Name of Employer
Tom Atchley Ins

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47848

Amount of Each Receipt this Period
300.00

Receipt

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

Mailing Address PO Box 2326

City State Zip Code
Raleigh NC 27602-2326

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

Name of Employer
Bagwell & Bagwell Inc

Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47618

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	810.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. Richard Barber		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 6	
Mailing Address PO Box 1388		Transaction ID: 60220.C47446	
City Washington	State NC	Amount of Each Receipt this Period 150.00	
Zip Code 27889-1388		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Morris Insurance Agency, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00		

Full Name (Last, First, Middle Initial) B. Richard Barber		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 6	
Mailing Address PO Box 1388		Transaction ID: 60220.C47445	
City Washington	State NC	Amount of Each Receipt this Period 150.00	
Zip Code 27889-1388		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Morris Insurance Agency, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Richard Barber		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address PO Box 1388		Transaction ID: 60220.C47666	
City Washington	State NC	Amount of Each Receipt this Period 10.00	
Zip Code 27889-1388		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Morris Insurance Agency, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00		

SUBTOTAL of Receipts This Page (optional) ▶	310.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Donald Beery

Mailing Address 1340 Poydras St

City State Zip Code
New Orleans LA 70112-1224

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

Name of Employer Occupation
Eustis Insurance, Inc. Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60220.C47808

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jeanne Bernhardt

Mailing Address 1415 S Monroe Ave

City State Zip Code
Mason City IA 50401-5678

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

Name of Employer Occupation
Mason City All Risk Insurance, Inc. Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 13 / 2006

Transaction ID: 60220.C47753

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 37

City State Zip Code
Milford NH 03055-0037

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

Name of Employer Occupation
Eaton & Berube Insurance Agency, Inc. Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2006

Transaction ID: 60317.C47942

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
William Bingham

Mailing Address PO Box 189

City State Zip Code
Cornelius NC 28031-0189

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

Name of Employer
Bingham & Therrell Agencies

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47623

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Barry Blumberg

Mailing Address PO Box 82030

City State Zip Code
Baton Rouge LA 70884-2030

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

Name of Employer
Blumberg and Associates, Inc.

Occupation
Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60220.C47809

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address PO Box 6338

City State Zip Code
Raleigh NC 27628-6338

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

Name of Employer
Bode, Call & Sroupe

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47514

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Walt Bradshaw

Mailing Address PO Box 1300

City State Zip Code
Dyersburg TN 38025

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

Name of Employer Occupation
Bradshaw & Company Insu- Vice President
rs

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 6 / 2 0 0 6

Transaction ID: 60220.C47829

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
William Brannon

Mailing Address 7-C Terrace Way

City State Zip Code
Greensboro NC 27403

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

Name of Employer Occupation
Group U.S., Inc. President & CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 6 / 2 0 0 6

Transaction ID: 60220.C47461

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 110 Westover Ave

City State Zip Code
Williamsburg VA 23185-2914

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

Name of Employer Occupation
Brooks Agency, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47857

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
George Brooks

Mailing Address 196 E Main St

City State Zip Code
Huntington NY 11743-2922

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

Name of Employer: Brooks & Brooks Insurance Agen
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47881

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lester Brown

Mailing Address PO Box 1666

City State Zip Code
Greenville NC 27835-1666

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

Name of Employer: Hooker & Buchanan, Inc.
Occupation: Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47625

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 1666

City State Zip Code
Greenville NC 27835-1666

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

Name of Employer: Hooker & Buchanan, Inc.
Occupation: Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: 60220.C47673

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
William Burke

Mailing Address 1691 Hickory Loop Ste B

City State Zip Code
Las Cruces NM 88005-3170

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

Name of Employer Occupation
Burke Insurance Group, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47843

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Byrnes

Mailing Address PO Box 739
553 Hartford Pike

City State Zip Code
Dayville CT 06241-0739

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

Name of Employer Occupation
Byrnes Agency, Inc Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 7 / 2 0 0 6

Transaction ID: 60317.C48003

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Edward J Cantwell

Mailing Address 725 John Nolen Dr

City State Zip Code
Madison WI 53713-1421

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

Name of Employer Occupation
Ind Ins Agts of Wisconsin Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 1 / 2 0 0 6

Transaction ID: 60220.C47454

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Kenneth Christian

Mailing Address PO Box 299

City Peterborough State NH Zip Code 03458-0299

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

Name of Employer Bellows-Nichols Agency, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C48033

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 511

City Concord State NH Zip Code 03302-0511

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

Name of Employer The Rowley Agency, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2006

Transaction ID: 60317.C47943

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address PO Box 9375

City Greensboro State NC Zip Code 27429

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

Name of Employer Senn, Dunn, Marsh & Roland, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47628

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. James E Clement ., JR		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address PO Box 1626		Transaction ID: 60317.C47974	
City Greenville	State NC	Amount of Each Receipt this Period 250.00	
Zip Code 27835-1626		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer The Clement Companies	Occupation President	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Receipt	

Full Name (Last, First, Middle Initial) B. Leamon Clemmons, JR		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6	
Mailing Address PO Box 79		Transaction ID: 60220.C47523	
City Supply	State NC	Amount of Each Receipt this Period 150.00	
Zip Code 28462-0079		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Brunswick Insurance Services, Inc.	Occupation Insurance Agent	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	Receipt	

Full Name (Last, First, Middle Initial) C. Leamon Clemmons, JR		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6	
Mailing Address PO Box 79		Transaction ID: 60220.C47679	
City Supply	State NC	Amount of Each Receipt this Period 10.00	
Zip Code 28462-0079		Receipt	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00	
Name of Employer Brunswick Insurance Services, Inc.	Occupation Insurance Agent	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 160.00	Receipt	

SUBTOTAL of Receipts This Page (optional) ▶	410.00
TOTAL This Period (last page this line number only) ▶	410.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Leamon Clemmons, JR

Mailing Address PO Box 79

City State Zip Code
Supply NC 28462-0079

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 410.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C47975

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
W. M. Collinsworth

Mailing Address 5979 Northwest 151St., Su

City State Zip Code
Hialeah FL 33014

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

Name of Employer Occupation
Collingsworth Alter Nielsen Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C47967

