

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Assurant Inc. Political Action Committee

ADDRESS (number and street) 501 W. Michigan St PO BOX 3050 Milwaukee WI 53203 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00185694 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, 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 04 01 2008 through 04 30 2008

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

Type or Print Name of Treasurer Mr. Steve Swanson

Signature of Treasurer Electronically Filed by Mr. Steve Swanson Date 05 19 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Assurant Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		43578.14
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	21953.83									
(c) Total Receipts (from Line 19)	39879.14	79754.83								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	61832.97	123332.97								
7. Total Disbursements (from Line 31)	22500.00	84000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	39332.97	39332.97								
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
Assurant Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	37294.60	59776.73
(i) Itemized (use Schedule A)	2584.54	19978.10
(ii) Unitemized	39879.14	79754.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	39879.14	79754.83
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	39879.14	79754.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	39879.14	79754.83

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	83000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	1000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	22500.00	84000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22500.00	84000.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	39879.14	79754.83
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39879.14	79754.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Eric Almassy	Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 2700 East Sunset Rd. # B-14	Transaction ID: 20080425-127
	City State Zip Code Las Vegas NV 89120-3506	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Fortis Insurance Company Occupation Dir, Regional Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Eric Almassy	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 2700 East Sunset Rd. # B-14	Transaction ID: 20080502-134
	City State Zip Code Las Vegas NV 89120-3506	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Fortis Insurance Company Occupation Dir, Regional Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) David Andrews	Date of Receipt MM / DD / YYYY 04 / 09 / 2008
	Mailing Address 3639 Grandview Avenue	Transaction ID: 4871809443dbf61983b
	City State Zip Code Gurnee IL 60031-3798	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Fortis Insurance Company Occupation VP, Product Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 266.64	

SUBTOTAL of Receipts This Page (optional)	250.00
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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) David Andrews		Date of Receipt
	Mailing Address 3639 Grandview Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 04 / 15 / 2008
	City	State	Zip Code
	Gurnee	IL	60031-3798
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-52
Name of Employer Fortis Insurance Company		Occupation VP, Product Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 266.64	<input type="text"/> 20.83

B.	Full Name (Last, First, Middle Initial) David Andrews		Date of Receipt
	Mailing Address 3639 Grandview Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 04 / 30 / 2008
	City	State	Zip Code
	Gurnee	IL	60031-3798
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-54
Name of Employer Fortis Insurance Company		Occupation VP, Product Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 266.64	<input type="text"/> 20.83

C.	Full Name (Last, First, Middle Initial) Mark Andruss		Date of Receipt
	Mailing Address 3620 Walnut Kansas		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 04 / 15 / 2008
	City	State	Zip Code
	Kansas City	MO	64111
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-9
Name of Employer Assurant Employee Benefits		Occupation VP Corporate Development	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 670.00	<input type="text"/> 90.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 131.66
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mark Andruss		Date of Receipt
	Mailing Address 3620 Walnut Kansas		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Kansas City	MO	64111
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-8
Name of Employer Assurant Employee Benefits		Occupation VP Corporate Development	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 670.00	<input type="text"/> 90.00

B.	Full Name (Last, First, Middle Initial) Valerie R. Andruss		Date of Receipt
	Mailing Address 3620 Walnut St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Kansas City	MO	64111-1508
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-10
Name of Employer Assurant Employee Benefits		Occupation Life & Disability Claims Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00	<input type="text"/> 38.75

C.	Full Name (Last, First, Middle Initial) Valerie R. Andruss		Date of Receipt
	Mailing Address 3620 Walnut St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Kansas City	MO	64111-1508
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-9
Name of Employer Assurant Employee Benefits		Occupation Life & Disability Claims Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00	<input type="text"/> 38.75

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 167.50
TOTAL This Period (last page this line number only)	<input type="text"/>

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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Peter Bacon		Date of Receipt
	Mailing Address N32W23582 Fieldside Road		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pewaukee	WI	53072-4049
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Fortis Insurance Company		Occupation VP, Product Management	Transaction ID: 20080425-53
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="526.00"/>	<input type="text" value="68.00"/>

B.	Full Name (Last, First, Middle Initial) Peter Bacon		Date of Receipt
	Mailing Address N32W23582 Fieldside Road		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pewaukee	WI	53072-4049
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Fortis Insurance Company		Occupation VP, Product Management	Transaction ID: 20080502-55
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="526.00"/>	<input type="text" value="68.00"/>

C.	Full Name (Last, First, Middle Initial) Rajeev Bal		Date of Receipt
	Mailing Address 10512 N Pine Ridge Drive		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mequon	WI	53092-6405
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Fortis Insurance Company		Occupation EVP, Small Group Market	Transaction ID: 20080425-54
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="125.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="261.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Rajeev Bal		Date of Receipt MM / DD / YYYY 04 / 30 / 2008		
	Mailing Address 10512 N Pine Ridge Drive		Transaction ID: 20080502-56		
	City Mequon	State WI	Zip Code 53092-6405	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Fortis Insurance Company	Occupation EVP, Small Group Market			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

B.	Full Name (Last, First, Middle Initial) Dave Bandy		Date of Receipt MM / DD / YYYY 04 / 30 / 2008		
	Mailing Address 5198 Ledgewood Drive		Transaction ID: 20080502-131		
	City Commerce Township	State MI	Zip Code 48382-1428	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer John Alden Life Insurance Company	Occupation Mgr, District Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) Harry Bassett		Date of Receipt MM / DD / YYYY 04 / 15 / 2008		
	Mailing Address 10825 SW 60 Ave		Transaction ID: 20080425-3		
	City Miami	State FL	Zip Code 33156	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Assurant Solutions	Occupation Sr. VP Government Relations			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

SUBTOTAL of Receipts This Page (optional)	▶	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: PAGE 11 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Julie A. Berquist

Mailing Address 12100 W Cardinal Court

City State Zip Code
Hales Corners WI 53130-1064

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

Name of Employer Fortis Insurance Company Occupation Associate Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Transaction ID: 20080425-55

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Julie A. Berquist

Mailing Address 12100 W Cardinal Court

City State Zip Code
Hales Corners WI 53130-1064

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

Name of Employer Fortis Insurance Company Occupation Associate Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2008

Transaction ID: 20080502-57

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mark Berquist

Mailing Address 12100 W Cardinal Court

City State Zip Code
Hales Corners WI 53130-1064

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

Name of Employer Fortis Insurance Company Occupation Associate Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Transaction ID: 20080425-56

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 12 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mark Berquist	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 12100 W Cardinal Court	Transaction ID: 20080502-58
	City State Zip Code Hales Corners WI 53130-1064	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Fortis Insurance Company Occupation Associate Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.00	

