

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 National Association of Insurance and Financial Advisors Political Action Comm

ADDRESS (number and street) 2901 Telestar Ct. Falls Church VA 22042 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00005249 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 05 / 01 / 2017 through 05 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Tassey, S., , Matthew, Type or Print Name of Treasurer

Signature of Treasurer Tassey, S., , Matthew [Electronically Filed] Date 06 / 20 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		804471.97
(b) Cash on Hand at Beginning of Reporting Period.....	707039.39	
(c) Total Receipts (from Line 19)	106588.51	370261.67
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	813627.90	1174733.64
7. Total Disbursements (from Line 31).....	58657.72	419763.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	754970.18	754970.18
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

National Association of Insurance and Financial Advisors Political Action Comm

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 01 / 2017 To: M M / D D / Y Y Y Y 05 / 31 / 2017

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	43226.91	110333.33
(ii) Unitemized	63361.60	259928.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	106588.51	370261.67
(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)	106588.51	370261.67
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	106588.51	370261.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	106588.51	370261.67

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	157.72	803.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	157.72	803.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	58500.00	418250.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	710.00
(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	710.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	58657.72	419763.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	58657.72	419763.46

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	106588.51	370261.67
34. Total Contribution Refunds (from Line 28(d))	0.00	710.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	106588.51	369551.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	157.72	803.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	157.72	803.46

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Frolicstein, David, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1910 Jeanette Ave
 City Saint Charles State IL Zip Code 60174-4667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Frolicstein Financial, Inc Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 01 / 2017
Transaction ID : 14925765
 Amount of Each Receipt this Period 300.00
 Memo Item

B. McCay, David, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 441 Carter Sims Rd
 City Bowling Green State KY Zip Code 42104-7884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) McCay & Associates, LLC. Occupation (for Individual) Agent/Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 01 / 2017
Transaction ID : 14925794
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Specht, Kenneth, P., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7606 28th Ave
 City Kenosha State WI Zip Code 53143-5659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) New York Life Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 201.00

Date of Receipt 05 / 03 / 2017
Transaction ID : 14925824
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Fuhrmann, Janelle, J., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 511 E Apple Creek Rd

City Appleton	State WI	Zip Code 54913-8494
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Thrivent Financial	Occupation (for Individual) Managing Partner
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2017

Transaction ID : 14925827

Amount of Each Receipt this Period
500.00

Memo Item

B. Chavez Geissler, Aprilyn, , Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6809 Pueblo Verde NE

City Albuquerque	State NM	Zip Code 87111
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Chavez Geissler Agency	Occupation (for Individual) AGENT
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2017

Transaction ID : 14925843

Amount of Each Receipt this Period
300.00

Memo Item

C. Chavez Geissler, Aprilyn, , Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6809 Pueblo Verde NE

City Albuquerque	State NM	Zip Code 87111
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Chavez Geissler Agency	Occupation (for Individual) AGENT
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2017

Transaction ID : 14925845

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Foster, Timothy, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 222 Minnetonka Ave. South
 City Wayzata State MN Zip Code 55391-1717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Partners Group Occupation (for Individual) SR. PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2017
Transaction ID : 14925853
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Welch, Brent, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 651 21st Street 25
 City Prairie Du Sac State WI Zip Code 53578-1032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Welshire Capital, LLC. Occupation (for Individual) Founder, Managing Partner, Wealth Ad
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 05 / 2017
Transaction ID : 14925867
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Lawrence, Daniel, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5553 Peters Drive
 City West Bend State WI Zip Code 53095-8301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Modern Woodmen of America Occupation (for Individual) Agency Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 05 / 05 / 2017
Transaction ID : 14925873
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1525.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Wilkinson, Ian, C., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 7096
 City Macon State GA Zip Code 31209-7096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wilkinson & Associates Occupation (for Individual) Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2017
Transaction ID : 14925889
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Nienhaus, Joseph, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address N65 W34599 Whittaker Rd
 City Oconomowoc State WI Zip Code 53066-5124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Woodbury Financial Occupation (for Individual) Regional Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 05 / 2017
Transaction ID : 14925896
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Heckert, Brian, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1341 Jefferson Dr
 City Nashville State IL Zip Code 62263-1320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Financial Solutions Midwest, LLC Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 08 / 2017
Transaction ID : 14925934
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Paterick, Scott, S, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Box 422

City Wisconsin Rapids	State WI	Zip Code 54494-3126
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) The Investors Choice	Occupation (for Individual) District Representative
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2017

Transaction ID : 14925984

Amount of Each Receipt this Period
400.00

Memo Item

B. Tassej, Matthew, S., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 Reggio Ave

City Old Orchard Beach	State ME	Zip Code 04064-2709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) E A Scribner Insurance Agency	Occupation (for Individual) AGENT
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14925990

Amount of Each Receipt this Period
105.00

Memo Item

C. Edwards, David, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 W. Granada Avenue

City Hershey	State PA	Zip Code 17033-1440
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) David M. Edwards & Associates Financia	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926009

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	555.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Bennett, Kent, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 280 Hollow Rd

City Muncy	State PA	Zip Code 17756-5789
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Kent A. Bennett & Associates, Inc.	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926011

Amount of Each Receipt this Period
87.50

Memo Item

B. Schwendeman, Mark, B., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 427 4th St

City Marietta	State OH	Zip Code 45750-2004
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) The Schwendeman Agency, Inc.	Occupation (for Individual) PRESIDENT\OWNER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926033

Amount of Each Receipt this Period
60.00

Memo Item

C. Lounds, Lawrence, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2477 Valley Oaks Circle

City Flint	State MI	Zip Code 48532-5405
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Security 1st Benefits Corporation	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926042

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	252.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Schleicher, Donald, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W7167 Glen Valley Dr

City Greenville	State WI	Zip Code 54942-8108
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Lifetime Retirement Planning, Inc.	Occupation (for Individual) President/Owner
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926046

Amount of Each Receipt this Period
45.00

Memo Item

B. Brown, Charles, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3632 Petersburg Rd.

City Burlington	State KY	Zip Code 41005-8776
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Charles Brown CLU & Company	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926051

Amount of Each Receipt this Period
75.00

Memo Item

C. Nelson, Robert, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14712 Shirley Street

City Omaha	State NE	Zip Code 68144-2144
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Nelson Murphy Insurance & Investments,	Occupation (for Individual) Managing Partner
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926076

Amount of Each Receipt this Period
210.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	330.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Phares, Brian, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1420 Hackberry Road

City North Platte	State NE	Zip Code 69101-6841
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Phares Financial Services	Occupation (for Individual) Vice President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14926085

Amount of Each Receipt this Period
60.00

Memo Item

B. Hansen, Karl, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2068 Cynthia Way

City Los Altos	State CA	Zip Code 94024-7274
-------------------	-------------	------------------------

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

Name of Employer (for Individual) The Vita Companies	Occupation (for Individual) Brokerage Consultant
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14926103

Amount of Each Receipt this Period
125.00

Memo Item

C. Nilmeier, Richard, D., Mr., Sr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3514 N. Callisch

City Fresno	State CA	Zip Code 93726-6721
----------------	-------------	------------------------

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

Name of Employer (for Individual) Nilmeier Financial & Insurance Service	Occupation (for Individual) President/Owner
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14926107

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Curtis, Jack, H., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1508 Morning Glory Cr.

City Tupelo	State MS	Zip Code 38801-8446
----------------	-------------	------------------------

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

Name of Employer (for Individual) Jack Curtis Agency	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926117

Amount of Each Receipt this Period
42.00

Memo Item

B. Johnson, Johnny, Jon, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3770 N Frandon Avenue

City Meridian	State ID	Zip Code 83646-4089
------------------	-------------	------------------------

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

Name of Employer (for Individual) Regence BlueShield of Idaho	Occupation (for Individual) Idaho Retention Manager
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926119

Amount of Each Receipt this Period
45.00

Memo Item

C. Nolimal, Frank, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 Vita Fresco Court

City Henderson	State NV	Zip Code 89011-3156
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Assurance Ltd	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926162

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	147.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Hamilton, Edwin, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4318 Council Circle

City Jackson	State MS	Zip Code 39206-5819
-----------------	-------------	------------------------

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

Name of Employer (for Individual) American General	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926189

Amount of Each Receipt this Period
42.00

Memo Item

B. Smith, Ray, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2810 N Crescent Dr.

City Stillwater	State OK	Zip Code 74075-2603
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Ray Smith Wealth Management	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926223

Amount of Each Receipt this Period
45.00

Memo Item

C. Scholz, Daniel, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1510 So. 183 Circle

City Omaha	State NE	Zip Code 68130
---------------	-------------	-------------------

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

Name of Employer (for Individual) Ameritas Financial Center	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2085.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926224

Amount of Each Receipt this Period
417.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	504.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Rake, Barry, K., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1004 Dawne Dr

City Williamsport	State PA	Zip Code 17701-9767
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Kent A. Bennett & Associates	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926227

Amount of Each Receipt this Period
50.00

Memo Item

B. Stimmel, Michael, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3210 Hwy 1 SW

City Iowa City	State IA	Zip Code 52240-8585
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Farm Bureau Financial Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926277

Amount of Each Receipt this Period
126.00

Memo Item

C. Holz, Bryon, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 Cindy Ln

City Brandon	State FL	Zip Code 33510-3905
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Bryon Holz & Associates	Occupation (for Individual) Independent Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926320

Amount of Each Receipt this Period
104.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	280.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Wimsatt, Randall, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4400 Hannon Dr.