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
E.H. Davis ., JR

Mailing Address 1120 Randolph St., STE 21

City State Zip Code
Thomasville NC 27360-5259

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

Name of Employer Occupation
Citizens Insurance Agency Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47527

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
James Day ., Aai, JR

Mailing Address PO Box 465

City State Zip Code
Bowling Green VA 22427-0465

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

Name of Employer DeJarnette & Beale, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47859

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
C.R. Dethloff

Mailing Address PO Box 5759

City State Zip Code
Shreveport LA 71135-5759

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

Name of Employer Dethloff & Associates, Inc. Occupation Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C47972

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Thomas J Dietz

Mailing Address PO Box 456

City State Zip Code
Bedford Hills NY 10507-0456

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

Name of Employer Netspace New York Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60220.C47818

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Michael Donohoe Mailing Address PO BOX 1146 City Mankato State MN Zip Code 56002-1146 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6 Transaction ID: 60317.C47874 Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer James R. Weir Insurance Agency Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1050.00		

B. Full Name (Last, First, Middle Initial) Roger Downey Mailing Address 2155 Louisiana Blvd NE Ste 8950 City Albuquerque State NM Zip Code 87110-5484 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Transaction ID: 60220.C47444 Amount of Each Receipt this Period 500.00 Receipt
Name of Employer Downey & Company Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Wade Dunbar, III Mailing Address PO Box 3621 City Laurinburg State NC Zip Code 28353-3621 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Transaction ID: 60220.C47469 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Wade S. Dunbar Agency Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address PO Box 9375

City Greensboro State NC Zip Code 27429-0375

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

Name of Employer Senn, Dunn, Marsh & Roland, In
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47529

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 539

City Newport State NH Zip Code 03773-0539

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

Name of Employer McCrillis & Eldredge Insurance
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 23 / 2006

Transaction ID: 60317.C47945

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 1269

City Spring Valley State MN Zip Code 55975-0969

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

Name of Employer Essig Agency
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60220.C47812

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Donald Evans

Mailing Address PO Box 2268

City State Zip Code
Shallotte NC 28459-2268

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

Name of Employer Coastal Insurance Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47532

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Donald Evans

Mailing Address PO Box 2268

City State Zip Code
Shallotte NC 28459-2268

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

Name of Employer Coastal Insurance Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1010.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: 60220.C47686

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address 111 Hazel Path

City State Zip Code
Hendersonville TN 37075-3887

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

Name of Employer Next Generations Underwriters Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 01 / 2006

Transaction ID: 60220.C47451

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2010.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Roger Evans ., JR

Mailing Address PO Box 1437

City Kinston State NC Zip Code 28503-1437

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

Name of Employer Evans & Associates Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60220.C47534

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
William Fahy

Mailing Address PO Box 210

City Oneida State NY Zip Code 13421-0210

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

Name of Employer Vanguard Risk Managers Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47885

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 901 Lodi St

City Syracuse State NY Zip Code 13203-2259

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

Name of Employer Dominick Falcone Agency, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47886

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) M. Scott Ferguson Mailing Address PO Box 11248 City State Zip Code Chattanooga TN 37401-2248 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6 Transaction ID: 60317.C47850 Amount of Each Receipt this Period 500.00 Receipt
Name of Employer Associated General Agency, Inc. Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) W. Kurt Fickling CIC Mailing Address 308 Crown Point Road City State Zip Code Greenville NC 27858 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6 Transaction ID: 60317.C47978 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Fickling Ins Consultants, Inc. Occupation President/CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) David Fleming Mailing Address 1214 Murfreesboro Pike City State Zip Code Nashville TN 37217-2411 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6 Transaction ID: 60317.C47851 Amount of Each Receipt this Period 300.00 Receipt
Name of Employer The Fleming Agency Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Garrett Fleming Mailing Address PO Box 608 City Albany State GA Zip Code 31702-0608 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6 Transaction ID: 60317.C47840 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Fleming Insurance Agency Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Robert Cleve Folger Mailing Address 140 Preston Executive Dr City Cary State NC Zip Code 27513-8488 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 Transaction ID: 60220.C47536 Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer TriSure Corporation Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Robert Cleve Folger Mailing Address 140 Preston Executive Dr City Cary State NC Zip Code 27513-8488 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6 Transaction ID: 60220.C47691 Amount of Each Receipt this Period 10.00 Receipt
Name of Employer TriSure Corporation Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1010.00		

SUBTOTAL of Receipts This Page (optional)	▶	1260.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Michael Funkhouser Mailing Address PO Box 429 City State Zip Code Woodstock VA 22664-0429 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6 Transaction ID: 60317.C47860 Amount of Each Receipt this Period 200.00 Receipt
Name of Employer Occupation Haun Magruder, Inc. Insurance Agent Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		

B. Full Name (Last, First, Middle Initial) Jackie Gould Mailing Address 1750 E Golf Rd City State Zip Code Schaumburg IL 60173-5835 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47661 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Occupation Assurance Agency Ltd Chief Operating Officer Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Vaughn Graham Mailing Address 2738 E 51st St #400 City State Zip Code Tulsa OK 74105 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Transaction ID: 60220.C47447 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Occupation Rich & Cartrill, Inc. Vice President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address 810 Tara Plz

City State Zip Code
Papillion NE 68046-2044

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

Name of Employer Occupation
Greco Insurance Agency President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C48048

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Johnny Griffin

Mailing Address 414 N Kentucky St

City State Zip Code
Kingston TN 37763

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

Name of Employer Occupation
Griffin Insurance Agency, Inc. Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47853

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 416 Centennial Ave

City State Zip Code
Cranford NJ 07016-3428

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

Name of Employer Occupation
ODonnell Agency, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47877

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Mark J Hagan

Mailing Address PO Box 307

City Elmira State NY Zip Code 14902-0307

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

Name of Employer Perry & Carroll, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47887

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address PO Box 9375

City Greensboro State NC Zip Code 27429-0375

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

Name of Employer Senn, Dunn, Marsh & Roland, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47540

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
James Harrill CPCU

Mailing Address 221 W 11th St

City Charlotte State NC Zip Code 28202-1715

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

Name of Employer Martin & Harrill, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47541

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address PO Box 462

City Richmond State VA Zip Code 23218-0462

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

Name of Employer VBA Management Services Incorp Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 7 / 2 0 0 6