B.	Full Name (Last, First, Middle Initial) Kevin Borchert	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 212 Augusta Way	Transaction ID: 20080502-59
	City State Zip Code North Prairie WI 53153-9612	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Fortis Insurance Company Occupation VP, Product Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) James Brindowski	Date of Receipt MM / DD / YYYY 04 / 02 / 2008
	Mailing Address S68 W17264 Rossmar	Transaction ID: 024367d99dca9ff3a4a
	City State Zip Code Muskego WI 53150	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Fortis Insurance Company Occupation VP, Agent Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robert Butler	Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 844 Southwest 172nd Terrace	Transaction ID: 20080425-5
	City State Zip Code Pembroke Pines FL 33029-4220	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Assurant Solutions	Occupation Sr. Vp & Chief Actuarial	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

B.	Full Name (Last, First, Middle Initial) Robert Butler	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 9000 Ridgemont Drive	Transaction ID: 20080502-4
	City State Zip Code Atlanta GA 30350-1612	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Assurant Solutions	Occupation Sr. Vp & Chief Actuarial	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) Deborah Cain	Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 4133 E COUNTRYVIEW DR	Transaction ID: 20080425-58
	City State Zip Code BYRON IL 61010-9159	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Fortis Insurance Company	Occupation VP, IM Product Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	125.00
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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Deborah Cain		Date of Receipt
	Mailing Address 11725 N River Ridge Drive		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mequon	WI	53092-2755
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-61
Name of Employer Fortis Insurance Company		Occupation VP, IM Product Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="280.00"/>	<input type="text" value="35.00"/>

B.	Full Name (Last, First, Middle Initial) Steven Cain		Date of Receipt
	Mailing Address 11725 N River Ridge Drive		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mequon	WI	53092-2755
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-59
Name of Employer Fortis Insurance Company		Occupation VP, Underwriting Risk Mgmt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="31.25"/>

C.	Full Name (Last, First, Middle Initial) Steven Cain		Date of Receipt
	Mailing Address 11725 N River Ridge Drive		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mequon	WI	53092-2755
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-62
Name of Employer Fortis Insurance Company		Occupation VP, Underwriting Risk Mgmt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="31.25"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="97.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Thomas Cairns		Date of Receipt
	Mailing Address 360 Bunker Hill Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Brookfield	WI	53005-7907
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-60
Name of Employer Fortis Insurance Company		Occupation VP, Finance -Product Line	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 270.00	<input type="text"/> 30.00

B.	Full Name (Last, First, Middle Initial) Thomas Cairns		Date of Receipt
	Mailing Address 360 Bunker Hill Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Brookfield	WI	53005-7907
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-63
Name of Employer Fortis Insurance Company		Occupation VP, Finance -Product Line	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 270.00	<input type="text"/> 30.00

C.	Full Name (Last, First, Middle Initial) James Carlson		Date of Receipt
	Mailing Address C/O Carlson Fin Strategies		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 1 5 / 2 0 0 8
	City	State	Zip Code
	BURNSVILLE	MN	55337-1269
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-62
Name of Employer Fortis Insurance Company		Occupation VP, Product Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 400.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 110.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) James Carlson		Date of Receipt
	Mailing Address N32W23234 Fieldside Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Pewaukee	WI	53072-5724
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-65
Name of Employer Fortis Insurance Company		Occupation VP, Product Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 400.00	

B.	Full Name (Last, First, Middle Initial) Deborah Cherland		Date of Receipt
	Mailing Address 2089 Sioux Boulevard		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 5 / 2 0 0 8
	City	State	Zip Code
	New Brighton	MN	55112-7226
	FEC ID number of contributing federal political committee. C		Transaction ID: 9357aa023a580b0995a
Name of Employer John Alden Life Insurance Company		Occupation Dir, Underwriting	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

C.	Full Name (Last, First, Middle Initial) Thomas Clopton		Date of Receipt
	Mailing Address 10506 N River Lake Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 2 5 / 2 0 0 8
	City	State	Zip Code
	Megun	WI	53092-4861
	FEC ID number of contributing federal political committee. C		Transaction ID: 762d87c4dfff6ff17b5
Name of Employer Fortis Insurance Company		Occupation VP, Mkt Information & Testing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2500.00
		<input type="text"/> 2500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2800.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Phillip W. Culbertson

Mailing Address 37510 E Truman Road

City State Zip Code
Oak Grove MO 64075-8186

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

Name of Employer Assurant Employee Benefits Occupation Vp Customer Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Transaction ID: 20080425-20

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Phillip W. Culbertson

Mailing Address 37510 E Truman Road

City State Zip Code
Oak Grove MO 64075-8186

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

Name of Employer Assurant Employee Benefits Occupation Vp Customer Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2008

Transaction ID: 20080502-21

Amount of Each Receipt this Period
40.00

C.

Full Name (Last, First, Middle Initial)
Thomas Cunningham

Mailing Address 501 W Michigan Street

City State Zip Code
Milwaukee WI 53203-2706

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

Name of Employer Assurant Inc. Occupation Sr. VP Fixed Income

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Transaction ID: 20080425-21

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **205.00**

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: PAGE 18 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Thomas Cunningham

Mailing Address 501 W Michigan Street

City State Zip Code
Milwaukee WI 53203-2706

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

Name of Employer Assurant Inc. Occupation Sr. VP Fixed Income

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-22

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Adrienne Daffner

Mailing Address 28 Causeway Street

City State Zip Code
Hudson MA 01749-2804

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

Name of Employer John Alden Life Insurance Company Occupation Dir, Network Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-123

Amount of Each Receipt this Period
600.00

C.

Full Name (Last, First, Middle Initial)
Theresa J. Dalen

Mailing Address 9475 Oak Avenue

City State Zip Code
Waconia MN 55387

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

Name of Employer Assurant Employee Benefits Occupation Second VP, Disability

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-12

Amount of Each Receipt this Period
29.16

SUBTOTAL of Receipts This Page (optional) ► **754.16**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Theresa J. Dalen

Mailing Address 9475 Oak Avenue

City State Zip Code
Waconia MN 55387

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

Name of Employer Assurant Employee Benefits
Occupation Second VP, Disability

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 233.28

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-11

Amount of Each Receipt this Period
29.16

B.

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

Mailing Address 4790 Meadow View East

City State Zip Code
Brookfield WI 53005-1387

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

Name of Employer Fortis Insurance Company
Occupation VP, IT Business Solutions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 662.56

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-104

Amount of Each Receipt this Period
85.58

C.