City Farmington	State NM	Zip Code 87402-8718
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Randy Wimsatt Agency, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14926327

Amount of Each Receipt this Period
60.00

Memo Item

B. D'Addona, Vincent, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 341 Harbor Dr

City Lido Beach	State NY	Zip Code 11561-4906
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Strategies for Wealth	Occupation (for Individual) General Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
833.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14926360

Amount of Each Receipt this Period
208.33

Memo Item

C. Davidson, John, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1497 Rancho Ln

City Thousand Oaks	State CA	Zip Code 91362-2651
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Davidson Insurance & Financial Service	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14926373

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	373.33
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Massey, Douglas, B., Mr.,

Mailing Address P.O. Box 60707

City San Angelo	State TX	Zip Code 76906-0707
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Doug Massey Financial Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926391

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Massey, Douglas, B., Mr.,

Mailing Address P.O. Box 60707

City San Angelo	State TX	Zip Code 76906-0707
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Doug Massey Financial Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926392

Amount of Each Receipt this Period
140.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Irons, William, V., Mr.,

Mailing Address 150 Prospect Rd

City Wakefield	State RI	Zip Code 02879-7044
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Irons & Associates	Occupation (for Individual) President/Owner
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926393

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	282.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Henderson, Marcus, T., Mr., Sr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 Barrington Ct E
 City Franklin State TN Zip Code 37067-5003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Henderson Financial Group, Inc. Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926403
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Carter, Dee, K., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3207 Baumann Ave
 City Midland State TX Zip Code 79701-5515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carter Financial Group Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926435
 Amount of Each Receipt this Period 105.00
 Memo Item

C. Estler, Stephen, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2177 NE 63 St.
 City Fort Lauderdale State FL Zip Code 33308-1330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Estler Financial Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 834.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926465
 Amount of Each Receipt this Period 208.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	373.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Brown, Michael, O., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6512 NE 113th St
 City Edmond State OK Zip Code 73013-8351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MassMutual Financial Group Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926472
 Amount of Each Receipt this Period 84.00
 Memo Item

B. Dolinak, Steven, Thomas, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2241 Lyons Bend Dr
 City Knoxville State TN Zip Code 37919-8931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Capital Fin. Group, LLC Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926477
 Amount of Each Receipt this Period 84.00
 Memo Item

C. Clark, Thomas, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 - 39th Street
 City West Des Moines State IA Zip Code 50265-3931
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Compensation Designs, LLC Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926487
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	228.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Erstad, Byron, Hyatt, Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 S Nantucket Way
 City Boise State ID Zip Code 83706-5095
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erstad & Company Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926489
 Amount of Each Receipt this Period 90.00
 Memo Item

B. Kronish, Ben, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 205 W 89th St #2H
 City New York State NY Zip Code 10024-1829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kronish Associates Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926570
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Fortenberry, H., Larry, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 Northshore Pt
 City Madison State MS Zip Code 39110-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Executive Planning Group Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926577
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	245.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Mulqueen, Kevin, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 Silo Lane

City Middletown	State NY	Zip Code 10940-2603
--------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Registered Rep.
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926592

Amount of Each Receipt this Period
42.00

Memo Item

B. Miller, Robert, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 727 Smith Ridge Rd

City New Canaan	State CT	Zip Code 06840-3228
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Miller-Pomerantz	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926595

Amount of Each Receipt this Period
500.00

Memo Item

C. Fulton, Donald, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1269 Madison Lane

City Hockessin	State DE	Zip Code 19707-9418
-------------------	-------------	------------------------

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

Name of Employer (for Individual) George J. Weiner Associates, LLP.	Occupation (for Individual) Managing_Partner
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926600

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	617.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Kuehl, Lanny, N., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 202 N Homestead

City Garnavillo	State IA	Zip Code 52049-8099
--------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926640

Amount of Each Receipt this Period
60.00

Memo Item

B. Specht, Kenneth, P., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7606 28th Ave

City Kenosha	State WI	Zip Code 53143-5659
-----------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
243.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926674

Amount of Each Receipt this Period
42.00

Memo Item

C. Miller, Anthony, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4502 Hi-Line Dr

City Billings	State MT	Zip Code 59106-4703
------------------	-------------	------------------------

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

Name of Employer (for Individual) Retirement Solutions	Occupation (for Individual) Financial Advisor
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926691

Amount of Each Receipt this Period
84.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	186.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Telge, Gregory, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1655 North River Road
 City Manchester State NH Zip Code 03104-1645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926695
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Barnes, Mitchell, C., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8216 Limehouse Ln
 City Louisville State KY Zip Code 40220-3833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Wealth Management Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.60

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926707
 Amount of Each Receipt this Period 50.40
 Memo Item

C. Roach, Robert, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2390 Kensington Drive
 City Columbus State OH Zip Code 43221-3770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NMFN - Kemelgor Financial Group Occupation (for Individual) Wealth Management Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926715
 Amount of Each Receipt this Period 225.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	317.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Burry, Garry, S., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 Woodlake Dr
 City Louisville State KY Zip Code 40245-5121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Estate and Buisness Planning Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926724
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Kaltenbach, Terry, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1358 Ahlrich Ave
 City Encintas State CA Zip Code 92024-4029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kbach Associates Insurance Services Occupation (for Individual) President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926775
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Winkelhake, Larry, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 County Road C
 City West Bend State WI Zip Code 53095-8740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Principal Financial Group Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926790
 Amount of Each Receipt this Period 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	227.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Stack, Lawrence, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28630 Glenbrook Dr

City Farmington Hills	State MI	Zip Code 48331-2318
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) Michigan Financial	Occupation (for Individual) VP Financial Planning
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926820

Amount of Each Receipt this Period
125.00

Memo Item

B. Eddy, Robert, , Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 203 Autumn Oak Bnd

City Lafayette	State LA	Zip Code 70508-8004
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Prudential Financial DBA - Pinnacle Gr	Occupation (for Individual) Financial Planner
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926827

Amount of Each Receipt this Period
85.00

Memo Item

C. Hasse, George, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3728 Deer Flats St

City Las Vegas	State NV	Zip Code 89129-7042
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Prudential Financial	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926833

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Kaufmann, Randall, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 356 Equus Drive
 City Camp Hill State PA Zip Code 17011-8357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaufmann & Associates, LLC Occupation (for Individual) Special Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926841
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Dewald, Jack, P., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8930 Calumet Cove
 City Germantown State TN Zip Code 38138-8248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Agency Services Incorporated Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926852
 Amount of Each Receipt this Period 10.00
 Memo Item

C. Johns, John, C., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5141 Lilly Rd.
 City Hazlehurst State MS Zip Code 39083-9490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Southern Farm Bureau Life Insurance Occupation (for Individual) Agency_Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14926865
 Amount of Each Receipt this Period 210.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Rust, Daniel, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 W Arnold St

City Bozeman	State MT	Zip Code 59715-6129
-----------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14926905

Amount of Each Receipt this Period
75.00

Memo Item

B. Eckman, Wayne, Miles, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 W 2350 N

City Woods Cross	State UT	Zip Code 84087-1070
---------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14926908

Amount of Each Receipt this Period
42.00

Memo Item

C. Hagemann, Paul, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19800 SW Tile Flat Rd

City Beaverton	State OR	Zip Code 97007-8700
-------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14926915

Amount of Each Receipt this Period
68.75

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Robertson, Randy, T., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7816 Harvest Hill Ln
 City McKinney State TX Zip Code 75071-7649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Robertson-Wolfe Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14926936
 Amount of Each Receipt this Period
 65.00
 Memo Item

B. Ostrove, Mitchell, W., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 232 Norman Road
 City New Rochelle State NY Zip Code 10804-3114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ameritas Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14926952
 Amount of Each Receipt this Period
 84.00
 Memo Item

C. Koll, David, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1612 S. 152nd Street
 City Omaha State NE Zip Code 68144-5121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mutual of Omaha Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14926958
 Amount of Each Receipt this Period
 84.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	233.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Koppa, David, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1105 Via Bolzano

City Santa Barbara	State CA	Zip Code 93111-1053
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Cornerstone Insurance Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926977

Amount of Each Receipt this Period
55.50

Memo Item

B. Henderson, Sandra, E., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3565 Everglade Ave

City Clovis	State CA	Zip Code 93619-2011
----------------	-------------	------------------------

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

Name of Employer (for Individual) Plan Financial	Occupation (for Individual) Agent/Broker
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
268.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14926991

Amount of Each Receipt this Period
42.00

Memo Item

C. Martin, Leonard, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1045 Warwick Ave
Suite 104

City Warwick	State RI	Zip Code 02888-3657
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Leonard Martin & Associates Inc	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927035

Amount of Each Receipt this Period
84.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	181.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Isaac, C., David, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1705 Timber Valley Ct

City Kokomo	State IN	Zip Code 46902-5097
----------------	-------------	------------------------

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

Name of Employer (for Individual) David Isaac & Associates	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927094

Amount of Each Receipt this Period
100.00

Memo Item

B. Clark, Katharine, F., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 110 Cross Creek Circle

City Macon	State GA	Zip Code 31210-5701
---------------	-------------	------------------------

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

Name of Employer (for Individual) Peachtree Planning	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927107

Amount of Each Receipt this Period
50.00

Memo Item

C. Doty, Brenda, D., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 Topaz Lane

City Horseshoe Bend	State AR	Zip Code 72512-3818
------------------------	-------------	------------------------

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

Name of Employer (for Individual) The Doty Group, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927121

Amount of Each Receipt this Period
51.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	201.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. McNeely, Juli, Y., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address S764 Hanson Rd
 City Spencer State WI Zip Code 54479-9579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) McNeely Financial Services, Inc. Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 658.00

Date of Receipt **05 / 11 / 2017**
Transaction ID : 14927173
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Miller, Richard, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1214 Karr Ave.
 City Yakima State WA Zip Code 98902-5026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Financial Network Occupation (for Individual) Financial_Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **05 / 11 / 2017**
Transaction ID : 14927192
 Amount of Each Receipt this Period 87.50
 Memo Item

C. Flynn, Sherry, K., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 Road 5151
 City Bloomfield State NM Zip Code 87413-9700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Flynn Financial Services Occupation (for Individual) Investment Advisor Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt **05 / 11 / 2017**
Transaction ID : 14927208
 Amount of Each Receipt this Period 51.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	288.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Hiller, Michael, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W267 S7930 Stony Pt. Ct.