Transaction ID: 60317.C47998

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Charlotte Hicks

Mailing Address PO Box 2300

City Wilmington State NC Zip Code 28402-2300

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

Name of Employer Glasgow Hicks Company Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 6 / 2 0 0 6

Transaction ID: 60220.C47475

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 2300

City Wilmington State NC Zip Code 28402-2300

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

Name of Employer Glasgow Hicks Company Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 0 / 2 0 0 6

Transaction ID: 60220.C47696

Amount of Each Receipt this Period
10.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **760.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Bruce Hill

Mailing Address PO Box 763

City Millburn State NJ Zip Code 07041-0763

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

Name of Employer R. Bruce Hill Agency, Ltd. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47878

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 4407 N Division St

City Spokane State WA Zip Code 99207-1613

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

Name of Employer Dan Hoffman Insurance Agency Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2006

Transaction ID: 60220.C47655

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
William Hofmann III, CPCU,

Mailing Address 258 Blanchard Rd

City Belmont State MA Zip Code 02478-4005

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

Name of Employer Provider Insurance Group, Inc. Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 01 / 2006

Transaction ID: 60220.C47441

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
William Hooker

Mailing Address PO Box 289

City State Zip Code
Dwight IL 60420-0289

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

Name of Employer Occupation
William J Hooker Ins Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 6

Transaction ID: 60317.C48005

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Paul Hoover III, CPCU

Mailing Address 3741 Benson Dr

City State Zip Code
Raleigh NC 27609-7324

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

Name of Employer Occupation
Durfey-Hoover-Bowden Ins Agency Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60220.C47547

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Charlie B Hoover, ., JR

Mailing Address PO Box 17867

City State Zip Code
Raleigh NC 27619-7867

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

Name of Employer Occupation
Moore & Johnson Agency, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60220.C47545

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Charlie B Hoover, Jr

Mailing Address PO Box 17867

City Raleigh State NC Zip Code 27619-7867

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

Name of Employer Moore & Johnson Agency, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: 60220.C47698

Amount of Each Receipt this Period
10.00

Receipt

B. Full Name (Last, First, Middle Initial)
Kay Howland

Mailing Address 2046 E Murray-Holladay Rd Ste 108

City Holladay State UT Zip Code 84117

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

Name of Employer Granite Insurance Group Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47902

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Joe Hunt Jr

Mailing Address PO Box 109

City Shelbyville State TN Zip Code 37162

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

Name of Employer H.B. Cowan & Co. Occupation General Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60220.C47831

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	510.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. Joe Hunt ., JR		Date of Receipt MM / DD / YYYY 02 / 16 / 2006
Mailing Address PO Box 109		Transaction ID: 60220.C47830
City Shelbyville	State TN	Zip Code 37162
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer H.B. Cowan & Co.	Occupation General Partner	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Tommy Huval		Date of Receipt MM / DD / YYYY 02 / 21 / 2006
Mailing Address PO Box 81248		Transaction ID: 60317.C47873
City Lafayette	State LA	Zip Code 70598-1248
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Huval Companies	Occupation Insurance Agent	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Jackie Ireland ., JR		Date of Receipt MM / DD / YYYY 02 / 07 / 2006
Mailing Address PO Box 12825		Transaction ID: 60220.C47549
City Raleigh	State NC	Zip Code 27605-2825
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Anders, Ireland, Marshall, Inc	Occupation Vice President	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Clay Jackson

Mailing Address 4400 Harding Rd Ste 400

City Nashville State TN Zip Code 37205

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

Name of Employer BB&T - Cooper, Love, Jackson.
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2006

Transaction ID: 60220.C47645

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Michael Johnson

Mailing Address PO Box 422

City Mapleton State MN Zip Code 56065-0422

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

Name of Employer M & M Insurance Agency of Mapl
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C48025

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 4000 Park Rd

City Charlotte State NC Zip Code 28209-2274

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

Name of Employer Edwards, Chuch & Muse, Inc.
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C47981

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Eric Kingdon

Mailing Address 2063 E 3900 S Ste 100

City State Zip Code
Salt Lake City UT 84124-1764

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

Name of Employer Trustco, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47903

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Alan Kinney .. JR

Mailing Address PO Box 187

City State Zip Code
South Hero VT 05486-0187

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

Name of Employer Kinney Insurance Agency Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C48000

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Joseph Klutz, . Cpcu, JR

Mailing Address PO Box 370

City State Zip Code
Albemarle NC 28002-0370

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

Name of Employer Albemarle Insurance Agency, In Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47553

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 78
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Aubie Knight ., JR

Mailing Address PO Box 48386

City Atlanta State GA Zip Code 30362-1386

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

Name of Employer Ind Ins Agents of Georgia Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 7 / 2 0 0 6

Transaction ID: 60317.C47968

Amount of Each Receipt this Period
 300.00

Receipt

B. Full Name (Last, First, Middle Initial)
Bryan Kouri

Mailing Address PO Box 89328

City Sioux Falls State SD Zip Code 57109-9328

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

Name of Employer Kouri Insurance Agency Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 2 7 / 2 0 0 6

Transaction ID: 60317.C47995

Amount of Each Receipt this Period
 250.00

Receipt

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

Mailing Address PO Box 1610

City Waukesha State WI Zip Code 53187-1610

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

Name of Employer R & R Insurance Services, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 2 / 1 3 / 2 0 0 6

Transaction ID: 60220.C47785

Amount of Each Receipt this Period
 250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. Kurt Kronenfeld		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address PO Box 9375		Transaction ID: 60220.C47556
City Greensboro	State NC	Zip Code 27429-0375
Amount of Each Receipt this Period 250.00		Receipt
FEC ID number of contributing federal political committee. C		
Name of Employer Senn, Dunn, Marsh & Roland, LL	Occupation Account Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Richard Lange		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6
Mailing Address PO Box 469 613-27 Huron Street		Transaction ID: 60317.C48014
City South Haven	State MI	Zip Code 49090-0469
Amount of Each Receipt this Period 250.00		Receipt
FEC ID number of contributing federal political committee. C		
Name of Employer South Haven Insurance Services	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Barry Lipparelli		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 6
Mailing Address 517 Idaho St		Transaction ID: 60220.C47816
City Elko	State NV	Zip Code 89801-3756
Amount of Each Receipt this Period 250.00		Receipt
FEC ID number of contributing federal political committee. C		
Name of Employer Lipparelli & Assocs Inc	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Cindy Lirette