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

Mailing Address 4790 Meadow View East

City State Zip Code
Brookfield WI 53005-1387

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

Name of Employer Fortis Insurance Company
Occupation VP, IT Business Solutions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 662.56

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-109

Amount of Each Receipt this Period
85.58

SUBTOTAL of Receipts This Page (optional) ► **200.32**

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

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

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

FOR LINE NUMBER: PAGE 20 / 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Steven Dziedzic

Mailing Address 200 E Reservoir Avenue

City State Zip Code
Milwaukee WI 53212-3724

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

Name of Employer Fortis Insurance Company Occupation VP, Renewals

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Transaction ID: 20080425-65

Amount of Each Receipt this Period
175.00

B. Full Name (Last, First, Middle Initial)
Steven Dziedzic

Mailing Address 200 E Reservoir Avenue

City State Zip Code
Milwaukee WI 53212-3724

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

Name of Employer Fortis Insurance Company Occupation VP, Renewals

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2008

Transaction ID: 20080502-68

Amount of Each Receipt this Period
175.00

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

Mailing Address 103 Gold Leaf Court

City State Zip Code
Canton GA 30114

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

Name of Employer Assurant Solutions Occupation Sr. VP Personal Property Protection

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Transaction ID: 20080425-4

Amount of Each Receipt this Period
80.00

SUBTOTAL of Receipts This Page (optional) ▶ **430.00**

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: PAGE 21 / 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph Erdeman
Mailing Address 103 Gold Leaf Court
City Canton State GA Zip Code 30114
FEC ID number of contributing federal political committee. **C**
Name of Employer Assurant Solutions Occupation Sr. VP Personal Property Protection
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 640.00
Date of Receipt 04 / 30 / 2008
Transaction ID: 20080502-3
Amount of Each Receipt this Period 80.00

B. Full Name (Last, First, Middle Initial)
Thomas Esser
Mailing Address W158S7209 Quietwood Drive
City Muskego State WI Zip Code 53150-8475
FEC ID number of contributing federal political committee. **C**
Name of Employer Fortis Insurance Company Occupation VP, National Accounts
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 04 / 15 / 2008
Transaction ID: 20080425-67
Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Thomas Esser
Mailing Address W158S7209 Quietwood Drive
City Muskego State WI Zip Code 53150-8475
FEC ID number of contributing federal political committee. **C**
Name of Employer Fortis Insurance Company Occupation VP, National Accounts
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 04 / 30 / 2008
Transaction ID: 20080502-70
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 140.00
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: PAGE 22 / 63

(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Terry Grigg

Mailing Address 28 St. Albans St. N

City State Zip Code
St. Paul MN 55104-7152

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

Name of Employer Occupation
John Alden Life Insurance Company Mgr, Underwriting Support

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 266.31

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-120

Amount of Each Receipt this Period

33.33

B.

Full Name (Last, First, Middle Initial)
Terry Grigg

Mailing Address 28 St. Albans St. N

City State Zip Code
St. Paul MN 55104-7152

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

Name of Employer Occupation
John Alden Life Insurance Company Mgr, Underwriting Support

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 266.31

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-127

Amount of Each Receipt this Period

33.00

C.

Full Name (Last, First, Middle Initial)
Mary M. Hannes

Mailing Address 2801 Coventry Lane

City State Zip Code
Waukesha WI 53188-1340

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

Name of Employer Occupation
Fortis Insurance Company Dir, Market Management

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-74

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

116.33

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: PAGE 23 / 63

(check only one)

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

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)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Delaine B. Hare

Mailing Address 2323 Grand Blvd

City State Zip Code
Kansas City MO 64108-2670

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

Name of Employer Assurant Employee Benefits
Occupation Second VP

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

Transaction ID: 20080502-12

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Kenneth Harpell

Mailing Address 10921 Chatham Court S

City State Zip Code
Burnsville MN 55337-1094

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

Name of Employer Fortis Insurance Company
Occupation Dir, Regional Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 333.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	0	8

Transaction ID: 20080425-128

Amount of Each Receipt this Period

41.66

C.

Full Name (Last, First, Middle Initial)
Kenneth Harpell

Mailing Address 10921 Chatham Court S

City State Zip Code
Burnsville MN 55337-1094

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

Name of Employer Fortis Insurance Company
Occupation Dir, Regional Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 333.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	8

Transaction ID: 20080502-135

Amount of Each Receipt this Period

41.66

SUBTOTAL of Receipts This Page (optional) ▶

583.32

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Edwin L. Harper

Mailing Address 4210 S Douglas Road

City Miami State FL Zip Code 33133-6845

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

Name of Employer Assurant Occupation Sr. VP Corporate Headquarters

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1333.96

Date of Receipt 04 / 15 / 2008

Transaction ID: 20080425-22

Amount of Each Receipt this Period 166.66

B.

Full Name (Last, First, Middle Initial)
Edwin L. Harper

Mailing Address 4210 S Douglas Road

City Miami State FL Zip Code 33133-6845

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

Name of Employer Assurant Occupation Sr. VP Corporate Headquarters

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1333.96

Date of Receipt 04 / 30 / 2008

Transaction ID: 20080502-23

Amount of Each Receipt this Period 166.66

C.

Full Name (Last, First, Middle Initial)
David Hill

Mailing Address PO BOX 846

City Ardmore State OK Zip Code 73402-0846

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

Name of Employer Fortis Insurance Company Occupation VP, Legal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2008

Transaction ID: 20080425-72

Amount of Each Receipt this Period 41.67

SUBTOTAL of Receipts This Page (optional) ► 374.99

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
David Hill

Mailing Address 425 University Ave Ste 120

City State Zip Code
Sacramento CA 95825-6520

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

Name of Employer Occupation
Fortis Insurance Company VP, Legal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt
MM / DD / YYYY
04 / 30 / 2008

Transaction ID: 20080502-76

Amount of Each Receipt this Period
41.67

B.

Full Name (Last, First, Middle Initial)
Robert Hill

Mailing Address C/O Western Southern

City State Zip Code
Terre Haute IN 47802-3765

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

Name of Employer Occupation
Assurant Solutions President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Transaction ID: 20080425-1

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Robert Hill

Mailing Address 3814 N Shrine Wood St

City State Zip Code
Indianapolis IN 47805-9770

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

Name of Employer Occupation
Assurant Solutions President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2008

Transaction ID: 20080502-1

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 241.67

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Julia Hix-Royer

Mailing Address 29W 12883rd Street

City Naperville State IL Zip Code 60564

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

Name of Employer Fortis Insurance Company Occupation VP, Legal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	8

Transaction ID: 20080425-73

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Julia Hix-Royer

Mailing Address 29W 12883rd Street

City Naperville State IL Zip Code 60564

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

Name of Employer Fortis Insurance Company Occupation VP, Legal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	8

Transaction ID: 20080502-77

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Laura Hohing

Mailing Address 929 N Astor Street

City Milwaukee State WI Zip Code 53202-3481

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

Name of Employer Fortis Insurance Company Occupation Sr VP Sales & Agcy Mktg Serv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	5	/	2	0	0	8