City Mukwonago	State WI	Zip Code 53149-9687
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Central Financial Services	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927278

Amount of Each Receipt this Period
42.00

Memo Item

B. Berg, Robert, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1405 Blackberry Lane

City Stevens Point	State WI	Zip Code 54481-9140
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Planning Concepts Inc.	Occupation (for Individual) Sales Representative
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927280

Amount of Each Receipt this Period
50.00

Memo Item

C. Gallacher, Kenneth, G., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1500 Rawhide

City Henderson	State NV	Zip Code 89002-8814
-------------------	-------------	------------------------

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

Name of Employer (for Individual) American National Insurance Company	Occupation (for Individual) Regional Director
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
201.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927291

Amount of Each Receipt this Period
50.40

Memo Item

SUBTOTAL of Receipts This Page (optional).....	142.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Denny, James, R., Mr., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8707 Standish Ln.
 City Richmond State VA Zip Code 23229-7922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Advisors, LLC Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927384
 Amount of Each Receipt this Period 112.50
 Memo Item

B. Haeuser, LeRoy, C., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12589 N. Wauwatosa Road
 City Mequon State WI Zip Code 53097-2713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LeRoy C. Haeuser Agency Occupation (for Individual) Agency_Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927419
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Grimes, Gregory, Lynn, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4604 Shale Oaks Ave.
 City Columbia State MO Zip Code 65203-8566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Financial Resource Group, LLC Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927459
 Amount of Each Receipt this Period 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Bell, Kevin, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 318 W Greyhound Pass

City Carmel	State IN	Zip Code 46032-7007
----------------	-------------	------------------------

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

Name of Employer (for Individual) Guardian	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14927475

Amount of Each Receipt this Period
125.00

Memo Item

B. Kane, Joseph, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12700 Park Central Dr.
Suite 1050

City Dallas	State TX	Zip Code 75251-1538
----------------	-------------	------------------------

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

Name of Employer (for Individual) Personal Economics Group	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14927483

Amount of Each Receipt this Period
42.00

Memo Item

C. Birdwell, William, Clay, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 213 Cherokee Rd.

City Nashville	State TN	Zip Code 37205-1817
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Baker Birdwell, LLC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14927485

Amount of Each Receipt this Period
56.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	223.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Dinsmore, James, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 Lehman Drive

City Cogan Station	State PA	Zip Code 17728-9228
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Liberty Mutual Insurance Co	Occupation (for Individual) Exec. Sales Rep.
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927534

Amount of Each Receipt this Period
50.00

Memo Item

B. Acuna, Sergio, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1656 Bob Murphy Drive

City El Paso	State TX	Zip Code 79936-5206
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Lincoln Financial Group	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927588

Amount of Each Receipt this Period
60.00

Memo Item

C. Duren, Daniel, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2348 Andrea Place

City Lincoln	State NE	Zip Code 68512-9415
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Benefit Management	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927636

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	152.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Marrazzo, Joseph, G., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 S. Arlington Ave.
 City Harrisburg State PA Zip Code 17109-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Marrazzo and Associates Financial Grou Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927674
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Knake, Casey, C., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2902 Mach I Dr.
 City Norfolk State NE Zip Code 68701-3238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Heritage Financial Services, LLC Occupation (for Individual) Investment Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927691
 Amount of Each Receipt this Period 84.00
 Memo Item

C. Lawrence, Daniel, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5553 Peters Drive
 City West Bend State WI Zip Code 53095-8301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Modern Woodmen of America Occupation (for Individual) Agency Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927693
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	204.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Milburn, Michael, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2332 Flagstaff Dr.
 City Longmont State CO Zip Code 80504-9282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mutual of Omaha Companies Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927727
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Gray, Michael, William, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 NW Honeysuckle
 City Corvallis State OR Zip Code 97330-3356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwest Financial Group, LLC Occupation (for Individual) Managing Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927769
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Corrente, Gregory, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3901 Clifford Drive
 City Metairie State LA Zip Code 70002-1808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corrente & Associates Occupation (for Individual) Agent/Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927790
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 137.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Eskew, Curtis, Lowell, Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1680 Keely Lane

City Sarasota	State FL	Zip Code 34232-3061
------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927809

Amount of Each Receipt this Period
84.00

Memo Item

B. Enders, Kap-Sun, C., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10620 Wahington Circle

City Anchorage	State AK	Zip Code 99515-2505
-------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927837

Amount of Each Receipt this Period
60.00

Memo Item

C. Johnson, Rodger, K., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 910 N. Houston

City Bullard	State TX	Zip Code 75757-5128
-----------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14927844

Amount of Each Receipt this Period
84.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	228.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Collins, Randy, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3241 Tudor Dr
 City Lexington State KY Zip Code 40503-3430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Financial Network Occupation (for Individual) ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14927858
 Amount of Each Receipt this Period
 50.40
 Memo Item

B. Grantham, Todd, G., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Montcrest Dr
 City Durham State NC Zip Code 27713-8136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Financial Network Occupation (for Individual) Financial Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2080.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14927876
 Amount of Each Receipt this Period
 416.00
 Memo Item

C. Goodrich, James, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1860 Beech
 City Mt. Pleasant State MI Zip Code 48858-1280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14927887
 Amount of Each Receipt this Period
 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	571.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Begneaud, Kenneth, T., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 324 Silverbell Pwky
 City Lafayette State LA Zip Code 70508-4130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Financial Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927894
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Frost, Donald, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 612 N Pageant Dr #A
 City Orange State CA Zip Code 92869-2572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Don Frost Insurance Agency, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927932
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Delp, Barry, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2616 Sheffield Dr
 City Davenport State IA Zip Code 52806-2619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ozark National Life Insurance Company Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927940
 Amount of Each Receipt this Period 51.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	138.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Blaylock, Eleanor, B., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9439 Gay Ln
 City Oil City State LA Zip Code 71061-9705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Burke & Burke Insurance Marketing, Inc Occupation (for Individual) Agency Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927944
 Amount of Each Receipt this Period 112.50
 Memo Item

B. Hampton, James, H., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 North Classen #201a
 City Oklahoma City State OK Zip Code 73118-3231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Birchall & Hampton Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927951
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Headley, Terry, K., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20704 Meadow Ridge Drive
 City Springfield State NE Zip Code 68059-7086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Headley Financial Group Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1280.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14927986
 Amount of Each Receipt this Period 320.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	482.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Bardin, James, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4226 Fairway Circle

City Tampa	State FL	Zip Code 33618-8640
---------------	-------------	------------------------

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

Name of Employer (for Individual) Principal	Occupation (for Individual) Financial Advisor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14927988

Amount of Each Receipt this Period
45.00

Memo Item

B. Kimmel, Richard, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6525 Bellaire Drive S

City Ft Worth	State TX	Zip Code 76132-1138
------------------	-------------	------------------------

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

Name of Employer (for Individual) Principal Financial Group	Occupation (for Individual) Regional Managing Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14927992

Amount of Each Receipt this Period
100.00

Memo Item

C. Dickey, Therese, M., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. Box 21078

City Billings	State MT	Zip Code 59104-1078
------------------	-------------	------------------------

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

Name of Employer (for Individual) PayneWest Insurance	Occupation (for Individual) Account Executive
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14927993

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	195.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Daigle, Gregory, P., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 117 Barton Terrace
 City Youngsville State LA Zip Code 70592-5741
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pinnacle Group Occupation (for Individual) Financial Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14928031
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Gartner, Lori, A., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3407 4th Ave.
 City Kearney State NE Zip Code 68845-2823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wells Fargo Advisors, LLC Occupation (for Individual) Associate Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14928033
 Amount of Each Receipt this Period
 42.00
 Memo Item

C. Laliberte, Lisa, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Grove St
 City Lewiston State ME Zip Code 04240-3425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Insurance Companies Occupation (for Individual) Lisa Laliberte
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14928077
 Amount of Each Receipt this Period
 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	242.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Brown, James, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6334 Deveron Drive

City Charlotte	State NC	Zip Code 28211-4612
-------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm	Occupation (for Individual) Owner/Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928122

Amount of Each Receipt this Period
42.00

Memo Item

B. Bell, Daniel, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. Box 1747

City Cleveland	State MS	Zip Code 38732-1747
-------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928165

Amount of Each Receipt this Period
50.00

Memo Item

C. Miller, Mark, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1630 Prairie Dunes Drive

City Collierville	State TN	Zip Code 38017-4158
----------------------	-------------	------------------------

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

Name of Employer (for Individual) UCL Financial Group	Occupation (for Individual) ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928209

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	134.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Brown, C., Robert, Mr., Sr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8675 Westcott Dr
 City Germantown State TN Zip Code 38138-7738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ameritas Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 768.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14928217
 Amount of Each Receipt this Period 132.00
 Memo Item

B. Boozer, Lane, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 Skylark Dr
 City Denton State TX Zip Code 76205-8008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Don Boozer & Assoc. Occupation (for Individual) Vice President - Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.50

Date of Receipt 05 / 11 / 2017
Transaction ID : 14928276
 Amount of Each Receipt this Period 62.50
 Memo Item

C. Roberts, Joseph, K., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7848 Creek View Dr
 City Lincoln State NE Zip Code 68516-3843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNICO Midlands Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14928343
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	239.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Olson, Mark, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 Stryker Ct

City Bridgewater	State NJ	Zip Code 08807-1639
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Horizon Wealth Strategies, LLC	Occupation (for Individual) Financial Planner
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928350

Amount of Each Receipt this Period
60.00

Memo Item

B. Silbernagel, James, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N2248 State Road 67

City Campbellsport	State WI	Zip Code 53010-2933
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) The Silbernagel Group Inc.	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928351