Mailing Address PO Box 2868

City Houma State LA Zip Code 70361-2868

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

Name of Employer USI Gulf Coast, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 01 / 2006

Transaction ID: 60220.C47438

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jeffrey Little

Mailing Address 4000 Park Rd

City Charlotte State NC Zip Code 28209-2274

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

Name of Employer Edwards, Chuch & Muse, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C47982

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 5 Langholm Ct

City Jamestown State NC Zip Code 27282-8445

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

Name of Employer CRC Insurance Services Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C47983

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. Kirke Machon		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address 838 Busse Hwy		Transaction ID: 60317.C48006	
City State Zip Code Park Ridge IL 60068-2302	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Machon & Machon, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. J. Rives Manning, JR		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6	
Mailing Address 737 Franklin St		Transaction ID: 60220.C47560	
City State Zip Code Roanoke Rapids NC 27870-2515	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer McCoy-Hackney Insurance Agency	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00		

Full Name (Last, First, Middle Initial) C. J. Rives Manning, JR		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6	
Mailing Address 737 Franklin St		Transaction ID: 60220.C47561	
City State Zip Code Roanoke Rapids NC 27870-2515	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer McCoy-Hackney Insurance Agency	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address PO Box 270

City State Zip Code
Rice Lake WI 54868-0270

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

Name of Employer Marsh Agency, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47905

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
J. Andrew Martin

Mailing Address 221 W 11th St

City State Zip Code
Charlotte NC 28202-1715

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

Name of Employer Martin & Harrill, Inc. Occupation Secretary/Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47564

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 919 Kildaire Farm Rd

City State Zip Code
Cary NC 27511-3935

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

Name of Employer Insurance Professionals, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2006

Transaction ID: 60220.C47480

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Jeanne Mason

Mailing Address PO Box 750

City State Zip Code
Intervale NH 03845-0750

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

Name of Employer Occupation
M&M Assurance Group, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 0 6

Transaction ID: 60317.C47944

Amount of Each Receipt this Period
400.00

Receipt

B. Full Name (Last, First, Middle Initial)
T. Gray McCaskill

Mailing Address PO Box 9375

City State Zip Code
Greensboro NC 27429-0375

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

Name of Employer Occupation
Senn, Dunn, Marsh & Roland, LL Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60220.C47568

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 564 Ashbury Cv

City State Zip Code
Cordova TN 38018-7664

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

Name of Employer Occupation
Memphis Insurance Group Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 0 6

Transaction ID: 60220.C47647

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	950.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address PO Box 1789

City Pinehurst State NC Zip Code 28370-1789

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

Name of Employer Pinehurst Insurance Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2006

Transaction ID: 60320.C48244

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Robert McVay

Mailing Address PO Box 1789

City Pinehurst State NC Zip Code 28370-1789

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

Name of Employer Pinehurst Insurance Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: 60320.C48245

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address PO BOX 550

City Greenville State RI Zip Code 02828

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

Name of Employer Apple Valley Agency, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2006

Transaction ID: 60220.C47644

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	510.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Richard Merritt

Mailing Address PO Box 2786

City State Zip Code
Spokane WA 99220-2786

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

Name of Employer Jones & Mitchell Occupation Secretary/Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 9 / 2 0 0 6

Transaction ID: 60220.C47656

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
James Messec

Mailing Address 2155 Louisiana Blvd NE

City State Zip Code
Albuquerque NM 87110-5485

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

Name of Employer Western E & O Brokers, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47879

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address PO Box 3025

City State Zip Code
Mankato MN 56002-3025

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

Name of Employer Nesbit Agencies, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 6

Transaction ID: 60317.C47933

Amount of Each Receipt this Period
251.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1751.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Norma Milne		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address PO Box 6360		Transaction ID: 60317.C48034	
City Manchester	State NH	Amount of Each Receipt this Period 250.00	
Zip Code 03108-6360		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer USI New England	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Jeffrey Mohr		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6	
Mailing Address PO Box 15811		Transaction ID: 60220.C47439	
City Baton Rouge	State LA	Amount of Each Receipt this Period 500.00	
Zip Code 70895-5811		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Lewis Mohr Real Estate and Ins	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) George Morgan ., JR		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6	
Mailing Address PO Box 5099		Transaction ID: 60220.C47574	
City Winston Salem	State NC	Amount of Each Receipt this Period 250.00	
Zip Code 27113-5099		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer The Pheonix Company	Occupation Insurance Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Debra Mozingo

Mailing Address 921 S McPherson Church Rd

City Fayetteville State NC Zip Code 28303-5368

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

Name of Employer Independent Insurance Group, I Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47578

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Debra Mozingo

Mailing Address 921 S McPherson Church Rd

City Fayetteville State NC Zip Code 28303-5368

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

Name of Employer Independent Insurance Group, I Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: 60220.C47712

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address PO Box 12457

City Charlotte State NC Zip Code 28220-2457

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

Name of Employer Edwards, Chuch & Muse, Inc. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C47985

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **760.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address PO Box 2467

City State Zip Code
Oshkosh WI 54903-2467

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

Name of Employer Occupation
The Monroe Agency Inc Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 01 / 2006

Transaction ID: 60220.C47456

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 9

City State Zip Code
Longview WA 98632-7009

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

Name of Employer Occupation
Bratrud Middleton Insurance - Longview Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2006

Transaction ID: 60220.C47657

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 840

City State Zip Code
Union City TN 38281-0840

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

Name of Employer Occupation
Westan Group, Inc. dba Union City Ins Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2006

Transaction ID: 60220.C47648

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Glen Phillips

Mailing Address 11351 Random Hills Rd

City State Zip Code
Fairfax VA 22030-6081

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

Name of Employer Long & Foster Insurance Agency
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2006

Transaction ID: 60220.C47652

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 715 5th Ave

City State Zip Code
Grinnell IA 50112

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

Name of Employer Ramsey-Weeks, Inc.
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C48043

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 132 E Main St

City State Zip Code
Waverly TN 37185-2143

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

Name of Employer Porch-Stribling-Webb Insurance
Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2006