Transaction ID: 20080425-113

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **160.00**

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: PAGE 27 / 63 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Laura Hohing</p> <p>Mailing Address 929 N Astor Street</p> <p>City State Zip Code Milwaukee WI 53202-3481</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Fortis Insurance Company</p> <p>Occupation Sr VP Sales & Agcy Mktg Serv</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 800.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID: 20080502-120</p> <p>Amount of Each Receipt this Period 100.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		3	0		2	0	0	8												

<p>B. Full Name (Last, First, Middle Initial) Paris Inglis</p> <p>Mailing Address 1005 Main Street #100</p> <p>City State Zip Code Boise ID 83702-5751</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Assurant Health</p> <p>Occupation Boise North Star Marketing Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID: d59eca8ab3c01eb19d7</p> <p>Amount of Each Receipt this Period 30.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	5		2	0	0	8												

<p>C. Full Name (Last, First, Middle Initial) Paris Inglis</p> <p>Mailing Address 1005 Main Street #100</p> <p>City State Zip Code Boise ID 83702-5751</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Assurant Health</p> <p>Occupation Boise North Star Marketing Sales Rep</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID: 4da65b06fce83d48997</p> <p>Amount of Each Receipt this Period 30.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		3	0		2	0	0	8												

<p>SUBTOTAL of Receipts This Page (optional)</p>	160.00
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ranell M. Jacobson

Mailing Address 700 Havenhill Road

City State Zip Code
Eagan MN 55123

FEC ID number of contributing federal political committee. C

Name of Employer Assurant Inc. Occupation SVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt M M / D D / Y Y Y Y
04 / 15 / 2008

Transaction ID: 20080425-38

Amount of Each Receipt this Period 41.67

B. Full Name (Last, First, Middle Initial)
Ranell M. Jacobson

Mailing Address 700 Havenhill Road

City State Zip Code
Eagan MN 55123

FEC ID number of contributing federal political committee. C

Name of Employer Assurant Inc. Occupation SVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt M M / D D / Y Y Y Y
04 / 30 / 2008

Transaction ID: 20080502-40

Amount of Each Receipt this Period 41.67

C. Full Name (Last, First, Middle Initial)
Stacy M. Jenison

Mailing Address 7421 Delmar St

City State Zip Code
Prairie Village KS 66208-2966

FEC ID number of contributing federal political committee. C

Name of Employer Assurant Employee Benefits Occupation Second Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
04 / 15 / 2008

Transaction ID: 20080425-14

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 133.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Stacy M. Jenison
Mailing Address 7421 Delmar St
City State Zip Code
Prairie Village KS 66208-2966
FEC ID number of contributing federal political committee. **C**
Name of Employer Assurant Employee Benefits Occupation Second Vice President
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 04 / 30 / 2008
Transaction ID: 20080502-14
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Michael Kellen
Mailing Address N11W31695 Pine Ridge Circle
City State Zip Code
Delafield WI 53018-2621
FEC ID number of contributing federal political committee. **C**
Name of Employer Fortis Insurance Company Occupation Sr VP Group Markets
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 3500.00
Date of Receipt: 04 / 15 / 2008
Transaction ID: 20080425-76
Amount of Each Receipt this Period: 3500.00

C. Full Name (Last, First, Middle Initial)
Steven Keller
Mailing Address 28601 Isleworth Court
City State Zip Code
Lake Bluff IL 60044-3003
FEC ID number of contributing federal political committee. **C**
Name of Employer Fortis Insurance Company Occupation Dir, Marketing
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 224.96
Date of Receipt: 04 / 30 / 2008
Transaction ID: 20080502-80
Amount of Each Receipt this Period: 28.12

SUBTOTAL of Receipts This Page (optional) ► 3578.12
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 30 / 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
James Knishka
 Mailing Address 3060 Portarligton Lane
 City State Zip Code
 Fitchburg WI 53711-6919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fortis Insurance Company Occupation Mgr, IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.28
 Date of Receipt 04 / 15 / 2008
Transaction ID: 20080425-25
 Amount of Each Receipt this Period 41.66

B. Full Name (Last, First, Middle Initial)
James Knishka
 Mailing Address 3060 Portarligton Lane
 City State Zip Code
 Fitchburg WI 53711-6919
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fortis Insurance Company Occupation Mgr, IT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.28
 Date of Receipt 04 / 30 / 2008
Transaction ID: 20080502-26
 Amount of Each Receipt this Period 41.66

C. Full Name (Last, First, Middle Initial)
Kamma Kondrad
 Mailing Address 4905 76th Street
 City State Zip Code
 Kenosha WI 53142-4245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fortis Insurance Company Occupation Mgr, Facility Planning
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.00
 Date of Receipt 04 / 15 / 2008
Transaction ID: 20080425-79
 Amount of Each Receipt this Period 32.00

SUBTOTAL of Receipts This Page (optional) ► 115.32
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kamma Kondrad

Mailing Address 4905 76th Street

City Kenosha State WI Zip Code 53142-4245

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

Name of Employer Fortis Insurance Company Occupation Mgr, Facility Planning

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-81

Amount of Each Receipt this Period
32.00

B.

Full Name (Last, First, Middle Initial)
Deborah K. Kramer

Mailing Address 7090 N Green Tree Court

City River Hills State WI Zip Code 53217-3706

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

Name of Employer Fortis Insurance Company Occupation Sr VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 770.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-80

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Deborah K. Kramer

Mailing Address 7090 N Green Tree Court

City River Hills State WI Zip Code 53217-3706

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

Name of Employer Fortis Insurance Company Occupation Sr VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 770.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-82

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 232.00

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 / 63
	<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)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Scott Krienke

Mailing Address 3336 Nagawicka Avenue

City State Zip Code
Delafield WI 53018-1021

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

Name of Employer Fortis Insurance Company Occupation VP, Individual Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 735.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-82

Amount of Each Receipt this Period
105.00

B.

Full Name (Last, First, Middle Initial)
Scott Krienke

Mailing Address 3336 Nagawicka Avenue

City State Zip Code
Delafield WI 53018-1021

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

Name of Employer Fortis Insurance Company Occupation VP, Individual Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 735.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-84

Amount of Each Receipt this Period
105.00

C.

Full Name (Last, First, Middle Initial)
Ronny B. Lancaster

Mailing Address 4675 Regency Trace

City State Zip Code
Atlanta GA 30331

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

Name of Employer Assurant Inc. Occupation Sr. Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1666.64

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-27

Amount of Each Receipt this Period
208.33

SUBTOTAL of Receipts This Page (optional) ► **418.33**

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: PAGE 33 / 63

(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Ronny B. Lancaster

Mailing Address 4675 Regency Trace

City State Zip Code
Atlanta GA 30331

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

Name of Employer Assurant Inc. Occupation Sr. Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1666.64

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-28

Amount of Each Receipt this Period

208.33

B.