Amount of Each Receipt this Period
450.00

Memo Item

C. Murphy, Michael, G., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2041 S 88 St

City Omaha	State NE	Zip Code 68124-2111
---------------	-------------	------------------------

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

Name of Employer (for Individual) Nelson Murphy Insurance & Investments,	Occupation (for Individual) PARTNER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928483

Amount of Each Receipt this Period
84.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	594.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Toscano, Gregory, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24 Snelling Ave

City Duluth	State MN	Zip Code 55812-1158
----------------	-------------	------------------------

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

Name of Employer (for Individual) Johnson Insurance Consultants	Occupation (for Individual) ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14928490

Amount of Each Receipt this Period
105.00

Memo Item

B. Pierce, A., Duer, Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 Snuff Mill Road

City Wilmington	State DE	Zip Code 19807-1043
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Financial House	Occupation (for Individual) CLU, ChFC, AEP, CAP
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14928498

Amount of Each Receipt this Period
50.00

Memo Item

C. Wheeler, John, W., Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1075 Aster Ln

City West Chicago	State IL	Zip Code 60185-1750
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Water Tower Financial Partners, LLC	Occupation (for Individual) Executive Vice President
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
418.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14928515

Amount of Each Receipt this Period
104.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	259.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Young, Tallie, O., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6318 Falcon Crest Court

City Sachse	State TX	Zip Code 75048-3539
----------------	-------------	------------------------

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

Name of Employer (for Individual) Tallie O Young & Associates	Occupation (for Individual) Investment Advisor Representative
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928528

Amount of Each Receipt this Period
50.00

Memo Item

B. Robb, Jon, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 214 Atlantic Dr.

City Vernon Hills	State IL	Zip Code 60061-2029
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Farmers Insurance Group	Occupation (for Individual) District Manager
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928554

Amount of Each Receipt this Period
42.00

Memo Item

C. Owens, Roger, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 Landing Lane

City Elkton	State MD	Zip Code 21921-5204
----------------	-------------	------------------------

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

Name of Employer (for Individual) Rymark Financial Services	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928570

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	167.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Saunders, Michael, P., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4560 Ortega Blvd
 City Jacksonville State FL Zip Code 32210-6043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Saunders & Co. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14928600
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Saladino, Steven, P., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16507 Silverhill Dr
 City Tampa State FL Zip Code 33624-1214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Principal Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14928701
 Amount of Each Receipt this Period 210.00
 Memo Item

C. Schaeffer, Gregory, B., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3627 - 22nd St.
 City Kenosha State WI Zip Code 53144-1443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Schaeffer Financial Group LLC Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14928757
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 297.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Potter, Mary, H., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 Leland

City Waterloo	State IA	Zip Code 50701-1537
------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928824

Amount of Each Receipt this Period
45.00

Memo Item

B. Shalek, James, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1706 Candleberry Lane

City Yorkville	State IL	Zip Code 60560-5810
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Principal Financial Group	Occupation (for Individual) Senior Financial Representative
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928899

Amount of Each Receipt this Period
75.00

Memo Item

C. Russell, David, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8461 Eagle Preserve Way

City Sarasota	State FL	Zip Code 34241-9449
------------------	-------------	------------------------

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

Name of Employer (for Individual) Rogers Benefit Group	Occupation (for Individual) Regional Mgr.
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14928902

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Simonis, Alan, F., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2707 Arite Stree SW
 Suite 12
 City Huntsville State AL Zip Code 35805-4769
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Protective Life Occupation (for Individual) Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14928906
 Amount of Each Receipt this Period
 42.00
 Memo Item

B. Wilson, Cliff, F., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1458 W Bahia Ct
 City Gilbert State AZ Zip Code 85233-5600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Southeast Arizona Insurance Services, Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14929069
 Amount of Each Receipt this Period
 126.00
 Memo Item

C. Dougherty, Paul, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10709 Croom Road
 City Upper Marlboro State MD Zip Code 20772-8406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Insurance Companies Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14929269
 Amount of Each Receipt this Period
 112.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	280.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Golleher, Connie, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20910 Beallsville Road
 City Dickerson State MD Zip Code 20842-9072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Golleher Group Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14929371
 Amount of Each Receipt this Period 51.00
 Memo Item

B. Lammers, Kevin, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 Carriage Lane
 City Newark State DE Zip Code 19711-2045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kevin Lammers Insurance Agency Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14929376
 Amount of Each Receipt this Period 52.50
 Memo Item

C. Kruse, Randy, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 E 8th St
 City Sheldon State IA Zip Code 51201-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Farm Bureau Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14929379
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	178.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Calles, John, Elias, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 650 University Drive

City Coral Gables	State FL	Zip Code 33134-7060
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Ameritas	Occupation (for Individual) Manager
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14929383

Amount of Each Receipt this Period
45.00

Memo Item

B. Johnson, Larry, G., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44466 Albert

City Plymouth	State MI	Zip Code 48170-3902
------------------	-------------	------------------------

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

Name of Employer (for Individual) Farm Bureau Ins Co	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14929412

Amount of Each Receipt this Period
65.00

Memo Item

C. Gandy, Hollie, C., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7812 Tripp Ave

City Amarillo	State TX	Zip Code 79121-1726
------------------	-------------	------------------------

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

Name of Employer (for Individual) Safe Money Solutions Group	Occupation (for Individual) Owner/Senior Producer
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14929427

Amount of Each Receipt this Period
90.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Tapscott, Brad, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 523 Castle Hall Rd

City Mount Pleasant	State SC	Zip Code 29464-6231
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Ameriprise Financial Services, Inc.	Occupation (for Individual) Certified Financial Planner Practition
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14929442

Amount of Each Receipt this Period
75.00

Memo Item

B. Hartman, Gerald, G., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3822 Gemini Cir

City Boise	State ID	Zip Code 83709-4834
---------------	-------------	------------------------

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

Name of Employer (for Individual) Insurance Network America	Occupation (for Individual) Chairman & CEO
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14929447

Amount of Each Receipt this Period
50.00

Memo Item

C. Wiskus, Mark, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 Edgewater Dr

City Pella	State IA	Zip Code 50219-7669
---------------	-------------	------------------------

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

Name of Employer (for Individual) Wiskus Group	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14929484

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Hely, Edward, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4041 Valley Rd
 City Paducah State KY Zip Code 42001-4777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Investment Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14929524
 Amount of Each Receipt this Period
 50.40
 Memo Item

B. Dale, Deborah, J., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10972 W Reutzel Dr
 City Boise State ID Zip Code 83709-5032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) United Long Term Care, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14929532
 Amount of Each Receipt this Period
 51.00
 Memo Item

C. Bosch, Ryan, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 South 19th St. Ct.
 City Marion State IA Zip Code 52302-4144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bosch Financial Occupation (for Individual) Financial Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14929544
 Amount of Each Receipt this Period
 51.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	152.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Morton, Joseph, L., Mr., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5487 N Bach
 City Meridian State ID Zip Code 83646-4711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Intermountain Legal Group Occupation (for Individual) Attorney At Law
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14929611
 Amount of Each Receipt this Period 126.00
 Memo Item

B. Kloke, Neal, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1241 St. Paul Street
 City Bellingham State WA Zip Code 98229-2124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kloke Financial Services, Inc. Occupation (for Individual) Investment Advisor Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14929615
 Amount of Each Receipt this Period 105.00
 Memo Item

C. Windsor, Aaron, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O Box 10808
 6809 Hunter Crossing
 City Fort Smith State AR Zip Code 72917-0808
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Arkansas Blue Cross Blue Shield - Wind Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14929623
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	291.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Smith, Michael, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O Box 2295

City Gillette	State WY	Zip Code 82717-2295
------------------	-------------	------------------------

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

Name of Employer (for Individual) Mountain West Farm Bureau	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14929717

Amount of Each Receipt this Period
105.00

Memo Item

B. Williams, George, W., Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4109 Woodway Drive

City Monroe	State LA	Zip Code 71201-2218
----------------	-------------	------------------------

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

Name of Employer (for Individual) Benefit Plan Service	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14929740

Amount of Each Receipt this Period
55.00

Memo Item

C. Daniel, Roger, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 608 N 30th, #3D

City Billings	State MT	Zip Code 59101-1161
------------------	-------------	------------------------

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

Name of Employer (for Individual) Roger L. Daniel Insurance Agency, Inc.	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14929791

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Kessel, Patrick, Alex, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 E Harrison Ave

City Fairfield	State IA	Zip Code 52556-3836
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Farm Bureau Fin. Services	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14929793

Amount of Each Receipt this Period
126.00

Memo Item

B. Flint, Sherry, L., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 456 Arden Dr.
230

City Encinitas	State CA	Zip Code 92024-4559
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Principal Financial	Occupation (for Individual) RVP - Life
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14929808

Amount of Each Receipt this Period
42.00

Memo Item

C. Kull, Mark, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3008 S 6th St

City Louisville	State KY	Zip Code 40208-1314
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Northwestern Mutual	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14929910

Amount of Each Receipt this Period
51.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	219.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Watson, Bessann, H., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 N Barcelona St
 City Pensacola State FL Zip Code 32501-2002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) North Florida Financial Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14929975
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Broussard, Lori, W., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 292
 City Estherwood State LA Zip Code 70534-0292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Southern Financial Associates - Southe Occupation (for Individual) Financial Professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14930009
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Brackenbury, David, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3236 Greenmeadow Dr
 City Bethlehem State PA Zip Code 18017-1943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mass Mutual Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2017
Transaction ID : 14930146
 Amount of Each Receipt this Period
 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	142.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Frankland, John, William, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2211 274th Ct SE

City Sammamish	State WA	Zip Code 98075-7941
-------------------	-------------	------------------------

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

Name of Employer (for Individual) J. Frankland Employee Benefit Services	Occupation (for Individual) Managing Member
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14930168

Amount of Each Receipt this Period
50.00

Memo Item

B. Garcia, Gerald, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16171 Lyle St

City San Leandro	State CA	Zip Code 94578-1112
---------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14930226