Transaction ID: 60220.C47646

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Benjamin Powers, SR

Mailing Address PO Box 3868

City Bristol State TN Zip Code 37625-3868

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

Name of Employer Burke, Powers & Harty, Inc.
Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 1 3 / 2 0 0 6

Transaction ID: 60220.C47777

Amount of Each Receipt this Period
 250.00

Receipt

B. Full Name (Last, First, Middle Initial)
B. Rush Powers, Jr, JR

Mailing Address PO Box 3868

City Bristol State TN Zip Code 37625-3868

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

Name of Employer Burke, Powers & Harty, Inc.
Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 1 3 / 2 0 0 6

Transaction ID: 60220.C47778

Amount of Each Receipt this Period
 500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Luke Praxmarer CPCU

Mailing Address 1699 Wall St Ste 506

City Mt Prospect State IL Zip Code 60056-5787

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

Name of Employer Corkill Ins Agcy Inc
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 0 9 / 2 0 0 6

Transaction ID: 60220.C47638

Amount of Each Receipt this Period
 1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) R David Priest Mailing Address PO Box 6388 City Richmond State VA Zip Code 23230-0388 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47653 Amount of Each Receipt this Period 500.00 Receipt
Name of Employer Virginia Commonwealth Corporation Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00		

B. Full Name (Last, First, Middle Initial) Cruger Ragland .. JR Mailing Address PO Box 1629 City Kilmarnock State VA Zip Code 22482-1629 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6 Transaction ID: 60317.C47863 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Hubbard Insurance Agency, Inc Occupation Secretary/Treasurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Michael Reed Mailing Address PO Box 138 City Wenatchee State WA Zip Code 98807-0138 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47658 Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer Mitchell Reed & Associates, In Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Christie Reeves

Mailing Address PO Box 2248

City State Zip Code
Brentwood TN 37024-2248

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

Name of Employer Occupation
Gale Smith & Company, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47856

Amount of Each Receipt this Period
300.00

Receipt

B. Full Name (Last, First, Middle Initial)
Ron Rensink

Mailing Address PO Box 190
221 Park St

City State Zip Code
Sheldon IA 51201-0190

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

Name of Employer Occupation
Perspective Insurance Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47872

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 9375

City State Zip Code
Greensboro NC 27429-0375

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

Name of Employer Occupation
Senn, Dunn, Marsh & Roland, LL Account Executive

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60220.C47585

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Daniel Riley Mailing Address 7500 Flying Cloud Dr City State Zip Code Eden Prairie MN 55344-3758 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6 Transaction ID: 60317.C48028 Amount of Each Receipt this Period 2000.00 Receipt
Name of Employer Occupation Minnesota Independent Insuranc State Executive Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2040.00		

B. Full Name (Last, First, Middle Initial) Douglas Robinson ., JR Mailing Address PO Box 397 City State Zip Code Morton IL 61550-0397 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47639 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Occupation Heiser Insurance Agency Inc. Insurance Agent Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

C. Full Name (Last, First, Middle Initial) James Robinson CIC Mailing Address PO Box 177 City State Zip Code New Bern NC 28563-0177 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 Transaction ID: 60220.C47586 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Occupation Robinson & Stith Insurance President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
James Robinson CIC

Mailing Address PO Box 177

City State Zip Code
New Bern NC 28563-0177

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

Name of Employer: Robinson & Stith Insurance
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
02 / 10 / 2006

Transaction ID: 60220.C47725

Amount of Each Receipt this Period
10.00

Receipt

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

Mailing Address 44 Sturges Ave

City State Zip Code
Mansfield OH 44902-1912

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

Name of Employer: Roby, Foster, Miller, Earlick, Inc.
Occupation: Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60220.C47820

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 9008

City State Zip Code
Saint Paul MN 55109-0008

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

Name of Employer: Assured Protection, Inc.
Occupation: Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C48046

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	510.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Jim Rogers Mailing Address 2001 6th Ave City State Zip Code Seattle WA 98121 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47659 Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer: Rogers & Norman, Inc. Occupation: Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Larry Roland Mailing Address PO Box 9375 City State Zip Code Greensboro NC 27429-0375 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 Transaction ID: 60220.C47587 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer: Senn, Dunn, Marsh & Roland, LL Occupation: President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Paul Roth Mailing Address PO Box 31 City State Zip Code Oxnard CA 93032-0031 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47631 Amount of Each Receipt this Period 200.00 Receipt
Name of Employer: Laubacher Insurance Agency Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		

SUBTOTAL of Receipts This Page (optional)	▶	1450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) William Ryan Mailing Address PO Box 649 City Maroa State IL Zip Code 61756-0649 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6 Transaction ID: 60317.C48007 Amount of Each Receipt this Period 500.00 Receipt
Name of Employer Stoutenborough Ins Agcy Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

B. Full Name (Last, First, Middle Initial) Robert Salmon ., JR Mailing Address PO Box 13941 Research Triangle Park City Durham State NC Zip Code 27709-3941 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Transaction ID: 60220.C47486 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer BB&T/Asura Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Gary Scalzo Mailing Address PO Box 816 City New Hartford State NY Zip Code 13413-0816 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6 Transaction ID: 60317.C47892 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Scalzo, Zogby & Wittig In-c. Occupation Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Clare Schachter Mailing Address PO Box 1576 City State Zip Code Glenwood Springs CO 81602-1576 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47632 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Occupation Neil Garing Agency Inc Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Andrew Schumacher Mailing Address PO Box 10037 City State Zip Code Green Bay WI 54307-0037 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Transaction ID: 60220.C47457 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Occupation Johnson Insurance Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Dan Sergi Mailing Address 311 Kautz Rd City State Zip Code Saint Charles IL 60174-5304 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47640 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Occupation Wine Serge & Co LLC Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Pamela Sessoms

Mailing Address PO Box 9375

City Greensboro State NC Zip Code 27429-0375

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

Name of Employer Senn, Dunn, Marsh & Roland, LL
Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47588

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 309

City Charlotte State MI Zip Code 48813-0309

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

Name of Employer Russell & Schrader Ins Agency Inc
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C48018

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 1740 Century Cir NE

City Atlanta State GA Zip Code 30345-3028

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

Name of Employer Siegel Insurance, Inc.
Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47868