Full Name (Last, First, Middle Initial)
Chad Lewis

Mailing Address 2870 Ivey Oaks Lane

City State Zip Code
Roswell GA 30076-5002

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

Name of Employer Fortis Insurance Company Occupation Dir, Regional Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-129

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)
Chad Lewis

Mailing Address 2870 Ivey Oaks Lane

City State Zip Code
Roswell GA 30076-5002

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

Name of Employer Fortis Insurance Company Occupation Dir, Regional Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-136

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

328.33

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 34 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Gregory Loerzel		Date of Receipt
	Mailing Address 19 Patterdale Place		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Downingtown	PA	19335-1119
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Fortis Insurance Company		Occupation Dir, Regional Sales	Transaction ID: 20080425-114
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="440.00"/>	<input type="text" value="55.00"/>

B.	Full Name (Last, First, Middle Initial) Gregory Loerzel		Date of Receipt
	Mailing Address 19 Patterdale Place		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Downingtown	PA	19335-1119
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Fortis Insurance Company		Occupation Dir, Regional Sales	Transaction ID: 20080502-121
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="440.00"/>	<input type="text" value="55.00"/>

C.	Full Name (Last, First, Middle Initial) Richard Manns		Date of Receipt
	Mailing Address 2909 W View Court		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Waukesha	WI	53188-4450
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Fortis Insurance Company		Occupation VP, Performance Enhancement	Transaction ID: 20080425-36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="320.00"/>	<input type="text" value="40.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 63

(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Richard Manns		Date of Receipt MM / DD / YYYY 04 / 30 / 2008		
	Mailing Address 2909 W View Court		Transaction ID: 20080502-38		
	City Waukesha	State WI	Zip Code 53188-4450	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Fortis Insurance Company	Occupation VP, Performance Enhancement			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00			

B.	Full Name (Last, First, Middle Initial) Matthew McGuire		Date of Receipt MM / DD / YYYY 04 / 15 / 2008		
	Mailing Address 4807 Summerset Drive		Transaction ID: 20080425-43		
	City Rapid City	State SD	Zip Code 57702-9244	Amount of Each Receipt this Period 72.91	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Assurant Solutions	Occupation Sr. VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 583.28			

C.	Full Name (Last, First, Middle Initial) Matthew McGuire		Date of Receipt MM / DD / YYYY 04 / 30 / 2008		
	Mailing Address 4807 Summerset Drive		Transaction ID: 20080502-45		
	City Rapid City	State SD	Zip Code 57702-9244	Amount of Each Receipt this Period 72.91	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Assurant Solutions	Occupation Sr. VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 583.28			

SUBTOTAL of Receipts This Page (optional)

185.82

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 63

(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kevin Michels

Mailing Address 33 Beacon Lane

City State Zip Code
Aberdeen NJ 07747

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

Name of Employer Assurant Inc. Occupation VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-28

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)
Kevin Michels

Mailing Address 33 Beacon Lane

City State Zip Code
Aberdeen NJ 07747

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

Name of Employer Assurant Inc. Occupation VP

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-29

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)
Howard Miller

Mailing Address 1305 Bonnie Lane

City State Zip Code
Brookfield WI 53045-5422

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

Name of Employer Fortis Insurance Company Occupation Sr VP Chief Financial Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: 661c1c2d81fa1a4f550

Amount of Each Receipt this Period

4000.00

SUBTOTAL of Receipts This Page (optional)

4110.00

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: PAGE 37 / 63

(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Stephanie Missey

Mailing Address 13011 Mackey

City State Zip Code
Overland Park KS 66213

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

Name of Employer Assurant Employee Benefit Occupation 2nd VP Financial Rep & Acct

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 479.98

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-29

Amount of Each Receipt this Period
65.00

B.

Full Name (Last, First, Middle Initial)

Stephanie Missey

Mailing Address 13011 Mackey

City State Zip Code
Overland Park KS 66213

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

Name of Employer Assurant Employee Benefit Occupation 2nd VP Financial Rep & Acct

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 479.98

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-30

Amount of Each Receipt this Period
65.00

C.

Full Name (Last, First, Middle Initial)

Larry Moffitt

Mailing Address PO Box 868

City State Zip Code
McMinnville TN 37111-0868

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

Name of Employer Fortis Insurance Company Occupation Dir, Regional Sales

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

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-115

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)

1130.00

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: PAGE 38 / 63

(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Brian Murray

Mailing Address 20507 Hunter Dr

City State Zip Code
Frankfort IL 60423-8781

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

Name of Employer Occupation
Fortis Insurance Company Assistant Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 408.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-86

Amount of Each Receipt this Period

54.16

B.

Full Name (Last, First, Middle Initial)
Brian Murray

Mailing Address 4927 N Larkin Street

City State Zip Code
Whitefish Bay WI 53217-6045

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

Name of Employer Occupation
Fortis Insurance Company Assistant Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 408.32

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-88

Amount of Each Receipt this Period

54.16

C.

Full Name (Last, First, Middle Initial)
Dean Nolde

Mailing Address W267N7080 Lisbon Oaks Drive

City State Zip Code
Sussex WI 53089-2300

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

Name of Employer Occupation
Fortis Insurance Company VP, Rbg Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 293.66

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-116

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional) ▶

129.15

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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 39 / 63
	<input checked="" 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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Dean Nolde		Date of Receipt MM / DD / YYYY 04 / 30 / 2008		
	Mailing Address W267N7080 Lisbon Oaks Drive		Transaction ID: 20080502-122		
	City Sussex	State WI	Zip Code 53089-2300	Amount of Each Receipt this Period 20.83	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Fortis Insurance Company	Occupation VP, Rbg Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 293.66			

B.	Full Name (Last, First, Middle Initial) Mike Norderhaug		Date of Receipt MM / DD / YYYY 04 / 15 / 2008		
	Mailing Address 2425 Camelot Drive		Transaction ID: 20080425-117		
	City Brookfield	State WI	Zip Code 53045-3914	Amount of Each Receipt this Period 65.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Fortis Insurance Company	Occupation VP, Regional Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00			

C.	Full Name (Last, First, Middle Initial) Mike Norderhaug		Date of Receipt MM / DD / YYYY 04 / 30 / 2008		
	Mailing Address 2425 Camelot Drive		Transaction ID: 20080502-123		
	City Brookfield	State WI	Zip Code 53045-3914	Amount of Each Receipt this Period 65.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Fortis Insurance Company	Occupation VP, Regional Sales			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00			