Amount of Each Receipt this Period
42.50

Memo Item

C. Biesemeyer, Laura, L., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 438 Woodson Road

City Overbrook	State KS	Zip Code 66524-9102
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Advisors Excel	Occupation (for Individual) VP of Life Sales & Administration
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2017

Transaction ID : 14930423

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	137.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Clarke, Michele, G., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 State Street, Suite A
 City Cedar Falls State IA Zip Code 50613-3371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA-Iowa Occupation (for Individual) Executive Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14930477
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Curtis, James, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 S Highland St
 City Du Bois State PA Zip Code 15801-2039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ameritas Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14930648
 Amount of Each Receipt this Period 84.00
 Memo Item

C. Robinette, Chris, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1702 Blue Lake Court
 City Franklin State TN Zip Code 37064-9643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MassMutual Financial Group Occupation (for Individual) Financial Planner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 11 / 2017
Transaction ID : 14930750
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	284.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Gillies, Blake, F., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 275 Doral Ln

City La Place	State LA	Zip Code 70068-1707
------------------	-------------	------------------------

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

Name of Employer (for Individual) The DI Center	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14930785

Amount of Each Receipt this Period
45.00

Memo Item

B. Plank, Craig, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 144 Flint Rock Lane

City Blythewood	State SC	Zip Code 29016-7222
--------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14930823

Amount of Each Receipt this Period
42.00

Memo Item

C. Onu, Isaac, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 Perimeter Summit Blvd
2313

City Brookhaven	State GA	Zip Code 30319-1429
--------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Financial Services Specialist
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2017

Transaction ID : 14930996

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	129.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Mehaffey, Gordon, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1278 Eaglewood Drive
 City Cambridge City State IN Zip Code 47327-9338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mehaffey Insurance Agency Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 12 / 2017
Transaction ID : 14931105
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Havir, Gary, T., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 N Main Street #324
 City Stillwater State MN Zip Code 55082-6749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Educators Insurance Resource Svcs, Inc Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 12 / 2017
Transaction ID : 14931107
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Schleicher, Donald, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W7167 Glen Valley Dr
 City Greenville State WI Zip Code 54942-8108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lifetime Retirement Planning, Inc. Occupation (for Individual) President/Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 15 / 2017
Transaction ID : 14931120
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	390.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Dean, Merrell, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 724 Terrace Place

City Norman	State OK	Zip Code 73069-5056
----------------	-------------	------------------------

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

Name of Employer (for Individual) Merrell Dean Insurance Agency	Occupation (for Individual) Insurance_Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : 14931159

Amount of Each Receipt this Period
360.00

Memo Item

B. McWaters, W., Pierce, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2472 Hembree Dr

City Marietta	State GA	Zip Code 30062-2878
------------------	-------------	------------------------

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

Name of Employer (for Individual) Pierce McWaters Insurance	Occupation (for Individual) Agency_Owner
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2017

Transaction ID : 14931161

Amount of Each Receipt this Period
500.00

Memo Item

C. Maricle, Donald, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 78 Wildwood

City Orchard Park	State NY	Zip Code 14127-3764
----------------------	-------------	------------------------

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

Name of Employer (for Individual) C & M Capital Resources, Inc.	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2017

Transaction ID : 14931178

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1360.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Gagne, Gregory, B., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 132 Flint Road

City Candia	State NH	Zip Code 03034-2311
----------------	-------------	------------------------

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

Name of Employer (for Individual) Affinity Investment Group	Occupation (for Individual) Managing Member
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2017

Transaction ID : 14931181

Amount of Each Receipt this Period
300.00

Memo Item

B. Woods, David, F., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 Prynwood Rd

City Longmeadow	State MA	Zip Code 01106-2722
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Woods Financial Group	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2017

Transaction ID : 14931192

Amount of Each Receipt this Period
500.00

Memo Item

C. Anderson, Blaine, Russell, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 950 Saxton Dr

City Huron	State SD	Zip Code 57350-7000
---------------	-------------	------------------------

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

Name of Employer (for Individual) Person Anderson Agency.LLC	Occupation (for Individual) Owner/Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2017

Transaction ID : 14931196

Amount of Each Receipt this Period
250.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Anderson, Blaine, Russell, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 Saxton Dr
 City Huron State SD Zip Code 57350-7000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Person Anderson Agency.LLC Occupation (for Individual) Owner/Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 05 / 17 / 2017
Transaction ID : 14931198
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Jones, Ruth, A., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7051 Stagestop Rd.
 City Black Hawk State SD Zip Code 57718-9337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA - Black Hills Occupation (for Individual) Executive_Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 05 / 17 / 2017
Transaction ID : 14931203
 Amount of Each Receipt this Period 145.00
 Memo Item

C. Morton, James, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 265
 City Kirksville State MO Zip Code 63501-0265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Morton Financial Solutions, LLC Occupation (for Individual) Chartered Financial Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 18 / 2017
Transaction ID : 14931210
 Amount of Each Receipt this Period 210.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	395.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Collins, Douglas, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32791 Smiths Ferry Rd

City Bellevue	State IA	Zip Code 52031-4700
------------------	-------------	------------------------

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

Name of Employer (for Individual) Farm Bureau Financial Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2017

Transaction ID : 14931216

Amount of Each Receipt this Period
300.00

Memo Item

B. Halloran, Michael, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6054 San Jose Blvd

City Jacksonville	State FL	Zip Code 32217-2358
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Northwestern Mutual	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2017

Transaction ID : 14931218

Amount of Each Receipt this Period
250.00

Memo Item

C. Johnson, Barry, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 Hemlock Ave

City Washington	State IA	Zip Code 52353-9292
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BJFS, LLC	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2017

Transaction ID : 14931222

Amount of Each Receipt this Period
300.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Dewey, Steven, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1209 Meadow View Lane

City Waverly	State IA	Zip Code 50677-2914
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Financial Decisions Group	Occupation (for Individual) Investment Advisor Representative
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.60

Date of Receipt
05 / 19 / 2017
Transaction ID : 14931226

Amount of Each Receipt this Period
180.00

Memo Item

B. Lawler, John, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 Penny St

City Tea	State SD	Zip Code 57064-2322
-------------	-------------	------------------------

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

Name of Employer (for Individual) Ameritas	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 19 / 2017
Transaction ID : 14931229

Amount of Each Receipt this Period
250.00

Memo Item

C. Quint, Raymond, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16501 Breckenridge Ct

City Dubuque	State IA	Zip Code 52001-9625
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Weitzel Financial Services, Inc.	Occupation (for Individual) Agent/Broker
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
330.00

Date of Receipt
05 / 19 / 2017
Transaction ID : 14931235

Amount of Each Receipt this Period
330.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Vyverberg, John, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1041 Mt Loretta

City Dubuque	State IA	Zip Code 52003-7885
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Weitzel Financial Services	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2017

Transaction ID : 14931239

Amount of Each Receipt this Period
300.00

Memo Item

B. Weeman, Adam, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 47278 Lincoln Trail

City Renner	State SD	Zip Code 57055-6401
----------------	-------------	------------------------

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

Name of Employer (for Individual) Thrivent Financial	Occupation (for Individual) Financial Consultant
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2017

Transaction ID : 14931241

Amount of Each Receipt this Period
165.00

Memo Item

C. Sievers, Calvin, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 North Berry Pine

City Rapid City	State SD	Zip Code 57702-1860
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Thrivent Financial	Occupation (for Individual) Financial Associate
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2017

Transaction ID : 14931248

Amount of Each Receipt this Period
145.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	610.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 71 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Sammler, Nate, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6530 Orchard Dr

City West Des Moines	State IA	Zip Code 50266-2312
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Nate Sammler State Farm	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2017

Transaction ID : 14931266

Amount of Each Receipt this Period
300.00

Memo Item

B. Bartling, Andrew, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2502 Prairie Ave
Apt B

City Rapid City	State SD	Zip Code 57701-5518
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Modern Woodmen of America	Occupation (for Individual) Financial Representative
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
359.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2017

Transaction ID : 14931268

Amount of Each Receipt this Period
325.00

Memo Item

C. Fraser, Peg, M., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1215 Jordan Street Suite 2

City North Liberty	State IA	Zip Code 52317-8070
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Peg Fraser Insurance and Financial Ser	Occupation (for Individual) Career Financial Representative
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2017

Transaction ID : 14931276

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	925.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Adamson, Craig, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3200 Penny Lane
 City Marion State IA Zip Code 52302-9571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TrueWealthStewardship Occupation (for Individual) Financial_Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 19 / 2017
Transaction ID : 14931280
 Amount of Each Receipt this Period 600.00
 Memo Item

B. Currey, Thomas, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 W. Church St
 City Grand Prairie State TX Zip Code 75050-5532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Thomas D. Currey Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 543.00

Date of Receipt 05 / 20 / 2017
Transaction ID : 14931295
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Collins, Barbara, R., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32791 Smiths Ferry Rd.
 City Bellevue State IA Zip Code 52031-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Farm Bureau Financial Services Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.40

Date of Receipt 05 / 20 / 2017
Transaction ID : 14931297
 Amount of Each Receipt this Period 50.40
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	775.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 73 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Weitzel, Don, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O Box 338

City Kingston	State GA	Zip Code 30145-0338
------------------	-------------	------------------------

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

Name of Employer (for Individual) Principal	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2017

Transaction ID : 14931300

Amount of Each Receipt this Period
42.00

Memo Item

B. Hatton, Chris, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2021 Wanderlust Dr

City Lewisville	State TX	Zip Code 75067-7414
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Money Matters	Occupation (for Individual) Advisor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2017

Transaction ID : 14931314

Amount of Each Receipt this Period
125.00

Memo Item

C. Franczyk, Lance, P., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2224 E 24th St

City Tulsa	State OK	Zip Code 74114-2912
---------------	-------------	------------------------