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Susan Siegel Mailing Address PO Box 511 City Concord State NH Zip Code 03302-0511 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6 Transaction ID: 60317.C47946 Amount of Each Receipt this Period 200.00 Receipt
Name of Employer: The Rowley Agency, Inc. Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		

B. Full Name (Last, First, Middle Initial) Bradford Smith Mailing Address PO Box 382370 City Germantown State TN Zip Code 38183-2370 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47649 Amount of Each Receipt this Period 500.00 Receipt
Name of Employer: Cecil Smith Insurance Agency Occupation: President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00		

C. Full Name (Last, First, Middle Initial) Martin Smith Mailing Address PO Box 648 City Rochester State IN Zip Code 46975-0648 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 6 Transaction ID: 60220.C47751 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer: Smith Sawyer & Smith, Inc Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Roger Smith Mailing Address 380 Carriage House Dr Ste B City State Zip Code Jackson TN 38305-2221 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6 Transaction ID: 60317.C47854 Amount of Each Receipt this Period 300.00 Receipt
Name of Employer Occupation Thompson & Smith, LLC Insurance Agent Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Ronald Smith Mailing Address 124 E 8th St City State Zip Code Rochester IN 46975-1508 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 6 Transaction ID: 60220.C47750 Amount of Each Receipt this Period 500.00 Receipt
Name of Employer Occupation Smith Sawyer & Smith, Inc Owner Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 550.00		

C. Full Name (Last, First, Middle Initial) Clifton Sneedn ., JR Mailing Address PO Box 469 City State Zip Code Brevard NC 28712-0469 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 Transaction ID: 60220.C47595 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer Occupation Sneedn, Melton & Associates, Inc President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address PO Box 698
694 Portsmouth Avenue

City Greenland State NH Zip Code 03840-0698

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

Name of Employer HUB International New England, LLC Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 27 / 2006

Transaction ID: 60317.C48035

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Alex Soto

Mailing Address 2909 Coconut Grove Dr

City Coral Gables State FL Zip Code 33134-6802

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

Name of Employer InSource, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47867

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 320 College Ave

City Ashland State OH Zip Code 44805

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

Name of Employer Spreng-Smith Agency, Inc. Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60220.C47821

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. James Stein CPCU		Date of Receipt MM / DD / YYYY 02 / 16 / 2006
Mailing Address PO Box 603		Transaction ID: 60220.C47813
City Lindstrom	State MN	Zip Code 55045-0603
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Stein Agency, Inc.	Occupation Insurance Agent	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. William Stiglitz, III		Date of Receipt MM / DD / YYYY 02 / 01 / 2006
Mailing Address 7704 Circle Crest Road		Transaction ID: 60220.C47437
City Louisville	State KY	Zip Code 40241
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Hyland Block & Hyland	Occupation Vice President	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1020.00	

Full Name (Last, First, Middle Initial) C. Richard Stolp		Date of Receipt MM / DD / YYYY 02 / 16 / 2006
Mailing Address PO Box 998		Transaction ID: 60220.C47828
City Pierre	State SD	Zip Code 57501-0998
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer BankWest Insurance Agency	Occupation Insurance Agent	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address 400 W Main St Ste 207

City State Zip Code
Morristown TN 37814-4691

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

Name of Employer Occupation
Strate Insurance Group Inc Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47855

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Neal Sullivan

Mailing Address PO Box 827

City State Zip Code
Mahopac NY 10541-0827

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

Name of Employer Occupation
Sullivan Financial Group, Inc. Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47895

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 76

City State Zip Code
East Islip NY 11730-0076

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

Name of Employer Occupation
James F. Sutton Agency Lt-d. President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47896

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address 1709 Crestwood Drive

City State Zip Code
Alexandria VA 22302

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

Name of Employer IABA, Inc. Occupation Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47899

Amount of Each Receipt this Period
900.00

Receipt

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

Mailing Address 2555 7th Ave E

City State Zip Code
Saint Paul MN 55109-3011

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

Name of Employer Gary Insurancenter Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
MM / DD / YYYY
02 / 16 / 2006

Transaction ID: 60220.C47814

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address PO Box 9375

City State Zip Code
Greensboro NC 27429-0375

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

Name of Employer Senn, Dunn, Marsh & Roland, LL Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47598

Amount of Each Receipt this Period
200.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) Timothy Templeton Mailing Address PO Box 9375 City Greensboro State NC Zip Code 27429-0375 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 Transaction ID: 60220.C47599 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer: Senn, Dunn, Marsh & Roland, LL Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Mary Tenuta Mailing Address PO Box 7126 City Wilmington State NC Zip Code 28406-7126 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6 Transaction ID: 60317.C48040 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer: Azalea Insurance Services, Inc Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Busch Thoma Mailing Address 210 NE Atlantic St City Tullahoma State TN Zip Code 37388-3575 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47650 Amount of Each Receipt this Period 500.00 Receipt
Name of Employer: E. B. Thoma & Son Agency, Inc. Occupation: Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address PO Box 710

City State Zip Code
Kingwood WV 26537-0710

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

Name of Employer Insurance Centers, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 7 / 2 0 0 6

Transaction ID: 60317.C48001

Amount of Each Receipt this Period
350.00

Receipt

B. Full Name (Last, First, Middle Initial)
Samuel Thompson, III

Mailing Address PO Box 12457

City State Zip Code
Charlotte NC 28220-2457

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

Name of Employer Edwards, Chuch & Muse, In-c. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 7 / 2 0 0 6

Transaction ID: 60317.C47992

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 200 N 600 E

City State Zip Code
Roosevelt UT 84066

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

Name of Employer Service Insurance Agency, Inc. Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47904

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	850.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 64 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial) R. David Trowbridge Mailing Address 600 North 4th Street City State Zip Code Mount Vernon WA 98273 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 6 Transaction ID: 60220.C47660 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer: Cornerstone Insurance Services, Inc. Occupation: President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) Thomas Turner Mailing Address PO Box 12457 City State Zip Code Charlotte NC 28220 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 6 Transaction ID: 60317.C47993 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer: Edwards, Chuch & Muse, Inc. Occupation: Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Boris Walker CPCU, CIC Mailing Address PO Box 9 City State Zip Code Statesville NC 28687-0009 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 Transaction ID: 60220.C47496 Amount of Each Receipt this Period 250.00 Receipt
Name of Employer: Walker Robinson Clark Occupation: President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 65 / 78
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
C. Timothy Ward CPCU, CIC