SUBTOTAL of Receipts This Page (optional)	▶	150.83
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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one) <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	PAGE 40 / 63
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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sheryle Ohme		Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 7409 W 105th Street		Transaction ID: 20080425-15
	City Bloomington	State MN	Zip Code 55438-2118
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Assurant Employee Benefits	Occupation VP Life Disability Claim	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Sheryle Ohme		Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 7409 W 105th Street		Transaction ID: 20080502-15
	City Bloomington	State MN	Zip Code 55438-2118
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Assurant Employee Benefits	Occupation VP Life Disability Claim	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Christopher Pagano		Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 185 Western Drive		Transaction ID: 20080502-32
	City Short Hills	State NJ	Zip Code 07078-1930
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
	Name of Employer Assurant Inc.	Occupation Executive VP-Fixed Income	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	5100.00
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 41 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Mary A. Pembroke		Date of Receipt
	Mailing Address 3617 W Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Rapid City	SD	57702-2333
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-45
Name of Employer Assurant Solutions		Occupation AVP Human Resources	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	<input type="text"/> 30.00

B.	Full Name (Last, First, Middle Initial) Mary A. Pembroke		Date of Receipt
	Mailing Address 3617 W Main Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Rapid City	SD	57702-2333
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-47
Name of Employer Assurant Solutions		Occupation AVP Human Resources	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	<input type="text"/> 30.00

C.	Full Name (Last, First, Middle Initial) Victor Perez		Date of Receipt
	Mailing Address 1636 S Triangle Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 0 2 / 2 0 0 8
	City	State	Zip Code
	New Berlin	WI	53151-1778
	FEC ID number of contributing federal political committee. C		Transaction ID: 755f840566f901a9e44
Name of Employer Fortis Insurance Company		Occupation Mgr, Government Relations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	<input type="text"/> 300.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 360.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Rosemary Polk		Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 624 Greenway Terrace		Transaction ID: 20080425-16
	City Kansas City	State MO	Zip Code 64113-1536
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.66
	Name of Employer Assurant Employees Benefits	Occupation VP Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.28	

B.	Full Name (Last, First, Middle Initial) Rosemary Polk		Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 624 Greenway Terrace		Transaction ID: 20080502-16
	City Kansas City	State MO	Zip Code 64113-1536
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.66
	Name of Employer Assurant Employees Benefits	Occupation VP Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.28	

C.	Full Name (Last, First, Middle Initial) Christopher Reznik		Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 11222 Quail Roost Dr		Transaction ID: 20080425-47
	City Miami	State FL	Zip Code 33157-6543
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.66
	Name of Employer Assurant Solutions	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.28	

SUBTOTAL of Receipts This Page (optional)	▶	124.98
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Christopher Rezyk

Mailing Address 11222 Quail Roost Dr

City Miami State FL Zip Code 33157-6543

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

Name of Employer Assurant Solutions Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.28

Date of Receipt 04 / 30 / 2008

Transaction ID: 20080502-49

Amount of Each Receipt this Period 41.66

B.

Full Name (Last, First, Middle Initial)
Dwayne Riekena

Mailing Address 3 Redwood Court

City Racine State WI Zip Code 53402-2617

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

Name of Employer Fortis Insurance Company Occupation Mgr, IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 09 / 2008

Transaction ID: 3dfc9e26f8c0c8b588e

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Elizabeth Riekena

Mailing Address 3 Redwood Court

City Racine State WI Zip Code 53402-2617

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

Name of Employer Fortis Insurance Company Occupation Mgr, Business Solutions Integ

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 09 / 2008

Transaction ID: e96195e40184b98d395

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 541.66

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 44 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Edward Rivard		Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 4619 S Hearth Ridge Court		Transaction ID: 20080425-37
	City New Berlin	State WI	Zip Code 53151-9250
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
	Name of Employer Fortis Insurance Company	Occupation Dir, IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	

B.	Full Name (Last, First, Middle Initial) Edward Rivard		Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 4619 S Hearth Ridge Court		Transaction ID: 20080502-39
	City New Berlin	State WI	Zip Code 53151-9250
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
	Name of Employer Fortis Insurance Company	Occupation Dir, IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	

C.	Full Name (Last, First, Middle Initial) John S. Roberts		Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 11 Mitchellwood Drive		Transaction ID: 70060b9522beb7e5107
	City Falmouth	State ME	Zip Code 04105
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
	Name of Employer Assurant Employee Benefits	Occupation SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 625.00	

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: PAGE 45 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John S. Roberts

Mailing Address 11 Mitchellwood Drive

City Falmouth State ME Zip Code 04105

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

Name of Employer Assurant Employee Benefits Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt: 04 / 30 / 2008
Transaction ID: dc27304e71576c92786
 Amount of Each Receipt this Period: 125.00

B.

Full Name (Last, First, Middle Initial)
John Rogers

Mailing Address 67 Chester Street

City Arlington State MA Zip Code 02476-7606

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

Name of Employer John Alden Life Insurance Company Occupation VP, Network Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 15 / 2008
Transaction ID: 20080425-124
 Amount of Each Receipt this Period: 62.50

C.

Full Name (Last, First, Middle Initial)
John Rogers

Mailing Address 67 Chester Street

City Arlington State MA Zip Code 02476-7606

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

Name of Employer John Alden Life Insurance Company Occupation VP, Network Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 04 / 30 / 2008
Transaction ID: 20080502-130
 Amount of Each Receipt this Period: 62.50

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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: PAGE 46 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Eric Schulz

Mailing Address 7315 Western Avenue

City Darien State IL Zip Code 60561-4157

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

Name of Employer Fortis Insurance Company Occupation VP, IT Business Solutions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.28

Date of Receipt 04 / 15 / 2008

Transaction ID: 20080425-111

Amount of Each Receipt this Period 104.16

B.

Full Name (Last, First, Middle Initial)
Eric Schulz

Mailing Address 7315 Western Avenue

City Darien State IL Zip Code 60561-4157

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

Name of Employer Fortis Insurance Company Occupation VP, IT Business Solutions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.28

Date of Receipt 04 / 30 / 2008

Transaction ID: 20080502-117

Amount of Each Receipt this Period 104.16

C.

Full Name (Last, First, Middle Initial)
Valerie Seasholtz

Mailing Address 1771 NW 17th Street

City Homestead State FL Zip Code 33030

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

Name of Employer Assurant Solutions Occupation Operations Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 15 / 2008

Transaction ID: 20080425-6

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 258.32

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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Valerie Seasholtz	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 1771 NW 17th Street	Transaction ID: 20080502-5
	City State Zip Code Homestead FL 33030	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Assurant Solutions	Occupation Operations Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Kyle E. See	Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 4524 Robertson Ave	Transaction ID: 20080425-17
	City State Zip Code Sacramento CA 95821-4434	Amount of Each Receipt this Period 41.66
	FEC ID number of contributing federal political committee. C	
Name of Employer Assurant Employee Benefits	Occupation Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.28	

C.	Full Name (Last, First, Middle Initial) Kyle E. See	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 4524 Robertson Ave	Transaction ID: 20080502-18
	City State Zip Code Sacramento CA 95821-4434	Amount of Each Receipt this Period 41.66
	FEC ID number of contributing federal political committee. C	
Name of Employer Assurant Employee Benefits	Occupation Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.28	