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

Name of Employer (for Individual) Northwestern Mutual	Occupation (for Individual) Advisor
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
336.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2017

Transaction ID : 14931318

Amount of Each Receipt this Period
84.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	251.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Holladay, Timothy, H., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7127 US Highway 19
 City New Port Richey State FL Zip Code 34652-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Ins. Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2017
Transaction ID : 14931322
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Grava, A., Andra, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1031 Big Spring Dr
 City Allen State TX Zip Code 75013-5681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The DI Center Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2017
Transaction ID : 14931328
 Amount of Each Receipt this Period
 210.00
 Memo Item

C. Frappampina, Pat, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 Lazy Hammock Way
 City Flowery Branch State GA Zip Code 30542-7729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WoodmenLife Occupation (for Individual) Regional Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2017
Transaction ID : 14931330
 Amount of Each Receipt this Period
 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	372.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Pittman, Joseph, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7430 Vinton St

City Omaha	State NE	Zip Code 68124-3452
---------------	-------------	------------------------

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

Name of Employer (for Individual) Creative Association Management	Occupation (for Individual) Executive_Vice_President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2017

Transaction ID : 14931334

Amount of Each Receipt this Period
34.00

Memo Item

B. Ogden, John, Henry, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4109 Mohawk Cir

City Springdale	State AR	Zip Code 72764-7547
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Farmers Insurance Group	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2017

Transaction ID : 14931338

Amount of Each Receipt this Period
50.00

Memo Item

C. Yee, Gordon, W. S., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3156 Elua St

City Lihue	State HI	Zip Code 96766-1211
---------------	-------------	------------------------

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

Name of Employer (for Individual) YeeCorp Insurance Services	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2017

Transaction ID : 14931339

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	126.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Ross, Robert, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3918 S Lisbon Way

City Aurora	State CO	Zip Code 80013-6032
----------------	-------------	------------------------

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

Name of Employer (for Individual) Ross South Metro Agency, Inc.	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2017

Transaction ID : 14931341

Amount of Each Receipt this Period
42.50

Memo Item

B. Judd, Jill, M., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7551 Arden Way

City Aptos	State CA	Zip Code 95003-3808
---------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Agent/Owner
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2017

Transaction ID : 14931349

Amount of Each Receipt this Period
105.00

Memo Item

C. Bryson, Trent, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3777 Long Beach Boulevard
Ste 500

City Long Beach	State CA	Zip Code 90807-3351
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Bryson Financial	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2017

Transaction ID : 14931353

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	252.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Loventhal, Daniel, K., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3934 Ashford Trail
 City Brookhaven State GA Zip Code 30319-1897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual - Goodwin, Wright Occupation (for Individual) Certified_Financial_Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2017
Transaction ID : 14931360
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Loventhal, Daniel, K., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3934 Ashford Trail
 City Brookhaven State GA Zip Code 30319-1897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual - Goodwin, Wright Occupation (for Individual) Certified_Financial_Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 20 / 2017
Transaction ID : 14931361
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Jones, Tracy, L., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22006 N 44th Pl
 City Phoenix State AZ Zip Code 85050-6847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ernest J. Jones Associates, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 293.20

Date of Receipt 05 / 20 / 2017
Transaction ID : 14931371
 Amount of Each Receipt this Period 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	142.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 111
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Matrullo, Jonathan, P., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 Phillips Ct
 City Cranston State RI Zip Code 02921-3318
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baystate Financial Occupation (for Individual) ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2017
Transaction ID : 14931387
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Zeidler, Carl, W., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O Box 706
 14918 Lippold RD
 City Carlinville State IL Zip Code 62626-0706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wall Street Fin. Group Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2017
Transaction ID : 14931389
 Amount of Each Receipt this Period
 105.00
 Memo Item

C. Huggins, Jason, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5175 Blue Yarrow Run
 City Norcross State GA Zip Code 30092-5140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ashford Advisors Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2017
Transaction ID : 14931402
 Amount of Each Receipt this Period
 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	197.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Crump, Samuel, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3119 Hwy 150 East
 City Greensboro State NC Zip Code 27455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greensboro District Office Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2017
Transaction ID : 14931418
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Lancaster, Tonya, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1992 Cheyanne Drive
 City Smyrna State GA Zip Code 30080-3142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Voluntary Benefits at Work Occupation (for Individual) Independent_Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2017
Transaction ID : 14931425
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Call, Daniel, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 62147 Palo Alto
 City El Paso State TX Zip Code 79912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Daniel Call State Farm Agency Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 20 / 2017
Transaction ID : 14931431
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. McCullough, Roger, S., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2759 19th Ave N
 City Fort Dodge State IA Zip Code 50501-7838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Equitable Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : 14931440
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. Gillies, Keith, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6721 Canal Blvd.
 City New Orleans State LA Zip Code 70124-3301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ameritas Occupation (for Individual) Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 22 / 2017
Transaction ID : 14931451
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Harms, Ann, A., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 S. Main St. PO Box 393
 City Tripoli State IA Zip Code 50676-7713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cambridge Investment Research Occupation (for Individual) Registered Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 22 / 2017
Transaction ID : 14931478
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Schreder, Lynn, M., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11340 NW 103rd Ct
 City Granger State IA Zip Code 50109-9702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KHI Solutions Occupation (for Individual) Co-President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 05 / 22 / 2017
Transaction ID : 14931495
 Amount of Each Receipt this Period 240.00
 Memo Item

B. Boyle, Diane, , Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3419 N Emerson St
 City Arlington State VA Zip Code 22207-1834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA- Headquarters Occupation (for Individual) Vice_President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 05 / 22 / 2017
Transaction ID : 14931500
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Perry, Blane, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 Telestar Court
 City Falls Church State VA Zip Code 22042-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA Occupation (for Individual) Director of Infomation Service Operati
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 22 / 2017
Transaction ID : 14931501
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	590.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 82 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Owens, Sheila, , Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 Telestar Ct

City Falls Church	State VA	Zip Code 22042-1260
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
374.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : 14931504

Amount of Each Receipt this Period
41.66

Memo Item

B. Cassidy, Jennifer, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 Telestar Court

City Falls Church	State VA	Zip Code 22042-1260
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : 14931510

Amount of Each Receipt this Period
42.00

Memo Item

C. Carsrud, Judith, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 Telestar Court

City Falls Church	State VA	Zip Code 22042-1260
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA	Occupation (for Individual) Lobbyist
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : 14931513

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	108.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Mayeux, Kevin, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 Telestar Ct
 City Falls Church State VA Zip Code 22042-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA- Headquarters Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1874.97

Date of Receipt 05 / 22 / 2017
Transaction ID : 14931519
 Amount of Each Receipt this Period 208.33
 Memo Item

B. Shannon, Angela, Marie, Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 8th St
 City Plainwell State MI Zip Code 49080-9501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Angela Shannon Insurance Agency Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 23 / 2017
Transaction ID : 14931544
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Leipprandt, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7171 Filion Rd.
 City Pigeon State MI Zip Code 48755-9725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Michigan Farm Bureau Insurance Occupation (for Individual) Managing_Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 23 / 2017
Transaction ID : 14931554
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	583.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 84 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Sievers, Calvin, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 North Berry Pine

City Rapid City	State SD	Zip Code 57702-1860
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Thrivent Financial	Occupation (for Individual) Financial Associate
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2017

Transaction ID : 14931564

Amount of Each Receipt this Period
50.00

Memo Item

B. Gurdjian, Richard, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 960 Richlyn Drive

City Adrian	State MI	Zip Code 49221-9296
----------------	-------------	------------------------

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

Name of Employer (for Individual) Gurdjian Insurance Group, Inc.	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	25	/	2017

Transaction ID : 14931579

Amount of Each Receipt this Period
500.00

Memo Item

C. Worrell, Brian, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 Pine St.

City Wernersville	State PA	Zip Code 19565-1100
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Prudential Financial	Occupation (for Individual) Agent/Owner
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	25	/	2017

Transaction ID : 14931582

Amount of Each Receipt this Period
500.00

Memo Item

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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 85 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Duncan, David, S., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 395 Glenwood Drive

City Monroeville	State PA	Zip Code 15146-1837
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Duncan Financial Group	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2017

Transaction ID : 14931585

Amount of Each Receipt this Period
300.00

Memo Item

B. Dewey, John, B., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5275 Grandview Square #3104

City Edina	State MN	Zip Code 55436-1764
---------------	-------------	------------------------

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

Name of Employer (for Individual) Dewey Financial	Occupation (for Individual) Investment Advisor Rep
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2017

Transaction ID : 14931586

Amount of Each Receipt this Period
200.00

Memo Item

C. Krause, William, P., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1765 Elbow Ln

City Allentown	State PA	Zip Code 18103-9654
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Krause Financial Services	Occupation (for Individual) Financial_Advisor
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2017