Mailing Address PO Box 9375

City Greensboro State NC Zip Code 27429-0375

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

Name of Employer Senn, Dunn, Marsh & Roland, LL
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	0	6

Transaction ID: 60220.C47604

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Thomas Welch CPCU, CIC

Mailing Address PO Box 221705

City Chantilly State VA Zip Code 20153-1705

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

Name of Employer Welch Graham & Ogden Insurance
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	9	/	2	0	0	6

Transaction ID: 60220.C47654

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Robert Wells CIC

Mailing Address PO Box 1486

City Kitty Hawk State NC Zip Code 27949-1486

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

Name of Employer Southern Insurance Agency, Inc
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	7	/	2	0	0	6

Transaction ID: 60317.C48041

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

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

Mailing Address 16865 US Highway 17

City State Zip Code
Hampstead NC 28443-7116

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

Name of Employer SFI Group dba Steadfast Ins Agency
Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 06 / 2006

Transaction ID: 60220.C47499

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
William White ., JR

Mailing Address PO Box 1310

City State Zip Code
Black Mountain NC 28711-1310

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

Name of Employer White Insurance Agency, Inc.
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47606

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
J. Fletcher Willey ., JR

Mailing Address PO Box 848

City State Zip Code
Nags Head NC 27959-0848

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

Name of Employer J. Fletcher Willey Agency Inc
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47608

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
George Wilson, III

Mailing Address 1635 Greenview Dr SW

City State Zip Code
Rochester MN 55902-4215

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

Name of Employer Heartman Insurance Occupation Owner/Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 6

Transaction ID: 60317.C47842

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Michael Wojcik

Mailing Address 10320 Orlando Parkway

City State Zip Code
Orland Park IL 60467

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

Name of Employer Horton Ins Agcy Inc Occupation Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 3 / 2 0 0 6

Transaction ID: 60317.C47920

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address PO Box 99868

City State Zip Code
Lakewood WA 98499

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

Name of Employer Fournier Group, Lakewood Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 6

Transaction ID: 60220.C47783

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Full Name (Last, First, Middle Initial)
Eugene Woodbury

Mailing Address 1111 Military Cutoff Road - Suite

City State Zip Code
Wilmington NC 28405

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

Name of Employer Woodbury & Co Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 07 / 2006

Transaction ID: 60220.C47612

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Dean Young

Mailing Address PO Box 625

City State Zip Code
Bothell WA 98041-0625

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

Name of Employer Lovsted-Worthington LLC Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 13 / 2006

Transaction ID: 60220.C47784

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 816

City State Zip Code
New Hartford NY 13413-0816

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

Name of Employer Scalzo, Zogby & Wittig Inc Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2006

Transaction ID: 60317.C47898

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	72561.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. Aristotle International, Inc.		Transaction ID: 60317.E6348 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 205 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 293.25
City Washington State DC Zip Code 20003-	CREDIT CARD PROCESSING CHARGE	
Purpose of Disbursement CREDIT CARD PROCESSING CHARGE		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:		

Full Name (Last, First, Middle Initial) B. Aristotle International, Inc.		Transaction ID: 60317.E6349 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 205 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 616.00
City Washington State DC Zip Code 20003-	CREDIT CARD PROCESSING CHARGE	
Purpose of Disbursement CREDIT CARD PROCESSING CHARGE		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:		

Full Name (Last, First, Middle Initial) C. Aristotle International, Inc.		Transaction ID: 60317.E6350 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6
Mailing Address 205 Pennsylvania Ave, SE		Amount of Each Disbursement this Period 527.75
City Washington State DC Zip Code 20003-	CREDIT CARD PROCESSING CHARGE	
Purpose of Disbursement CREDIT CARD PROCESSING CHARGE		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) ▶	1437.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 70 / 78

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 60317.E6351

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

476.51

CREDIT CARD PROCESSING CHARGE

SUBTOTAL of Disbursements This Page (optional)

476.51

TOTAL This Period (last page this line number only)

1913.51

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. Battle Born PAC		Transaction ID: 60317.E6318 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address P.O. Box 27972		Amount of Each Disbursement this Period 1000.00
City Las Vegas	State NV	
Zip Code 89126-		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PAC TO PAC	
State: District:		

Full Name (Last, First, Middle Initial) B. Brian Bilbray for Congress		Transaction ID: 60317.E6330 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 5703 Oberlin Dr Ste 101		Amount of Each Disbursement this Period 2000.00
City San Diego	State CA	
Zip Code 92121-1743		
Purpose of Disbursement		
Candidate Name BRIAN PHILLIP BILBRAY		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 SPECIAL ELECTI	
State: CA District: 49		

Full Name (Last, First, Middle Initial) C. People Who Support Bingaman		Transaction ID: 60317.E6333 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 110-B East Broad Street		Amount of Each Disbursement this Period 1000.00
City Falls Church	State VA	
Zip Code 22046-		
Purpose of Disbursement		
Candidate Name JEFF BINGAMAN		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY	
State: NM District: 00		

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

<p>A. Capuano for Congress Cmte.</p> <p>Full Name (Last, First, Middle Initial) Capuano for Congress Cmte.</p> <p>Mailing Address 38 Ivy Street SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement</p> <p>Candidate Name MICHAEL EVERETT CAPUANO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 08</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY</p>		<p>Transaction ID: 60317.E6334</p> <p>Date of Disbursement 02 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p>B. Crowley for Congress</p> <p>Full Name (Last, First, Middle Initial) Crowley for Congress</p> <p>Mailing Address 426 C Street NE</p> <p>City Washington State DC Zip Code 20002-</p> <p>Purpose of Disbursement</p> <p>Candidate Name JOSEPH CROWLEY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY</p>		<p>Transaction ID: 60317.E6331</p> <p>Date of Disbursement 02 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p>C. Artur Davis For Congress</p> <p>Full Name (Last, First, Middle Initial) Artur Davis For Congress</p> <p>Mailing Address 499 S Capitol St SW Ste 404</p> <p>City Washington State DC Zip Code 20003-4004</p> <p>Purpose of Disbursement</p> <p>Candidate Name ARTUR GENESTRE DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 07</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 GENERAL</p>		<p>Transaction ID: 60317.E6337</p> <p>Date of Disbursement 02 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 2500.00</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>4500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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 73 / 78

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

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. Artur Davis For Congress		Transaction ID: 60317.E6327 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 499 S Capitol St SW Ste 404		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20003-4004	Purpose of Disbursement <input type="checkbox"/> Category/Type		
Candidate Name ARTUR GENESTRE DAVIS		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AL District: 07		

Full Name (Last, First, Middle Initial) B. Artur Davis For Congress		Transaction ID: 60317.E6336 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 499 S Capitol St SW Ste 404		Amount of Each Disbursement this Period 2500.00	
City Washington State DC Zip Code 20003-4004	Purpose of Disbursement <input type="checkbox"/> Category/Type		
Candidate Name ARTUR GENESTRE DAVIS		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AL District: 07		

Full Name (Last, First, Middle Initial) C. Gerlach for Congress Cmte		Transaction ID: 60317.E6326 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address 911 Welsh Ayres Way		Amount of Each Disbursement this Period 2000.00	
City Downingtown State PA Zip Code 19335-1689	Purpose of Disbursement <input type="checkbox"/> Category/Type		
Candidate Name JIM GERLACH		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 GENERAL	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: PA District: 06		

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 74 / 78

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

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. House Conservatives Fund		Transaction ID: 60317.E6317 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address PO Box 19863		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22320-0863	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PAC TO PAC	

Full Name (Last, First, Middle Initial) B. Steny Hoyer for Congress		Transaction ID: 60317.E6323 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address 7905 Malcom Road Suite 102		Amount of Each Disbursement this Period 1000.00
City Clinton State MD Zip Code 20735-	Category/ Type	
Purpose of Disbursement		
Candidate Name STENY HAMILTON HOYER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY	

Full Name (Last, First, Middle Initial) C. Pete King for Congress Cmte.		Transaction ID: 60317.E6319 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address PO Box 1428		Amount of Each Disbursement this Period 1000.00
City Seaford State NY Zip Code 11783-	Category/ Type	
Purpose of Disbursement		
Candidate Name PETER KING		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

PAGE 75 / 78

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

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial) A. Longhorn PAC		Transaction ID: 60317.E6322 Date of Disbursement 02 / 21 / 2006	
Mailing Address 104 Hume Ave		Amount of Each Disbursement this Period 1000.00	
City Alexandria State VA Zip Code 22301-1015	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PAC TO PAC	Category/ Type

Full Name (Last, First, Middle Initial) B. Brad Miller for Congress		Transaction ID: 60317.E6324 Date of Disbursement 02 / 22 / 2006	
Mailing Address 499 S Capitol St SW Ste 604		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20003-4041	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY	Category/ Type

Full Name (Last, First, Middle Initial) C. Pryce for Congress		Transaction ID: 60317.E6321 Date of Disbursement 02 / 21 / 2006	
Mailing Address 145 E Rich St		Amount of Each Disbursement this Period 500.00	
City Columbus State OH Zip Code 43215-5240	Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 GENERAL	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 76 / 78

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents of America Political Action Committee (INSURPAC)

<p>A. Pryce for Congress</p> <p>Full Name (Last, First, Middle Initial) Pryce for Congress</p> <p>Mailing Address 145 E Rich St</p> <p>City Columbus State OH Zip Code 43215-5240</p> <p>Purpose of Disbursement</p> <p>Candidate Name DEBORAH D PRYCE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY</p>		<p>Transaction ID: 60317.E6320</p> <p>Date of Disbursement 02 / 21 / 2006</p> <p>Amount of Each Disbursement this Period 1500.00</p>
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<p>B. RNC Majority Fund</p> <p>Full Name (Last, First, Middle Initial) RNC Majority Fund</p> <p>Mailing Address 310 First Street SE</p> <p>City Washington State DC Zip Code 20003-</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PARTY CONTRIBU</p>		<p>Transaction ID: 60220.E6313</p> <p>Date of Disbursement 02 / 14 / 2006</p> <p>Amount of Each Disbursement this Period 15000.00</p>
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<p>C. Renzi for Congress</p> <p>Full Name (Last, First, Middle Initial) Renzi for Congress</p> <p>Mailing Address PO Box 2383</p> <p>City Prescott State AZ Zip Code 86302-2383</p> <p>Purpose of Disbursement</p> <p>Candidate Name RICHARD G RENZI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 GENERAL</p>		<p>Transaction ID: 60317.E6328</p> <p>Date of Disbursement 02 / 22 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>17500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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 77 / 78

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

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

NAME OF COMMITTEE (In Full)

Independent Insurance Agents of America Political Action Committee (INSURPAC)

A. Mike Ross for Congress Full Name (Last, First, Middle Initial) Mailing Address PO Box 360 City Prescott State AR Zip Code 71857-0360 Purpose of Disbursement Candidate Name MICHAEL A ROSS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 4 Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY		Transaction ID: 60317.E6332 Date of Disbursement 02 / 28 / 2006 Amount of Each Disbursement this Period 1000.00
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B. Friends of John Tanner Full Name (Last, First, Middle Initial) Mailing Address PO Box 1988 City Union State TN Zip Code 38261- Purpose of Disbursement Candidate Name JOHN S TANNER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08 Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PRIMARY		Transaction ID: 60317.E6335 Date of Disbursement 02 / 28 / 2006 Amount of Each Disbursement this Period 5000.00
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C. VOLPAC Full Name (Last, First, Middle Initial) Mailing Address 101 Constitution Ave NW Ste 800 City Washington State DC Zip Code 20001-2133 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ E2006 PAC TO PAC		Transaction ID: 60317.E6325 Date of Disbursement 02 / 22 / 2006 Amount of Each Disbursement this Period 5000.00
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SUBTOTAL of Disbursements This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 78 / 78

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents of America Political Action Committee (INSURPAC)

Full Name (Last, First, Middle Initial)

A. Weller for Congress

Mailing Address P.O. Box 2368

City Joliet State IL Zip Code 60434-

Purpose of Disbursement

Candidate Name
GERALD C JERRY WELLER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: IL District: 11

E2006 PRIMARY

Transaction ID: 60317.E6316

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

52500.00