SUBTOTAL of Receipts This Page (optional)	133.32
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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) John Sheehan		Date of Receipt
	Mailing Address 117 Antonia Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lincroft	NJ	07738
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
	Name of Employer Assurant Inc.		Occupation VP Legal
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Transaction ID: 20080425-31
		<input type="text"/> 240.00	Amount of Each Receipt this Period
			<input type="text"/> 30.00

B.	Full Name (Last, First, Middle Initial) John Sheehan		Date of Receipt
	Mailing Address 117 Antonia Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lincroft	NJ	07738
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
	Name of Employer Assurant Inc.		Occupation VP Legal
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Transaction ID: 20080502-33
		<input type="text"/> 240.00	Amount of Each Receipt this Period
			<input type="text"/> 30.00

C.	Full Name (Last, First, Middle Initial) Lesley Silvester		Date of Receipt
	Mailing Address 2 Columbus Avenue # 19B		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	New York	NY	10023-6924
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
	Name of Employer Assurant Inc.		Occupation Evp Fortis Inc.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Transaction ID: d82643c59b76abe06fa
		<input type="text"/> 5000.00	Amount of Each Receipt this Period
			<input type="text"/> 5000.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5060.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jean Smith

Mailing Address 439 Kimberly Drive

City State Zip Code
Waukesha WI 53188-3319

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

Name of Employer Fortis Insurance Company Occupation Dir, Underwriting Risk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 333.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-90

Amount of Each Receipt this Period
41.66

B.

Full Name (Last, First, Middle Initial)
Jean Smith

Mailing Address 439 Kimberly Drive

City State Zip Code
Waukesha WI 53188-3319

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

Name of Employer Fortis Insurance Company Occupation Dir, Underwriting Risk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 333.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-95

Amount of Each Receipt this Period
41.66

C.

Full Name (Last, First, Middle Initial)
Karen Smith

Mailing Address 8535 S Cathlynn Court

City State Zip Code
Oak Creek WI 53154-8009

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

Name of Employer Fortis Insurance Company Occupation Dir, IT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 497.50

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 8ee5f211c8aa4283298

Amount of Each Receipt this Period
62.50

SUBTOTAL of Receipts This Page (optional) ► **145.82**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Karen Smith

Mailing Address 8535 S Cathlynn Court

City State Zip Code
Oak Creek WI 53154-8009

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

Name of Employer Fortis Insurance Company Occupation Dir, IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 497.50

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-118

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
David Staley

Mailing Address Coverage Insurance Agency

City State Zip Code
Grand Haven MI 49417-9442

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

Name of Employer Fortis Insurance Company Occupation Dir, Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-131

Amount of Each Receipt this Period
37.50

C.

Full Name (Last, First, Middle Initial)
David Staley

Mailing Address 11329 Commerce Ste 2

City State Zip Code
Fort Gratiot MI 48059

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

Name of Employer Fortis Insurance Company Occupation Dir, Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: b4a28469d24cbff08ed

Amount of Each Receipt this Period
37.50

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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: PAGE 51 / 63

(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Charles Steele

Mailing Address 931 Hawthorne Drive

City State Zip Code
Delafield WI 53018-1348

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

Name of Employer Occupation
Fortis Insurance Company VP, Agent Sales Suppt & Mkting

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 458.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-118

Amount of Each Receipt this Period

62.50

B.

Full Name (Last, First, Middle Initial)
Charles Steele

Mailing Address PO Box 123

City State Zip Code
Aurora IN 47001-0123

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

Name of Employer Occupation
Fortis Insurance Company VP, Agent Sales Suppt & Mkting

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 458.33

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-124

Amount of Each Receipt this Period

20.83

C.

Full Name (Last, First, Middle Initial)
Sheila Sweeney

Mailing Address 102-55 67th Drive

City State Zip Code
Forest Hill NY 11375

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

Name of Employer Occupation
Assurant Inc VP Benefits

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-32

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional) ▶

143.33

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: PAGE 52 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Sheila Sweeney

Mailing Address 102-55 67th Drive

City State Zip Code
Forest Hill NY 11375

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

Name of Employer Assurant Inc Occupation VP Benefits

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-34

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
Christopher Trost

Mailing Address 234 N Broadway

City State Zip Code
Milwaukee WI 53202-5825

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

Name of Employer Fortis Insurance Company Occupation VP, Planning

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-91

Amount of Each Receipt this Period
37.50

C.

Full Name (Last, First, Middle Initial)
Christopher Trost

Mailing Address 234 N Broadway

City State Zip Code
Milwaukee WI 53202-5825

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

Name of Employer Fortis Insurance Company Occupation VP, Planning

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-96

Amount of Each Receipt this Period
37.50

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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 53 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) David Tulbert		Date of Receipt
	Mailing Address N105W14490 Wilson Circle		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Germantown	WI	53022-4300
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-92
Name of Employer Fortis Insurance Company		Occupation VP, Compliance & Ethics	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="60.00"/>
		<input type="text" value="480.00"/>	

B.	Full Name (Last, First, Middle Initial) David Tulbert		Date of Receipt
	Mailing Address N105W14490 Wilson Circle		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Germantown	WI	53022-4300
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-97
Name of Employer Fortis Insurance Company		Occupation VP, Compliance & Ethics	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="60.00"/>
		<input type="text" value="480.00"/>	

C.	Full Name (Last, First, Middle Initial) Donald Tuscany		Date of Receipt
	Mailing Address 3710 Foxwood Road		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Racine	WI	53405-4941
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-93
Name of Employer Fortis Insurance Company		Occupation VP, Finance -Product Line	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="320.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="160.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 63
(check only one)

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

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)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Donald Tuscany

Mailing Address 3710 Foxwood Road

City State Zip Code
Racine WI 53405-4941

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

Name of Employer Fortis Insurance Company Occupation VP, Finance -Product Line

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 8

Transaction ID: 20080502-98

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Mary Vollkommer

Mailing Address 2985 Koepke Road

City State Zip Code
Northbrook IL 60062-5817

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

Name of Employer Fortis Insurance Company Occupation VP, Product Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 8

Transaction ID: 3c1572e3f081abc7b60

Amount of Each Receipt this Period
2500.00

C.

Full Name (Last, First, Middle Initial)
Jayne Waggoner

Mailing Address 1505 Copperdale Dr.