Transaction ID : 14931588

Amount of Each Receipt this Period
500.00

Memo Item

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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 86 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Holevinski, Brian, , Mr.,		Date of Receipt MM / DD / YYYY 05 / 25 / 2017 Transaction ID : 14931590
Mailing Address 12 Horicon Dr		Amount of Each Receipt this Period 250.00
City Ocean	State NJ	Zip Code 07712-3359
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) New York Life	Occupation (for Individual) Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Prince, Juliette, , Ms.,		Date of Receipt MM / DD / YYYY 05 / 25 / 2017 Transaction ID : 14931594
Mailing Address 1132 N 42nd Pl		Amount of Each Receipt this Period 250.00
City Renton	State WA	Zip Code 98056-2169
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Northwestern Mutual	Occupation (for Individual) Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Trainer, B.Douglas, , Mr.,		Date of Receipt MM / DD / YYYY 05 / 25 / 2017 Transaction ID : 14931608
Mailing Address PO Box 270 113 Glendale Road		Amount of Each Receipt this Period 150.00
City Pine Forge	State PA	Zip Code 19548-0270
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) National Penn Investment Services	Occupation (for Individual) Vice President, & Sr Financial Consult	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Pikutis-Musuneggi, Christine, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 Duquesne Drive
 City Pittsburgh State PA Zip Code 15243-2045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Musuneggi Financial Group, LLC Occupation (for Individual) Financial_Planner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 25 / 2017
Transaction ID : 14931618
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Lipinski, Brian, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1400 River Road
 City Beaver State PA Zip Code 15009-2410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Executive Brokerage Svcs. Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2017
Transaction ID : 14931631
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Fuerstenau, James, G., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 Flickerham Dr
 City Grand Ledge State MI Zip Code 48837-2248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Fuerstenau Agency Occupation (for Individual) Agency_Owner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 25 / 2017
Transaction ID : 14931636
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Johnson, Barry, C., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1776 Hemlock Ave
 City Washington State IA Zip Code 52353-9292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BJFS, LLC Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 26 / 2017
Transaction ID : 14931662
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Tassej, Matthew, S., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Reggio Ave
 City Old Orchard Beach State ME Zip Code 04064-2709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) E A Scribner Insurance Agency Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : 14931674
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Brown, Michael, O., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6512 NE 113th St
 City Edmond State OK Zip Code 73013-8351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MassMutual Financial Group Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 426.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2017
Transaction ID : 14931680
 Amount of Each Receipt this Period
 80.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	480.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 89 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Fuller, James, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 467 Richland Ave

City Athens	State OH	Zip Code 45701-3704
----------------	-------------	------------------------

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

Name of Employer (for Individual) Snider, Fuller and Stroh	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : 14931683

Amount of Each Receipt this Period
250.00

Memo Item

B. Kilgore, Randy, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4004 San Felice Pt

City Colorado Springs	State CO	Zip Code 80906-5900
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) Randy R. Kilgore and Company	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : 14931685

Amount of Each Receipt this Period
250.00

Memo Item

C. Grimes, Gregory, Lynn, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4604 Shale Oaks Ave.

City Columbia	State MO	Zip Code 65203-8566
------------------	-------------	------------------------

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

Name of Employer (for Individual) Financial Resource Group, LLC	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
362.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : 14931691

Amount of Each Receipt this Period
112.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	612.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 90 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Kelley, F., Nicholas, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1323 S 174th St
 City Omaha State NE Zip Code 68130-4601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kelley Financial Services, Inc Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 434.40

Date of Receipt 05 / 30 / 2017
Transaction ID : 14931695
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Boozer, Lane, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1008 Skylark Dr
 City Denton State TX Zip Code 76205-8008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Don Boozer & Assoc. Occupation (for Individual) Vice President - Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 292.50

Date of Receipt 05 / 30 / 2017
Transaction ID : 14931703
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Roberson, Betty, P., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 Old Post Road
 City Gaffney State SC Zip Code 29341-3303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gaffney Insurance Agency Occupation (for Individual) Agent/Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 318.00

Date of Receipt 05 / 30 / 2017
Transaction ID : 14931717
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 91 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Bussiere, Lisa, E., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 2

City Greene	State ME	Zip Code 04236-0002
----------------	-------------	------------------------

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

Name of Employer (for Individual) The Horace Mann Companies	Occupation (for Individual) Representative
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : 14931723

Amount of Each Receipt this Period
200.00

Memo Item

B. Chavez Geissler, Aprilyn, , Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6809 Pueblo Verde NE

City Albuquerque	State NM	Zip Code 87111
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Chavez Geissler Agency	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : 14931727

Amount of Each Receipt this Period
60.00

Memo Item

C. Serio, Gregory, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17 Elk St Fl 3

City Albany	State NY	Zip Code 12207-1014
----------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA - New York State	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2017

Transaction ID : 14931737

Amount of Each Receipt this Period
750.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1010.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Sanders, Gary, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 Lyndale Drive

City Alexandria	State VA	Zip Code 22308-1033
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931738

Amount of Each Receipt this Period
20.85

Memo Item

B. Pendley, Kenneth, H., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 722 Kenwood Rd

City Fayetteville	State GA	Zip Code 30214-3391
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Habersham Funding LLC	Occupation (for Individual) Marketing_Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931739

Amount of Each Receipt this Period
500.00

Memo Item

C. Massey, Douglas, B., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 60707

City San Angelo	State TX	Zip Code 76906-0707
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Doug Massey Financial Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931740

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	620.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 93 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Schau, Anthony, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1880 Scarlet Oak Cir

City North Liberty	State IA	Zip Code 52317-4767
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) North Star Resource Group	Occupation (for Individual) Regional Vice President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931746

Amount of Each Receipt this Period
600.00

Memo Item

B. Feldman, Marvin, H., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2016 Eagle Pointe

City Palm Harbor	State FL	Zip Code 34685-3339
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Feldman Financial Group	Occupation (for Individual) President/Owner
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931749

Amount of Each Receipt this Period
500.00

Memo Item

C. Amick, Blake, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 88

City Lexington	State SC	Zip Code 29071-0088
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Amick & Associates, Inc.	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931757

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 111
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Counterman, Brian, Dee, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7893 W Quarto Ave
 City Littleton State CO Zip Code 80128-4335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allstate Counterman Occupation (for Individual) Owner/Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : 14931759
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Havir, Gary, T., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 N Main Street #324
 City Stillwater State MN Zip Code 55082-6749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Educators Insurance Resource Svcs, Inc Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : 14931761
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. Wiechart, Donald, E., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 560 N St Marks Road
 City Spencerville State OH Zip Code 45887-9602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Canal Cities Insurance and Investment Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : 14931780
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 95 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Ross, Robert, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3918 S Lisbon Way

City Aurora	State CO	Zip Code 80013-6032
----------------	-------------	------------------------

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

Name of Employer (for Individual) Ross South Metro Agency, Inc.	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931786

Amount of Each Receipt this Period
50.00

Memo Item

B. Hawk, James, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 S. Water Street

City Las Cruces	State NM	Zip Code 88001-1227
--------------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual) ADVISOR
-----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931805

Amount of Each Receipt this Period
120.00

Memo Item

C. Jones, David, S., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5260 Ashwoode Downs Dr

City Johns Creek	State GA	Zip Code 30005
---------------------	-------------	-------------------

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

Name of Employer (for Individual) National Financial Services Group	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931808

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	670.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 96 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Boyle, Diane, , Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3419 N Emerson St

City Arlington	State VA	Zip Code 22207-1834
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Vice_President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931820

Amount of Each Receipt this Period
300.00

Memo Item

B. Perry, Blane, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 Telestar Court

City Falls Church	State VA	Zip Code 22042-1260
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA	Occupation (for Individual) Director of Infomation Service Operati
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931821

Amount of Each Receipt this Period
50.00

Memo Item

C. Johnston, Rick, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1602 W Missouri Ave

City Chickasha	State OK	Zip Code 73018-3954
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Rick Johnston Ins Agency, Inc	Occupation (for Individual) Agency_Owner
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931827

Amount of Each Receipt this Period
520.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	870.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 97 OF 111
<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Owens, Sheila, , Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 Telestar Ct

City Falls Church	State VA	Zip Code 22042-1260
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931828

Amount of Each Receipt this Period
41.66

Memo Item

B. Cassidy, Jennifer, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 Telestar Court

City Falls Church	State VA	Zip Code 22042-1260
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931832

Amount of Each Receipt this Period
42.00

Memo Item

C. Carsrud, Judith, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 Telestar Court

City Falls Church	State VA	Zip Code 22042-1260
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA	Occupation (for Individual) Lobbyist
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2017

Transaction ID : 14931837

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	108.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 111
	<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)
National Association of Insurance and Financial Advisors Political Action Comm

A. McCarthy, Thomas, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2225 MacDonald Lane
 City Flossmoor State IL Zip Code 60422-1339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Chicagoland Financial Group Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : 14931840
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Mayeux, Kevin, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 Telestar Ct
 City Falls Church State VA Zip Code 22042-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA- Headquarters Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2083.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : 14931843
 Amount of Each Receipt this Period
 208.33
 Memo Item

C. Lopez, Christopher, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5451 Millenia Lakes Blvd 460
 City Orlando State FL Zip Code 32839-6304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) New Power Generation Inc Occupation (for Individual) CEO & President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2017
Transaction ID : 14931851
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	758.33
TOTAL This Period (last page this line number only).....	43226.91

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address P.O. box 40031

City
Roanoke

State
VA

Zip Code
24022-0031

Purpose of Disbursement
bank fees

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2017

FEC Identification Number

C

Transaction ID : 14964726

Amount of Each Disbursement this Period

157.72

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

--

Memo Item

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

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

157.72

157.72

**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"/> 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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Ralph Abraham For Congress

Mailing Address P.O. Box 14062

City
Monroe

State
LA

Zip Code
71207

Purpose of Disbursement

011

Category/
Type

Candidate Name

Abraham, Ralph, , Rep., MD

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: LA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	2		2	0	1	7		

FEC Identification Number

C C00563940

Transaction ID : 14841562

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Pallone For Congress

Mailing Address PO Box 3176

City
Long Branch

State
NJ

Zip Code
07740

Purpose of Disbursement

011

Category/
Type

Candidate Name

Pallone, Frank, , Rep., Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NJ District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	2		2	0	1	7		

FEC Identification Number

C C00226928

Transaction ID : 14841563

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Committee To Re-Elect Linda Sanchez

Mailing Address 410 1st St Se
Suite 310

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sanchez, Linda, T., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 38

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		0	2		2	0	1	7		

FEC Identification Number

C C00384057

Transaction ID : 14841564

Amount of Each Disbursement this Period

1000.00

Memo Item

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Graves For Congress

Mailing Address PO Box 335

City Calhoun State GA Zip Code 30703

Purpose of Disbursement

Category/
Type

Candidate Name

Graves, Tom, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: GA District: 14

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 14841565

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Carper For Senate

Mailing Address PO Box 2882

City Wilmington State DE Zip Code 19805

Purpose of Disbursement

Category/
Type

Candidate Name

Carper, Thomas, R., Sen.,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify)

State: DE District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 14841566

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Cheri Bustos

Mailing Address 1050 17th St Nw Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement

Category/
Type

Candidate Name

Bustos, Cheri, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: IL District: 17

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 14841567

Amount of Each Disbursement this Period

Memo Item

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

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"/> 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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Crowley For Congress

Mailing Address 84-56 Grand Avenue

City Elmhurst State NY Zip Code 11373

Purpose of Disbursement

011

Category/
Type

Candidate Name

Crowley, Joseph, , Rep.,

Office Sought: House Senate President
State: NY District: 14

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2017

FEC Identification Number

C C00338954

Transaction ID : 14841568

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Cleaver For Congress

Mailing Address 4801 Main Street, Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement

011

Category/
Type

Candidate Name

Cleaver, Emanuel, , Rep., II

Office Sought: House Senate President
State: MO District: 05

Disbursement For: 2018
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2017

FEC Identification Number

C C00395848

Transaction ID : 14900062

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Brian Higgins For Congress

Mailing Address P.O. Box 28

City Buffalo State NY Zip Code 14220

Purpose of Disbursement

011

Category/
Type

Candidate Name

Higgins, Brian, M., Rep.,

Office Sought: House Senate President
State: NY District: 26

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2017

FEC Identification Number

C C00401034

Transaction ID : 14900063

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: (check only one)
21b 22 x 23 26 27
28a 28b 28c 29 30b
Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Huizenga For Congress
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 254
City Zeeland State MI Zip Code 49464
Purpose of Disbursement 011
Candidate Name Huizenga, Bill, , Rep.,
Office Sought: x House
Disbursement For: 2018
State: MI District: 02
Date of Disbursement 05 / 12 / 2017
FEC Identification Number C00459297
Transaction ID : 14900064
Amount of Each Disbursement this Period 1000.00

B. McCaskill For Missouri
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 300077
City St Louis State MO Zip Code 63130
Purpose of Disbursement 011
Candidate Name McCaskill, Claire, , Sen.,
Office Sought: x Senate
Disbursement For: 2018
State: MO District:
Date of Disbursement 05 / 12 / 2017
FEC Identification Number C00431304
Transaction ID : 14900065
Amount of Each Disbursement this Period 3000.00

C. Enzi For Us Senate
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2775
City Cody State WY Zip Code 82414
Purpose of Disbursement 011
Candidate Name Enzi, Mike, B., Sen.,
Office Sought: x Senate
Disbursement For: 2020
State: WY District:
Date of Disbursement 05 / 12 / 2017
FEC Identification Number C00317503
Transaction ID : 14900066
Amount of Each Disbursement this Period 2000.00

SUBTOTAL of Disbursements This Page (optional)..... 6000.00
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Friends Of Jeb Hensarling

Mailing Address PO Box 820504

City
Dallas

State
TX

Zip Code
75382

Purpose of Disbursement

011

Category/
Type

Candidate Name

Hensarling, Jeb, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: TX District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	2		2	0	1	7		

FEC Identification Number

C C00370650

Transaction ID : 14900067

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. Denham For Congress

Mailing Address 2150 River Plaza Dr., #150

City
Sacramento

State
CA

Zip Code
95833

Purpose of Disbursement

011

Category/
Type

Candidate Name

Denham, Jeff, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify)

State: CA District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	2		2	0	1	7		

FEC Identification Number

C C00473272

Transaction ID : 14900068

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. Hoosiers For Rokita, Inc.

Mailing Address 5802 Oak Avenue

City
Indianapolis

State
IN

Zip Code
46219

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rokita, Todd, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: IN District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	2		2	0	1	7		

FEC Identification Number

C C00476192

Transaction ID : 14900069

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0	0	0
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Memo Item

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

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

5	5	0	0	0	0	0	0	0	0	0	0
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5	5	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---

**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"/> 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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Kevin McCarthy For Congress

Mailing Address PO Box 12667

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement

Category/Type

Candidate Name
McCarthy, Kevin, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: CA District: 23

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 14900070

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Tom Rice For Congress

Mailing Address PO Box 70098

City Myrtle Beach State SC Zip Code 29572

Purpose of Disbursement

Category/Type

Candidate Name
Rice, Tom, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: SC District: 07

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 14900071

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Ben Cardin For Senate, Inc.

Mailing Address P.O. Box 21093

City Catonsville State MD Zip Code 21228

Purpose of Disbursement

Category/Type

Candidate Name
Cardin, Benjamin, , Sen.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: MD District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 14900072

Amount of Each Disbursement this Period

Memo Item

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

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"/> 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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Handel For Congress, Inc.

Mailing Address 4010 Old Milton Pkwy

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement

011

Category/Type

Candidate Name

Handel, Karen, , ,

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) **Runoff2017**

State: GA District: 06

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2017

FEC Identification Number

C00633362

Transaction ID : 14900431

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Sherman For Congress

Mailing Address 777 S. Figueroa St., Ste. 4050.

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement

011

Category/Type

Candidate Name

Sherman, Brad, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: CA District: 30

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2017

FEC Identification Number

C00308742

Transaction ID : 14900432

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement

011

Category/Type

Candidate Name

Neal, Richard, E., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: MA District: 01

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2017

FEC Identification Number

C00226522

Transaction ID : 14900434

Amount of Each Disbursement this Period

3000.00

Memo Item

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

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

6500.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement

011

Category/
Type

Candidate Name

Neal, Richard, E., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2017

FEC Identification Number

C C00226522

Transaction ID : 14900436

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Al Lawson For Congress

Mailing Address 400 North Adams St.

City Tallahassee State FL Zip Code 32301

Purpose of Disbursement

011

Category/
Type

Candidate Name

Lawson, Al, , Rep., Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: FL District: 05

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C C00460261

Transaction ID : 14914928

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lobiondo For Congress

Mailing Address P. O. Box 550

City Vineland State NJ Zip Code 08362

Purpose of Disbursement

011

Category/
Type

Candidate Name

LoBiondo, Frank, A., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NJ District: 02

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C C00269340

Transaction ID : 14914929

Amount of Each Disbursement this Period

500.00

Memo Item

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

4500.00

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"/> 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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Don Bacon For Congress

Mailing Address PO Box 391368

City
Omaha

State
NE

Zip Code
68139

Purpose of Disbursement

011

Category/
Type

Candidate Name

Bacon, Donald, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NE District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	7		

FEC Identification Number

C00575167

Transaction ID : 14914930

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Strange For Senate

Mailing Address PO Box 3670

City
Montgomery

State
AL

Zip Code
36109

Purpose of Disbursement

011

Category/
Type

Candidate Name

Strange, Luther, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2017

Primary General
 Other (specify) ▼

State: AL District: Special-Primary2017

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	7		

FEC Identification Number

C00629451

Transaction ID : 14914931

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Menendez For Senate

Mailing Address PO Box 32248

City
Newark

State
NJ

Zip Code
07102

Purpose of Disbursement

011

Category/
Type

Candidate Name

Menendez, Robert, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		3	1		2	0	1	7		

FEC Identification Number

C00264564

Transaction ID : 14914933

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

5500.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Hurd For Congress

Mailing Address PO Box 761029

City
San Antonio

State
TX

Zip Code
78245

Purpose of Disbursement

011

Category/
Type

Candidate Name

Hurd, Will, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: TX

District: 23

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C00545467

Transaction ID : 14914934

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Walorski For Congress Inc

Mailing Address PO Box 954

City
Mishawaka

State
IN

Zip Code
46546

Purpose of Disbursement

011

Category/
Type

Candidate Name

Walorski, Jackie, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: IN

District: 02

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C00468579

Transaction ID : 14914935

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Pascrell For Congress

Mailing Address Pob 100

City
Teaneck

State
NJ

Zip Code
07666

Purpose of Disbursement

011

Category/
Type

Candidate Name

Pascrell, William, J., Rep., Jr.

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NJ

District: 09

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C00313510

Transaction ID : 14914936

Amount of Each Disbursement this Period

2500.00

Memo Item

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

6500.00

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"/> 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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Bill Nelson For U S Senate

Mailing Address 972 W Whitmire Drive

City Melbourne State FL Zip Code 32935

Purpose of Disbursement

Category/
Type

Candidate Name
Nelson, Bill, , Sen.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: FL District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 14914937

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Kustoff For Congress

Mailing Address 1661 Aaron Brenner Dr Ste 300

City Memphis State TN Zip Code 38120

Purpose of Disbursement

Category/
Type

Candidate Name
Kustoff, David, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: TN District: 08

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 14914938

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City Lexington State KY Zip Code 40588

Purpose of Disbursement

Category/
Type

Candidate Name
Barr, Andy, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: KY District: 06

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 14914939

Amount of Each Disbursement this Period

Memo Item

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

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"/> 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)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Clay Jr. For Congress

Mailing Address PO Box 4544

City St. Louis State MO Zip Code 63108

Purpose of Disbursement

011

Category/
Type

Candidate Name

Clay, William, Lacy, Rep., Jr.

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MO District: 01

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C C00346080

Transaction ID : 14914940

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Beatty For Congress

Mailing Address 222 East Town Street Suite 2w

City Columbus State OH Zip Code 43215

Purpose of Disbursement

011

Category/
Type

Candidate Name

Beatty, Joyce, B., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: OH District: 03

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C C00507368

Transaction ID : 14914941

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Pat Toomey

Mailing Address 228 S. Washington St., Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Category/
Type

Candidate Name

Toomey, Pat, , Sen.,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: PA District:

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2017

FEC Identification Number

C C00461046

Transaction ID : 14914942

Amount of Each Disbursement this Period

1500.00

Memo Item

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

3500.00

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

58500.00