City State Zip Code
Rapid City SD 57703

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

Name of Employer Assurant Health Occupation Asst. VP Product Dev. & Pricing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 8

Transaction ID: 20080425-50

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **2570.00**

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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jayne Waggoner	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 1505 Copperdale Dr.	Transaction ID: 20080502-52
	City State Zip Code Rapid City SD 57703	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Assurant Health	Occupation Asst. VP Product Dev. & Pricing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) Jennifer L. Walkowiak	Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address 410 E Ship St	Transaction ID: 20080425-95
	City State Zip Code Milwaukee WI 53212-3989	Amount of Each Receipt this Period 41.66
	FEC ID number of contributing federal political committee. C	
Name of Employer Assurant Health	Occupation Director of Production Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.28	

C.	Full Name (Last, First, Middle Initial) Jennifer L. Walkowiak	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 410 E Ship St	Transaction ID: 20080502-100
	City State Zip Code Milwaukee WI 53212-3989	Amount of Each Receipt this Period 41.66
	FEC ID number of contributing federal political committee. C	
Name of Employer Assurant Health	Occupation Director of Production Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.28	

SUBTOTAL of Receipts This Page (optional)	113.32
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 / 63
	<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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Gregory West		Date of Receipt
	Mailing Address 1804 Berkshire Drive		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Green Bay	WI	54313-7378
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-119
Name of Employer Fortis Insurance Company		Occupation VP, Direct To Agent Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="60.00"/>
		<input type="text" value="420.00"/>	

B.	Full Name (Last, First, Middle Initial) Gregory West		Date of Receipt
	Mailing Address PO Box 810		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Osage Beach	MO	65065-0810
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080502-125
Name of Employer Fortis Insurance Company		Occupation VP, Direct To Agent Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="60.00"/>
		<input type="text" value="420.00"/>	

C.	Full Name (Last, First, Middle Initial) Matthew Wieck		Date of Receipt
	Mailing Address 1924 N Hubbard Street		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Milwaukee	WI	53212-3792
	FEC ID number of contributing federal political committee. C		Transaction ID: 20080425-98
Name of Employer Fortis Insurance Company		Occupation Dir, Product Actuary	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="329.96"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="160.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 57 / 63
	<input checked="" 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)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Matthew Wieck	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address 1924 N Hubbard Street	Transaction ID: 20080502-103
	City State Zip Code Milwaukee WI 53212-3792	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Fortis Insurance Company	Occupation Dir, Product Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 329.96	

B.	Full Name (Last, First, Middle Initial) Jon Wirkkula	Date of Receipt MM / DD / YYYY 04 / 15 / 2008
	Mailing Address W198N11483 Jamestree Road	Transaction ID: 20080425-100
	City State Zip Code Germantown WI 53022-2990	Amount of Each Receipt this Period 52.08
	FEC ID number of contributing federal political committee. C	
Name of Employer Fortis Insurance Company	Occupation Associate Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 404.16	

C.	Full Name (Last, First, Middle Initial) Jon Wirkkula	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address W198N11483 Jamestree Road	Transaction ID: 20080502-105
	City State Zip Code Germantown WI 53022-2990	Amount of Each Receipt this Period 52.08
	FEC ID number of contributing federal political committee. C	
Name of Employer Fortis Insurance Company	Occupation Associate Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 404.16	

SUBTOTAL of Receipts This Page (optional)	▶	144.16
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Miles Yakre

Mailing Address 19 Byron Lane

City State Zip Code
Fanwood NJ 07023-1001

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

Name of Employer Assurant Inc. Occupation VP Corporate Actuary & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2008

Transaction ID: 20080502-17

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Craig Yopp

Mailing Address 524 Westberry Dr.

City State Zip Code
Rapid City SD 57702-2716

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

Name of Employer Assurant Solutions Occupation VP Finance & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2008

Transaction ID: 20080425-41

Amount of Each Receipt this Period
60.00

C.

Full Name (Last, First, Middle Initial)
Craig Yopp

Mailing Address 524 Westberry Dr.

City State Zip Code
Rapid City SD 57702-2716

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

Name of Employer Assurant Solutions Occupation VP Finance & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
04 / 30 / 2008

Transaction ID: 20080502-43

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)	▶	1120.00
TOTAL This Period (last page this line number only)	▶	37294.60

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) AHIP PAC	Transaction ID: 98053-6035119891166
	Mailing Address 601 Pennsylvania South Building Ste 500	Date of Disbursement MM / DD / YYYY 04 / 03 / 2008
	City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution

B.	Full Name (Last, First, Middle Initial) BadgerPAC	Transaction ID: 84176-1334955096244
	Mailing Address 1831 Bay Street SE	Date of Disbursement MM / DD / YYYY 04 / 30 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution

C.	Full Name (Last, First, Middle Initial) Friends of John Boehner	Transaction ID: 41888-3295251727104
	Mailing Address 7908-12 Cincinnati Dayton Road	Date of Disbursement MM / DD / YYYY 04 / 29 / 2008
	City West Chester State OH Zip Code 45069	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name John A. Boehner	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Friends of Roy Blunt <hr/> Mailing Address PO Box 50100 <hr/> City Springfield State MO Zip Code 65805 <hr/> Purpose of Disbursement Contribution Candidate Name Roy D. Blunt Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 43483-514217555229 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00
	Category/Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Gard for Congress <hr/> Mailing Address PO Box 277 <hr/> City Green Bay State WI Zip Code 54305 <hr/> Purpose of Disbursement Contribution Candidate Name John G. Gard Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 96786-0113031268119 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Martinez for Senate <hr/> Mailing Address 610 S Boulevard <hr/> City Tampa State FL Zip Code 33606 <hr/> Purpose of Disbursement Contribution Candidate Name Mel Martinez Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 86928-6223413348197 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) McConnell Senate Committee '08 Mailing Address PO Box 1496 City Louisville State KY Zip Code 40201 Purpose of Disbursement Contribution Candidate Name Mitch McConnell Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 43483-6043969988822 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) McConnell Senate Committee '08 Mailing Address PO Box 1496 City Louisville State KY Zip Code 40201 Purpose of Disbursement Contribution Candidate Name Mitch McConnell Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 43483-3699914813041 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
C. Full Name (Last, First, Middle Initial) Moore for Congress Mailing Address PO Box 14631 City Shawnee Mission State KS Zip Code 66285 Purpose of Disbursement Contribution Candidate Name Dennis Moore Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 03 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 86928-7532159686088 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 62 / 63

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

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NAME OF COMMITTEE (In Full)
Assurant Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Prosperity PAC	Transaction ID: 41815-5807306170463
	Mailing Address 1006 Pendleton Street	Date of Disbursement MM / DD / YYYY 04 / 29 / 2008
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	
B.	Full Name (Last, First, Middle Initial) Salazar for Senate	Transaction ID: 98053-5720483660697
	Mailing Address PO Box 600	Date of Disbursement MM / DD / YYYY 04 / 02 / 2008
	City Denver State CO Zip Code 80201	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Ken Salazar	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Contribution	

SUBTOTAL of Disbursements This Page (optional) ►

3500.00

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

22500.00

Image# 28931585608

Form/Schedule: **F3X**

Transaction ID:
