FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

National Association of Mutual Insurance Companies PAC

ADDRESS (number and street) ▼

3601 Vincennes Road

PO Box 68700

☐ Check if different than previously reported. (ACC)

Indianapolis | IN | 46268 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00170258

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☒ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 07 / 01 / 2011 through 12 / 31 / 2011

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 Gregg Dykstra

Signature of Treasurer *Gregg Dykstra* ***[Electronically Filed]*** Date 01 / 27 / 2012

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							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

Report Covering the Period: From: 07 / 01 / 2011 To: 12 / 31 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2011		29495.47
(b) Cash on Hand at Beginning of Reporting Period	21492.67	
(c) Total Receipts (from Line 19)	183470.43	346284.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	204963.10	375779.91
7. Total Disbursements (from Line 31)	106213.60	277030.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	98749.50	98749.50
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3X** (Rev. 06/2004)

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

Report Covering the Period: From: 07 / 01 / 2011 To: 12 / 31 / 2011

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	129915.16	233551.30
(ii) Unitemized	21294.34	68470.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	151209.50	302022.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	30750.00	42000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	181959.50	344022.24
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)	1455.87	2167.99
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	55.06	94.21
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	183470.43	346284.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	183470.43	346284.44

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	1463.60	2280.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	1463.60	2280.41
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	98000.00	265500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	6750.00	9250.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	106213.60	277030.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	106213.60	277030.41

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	181959.50	344022.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	181959.50	344022.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	1463.60	2280.41
37. Offsets to Operating Expenditures (from Line 15, page 3)	1455.87	2167.99
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	7.73	112.42

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): John Abbott
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : E41E6015D3A9043A48D
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Maurice R. Abens CIC, PFMM
Mailing Address: PO Box 35
City: Humboldt State: IA Zip Code: 50548-0035
FEC ID number of contributing federal political committee: C
Name of Employer: Humboldt Mutual Insurance Association
Occupation: Secretary/Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1200.00
Date of Receipt: 09 / 14 / 2011
Transaction ID : F8C3D729CF925B6A0EB
Amount of Each Receipt this Period: 1200.00

C. Full Name (Last, First, Middle Initial): Don H. Adams
Mailing Address: PO Box 571310
City: Murray State: UT Zip Code: 84157-1310
FEC ID number of contributing federal political committee: C
Name of Employer: Bear River Mutual Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 06635EBB80362C78B28
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Cathy M. Adcock
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 440.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : A2AE2AE67C57C556050
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial): Cathy M. Adcock
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 440.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : 4D9C0D69F10B51CCC14
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): Cathy M. Adcock
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 440.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 95539F5CB643AD34CBE
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 110.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Cathy M. Adcock
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 440.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : DF33D7E9E869CB4CE54
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial): Cathy M. Adcock
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 440.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 835D8CA7B79557696F1
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial): Cathy M. Adcock
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 440.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 161C967E6A03DA88935
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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Todd E. Albert
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 718.75
Date of Receipt: 07 / 19 / 2011
Transaction ID : 2E97DCD50BE1783641E
Amount of Each Receipt this Period: 31.25

B. Full Name (Last, First, Middle Initial): Todd E. Albert
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 718.75
Date of Receipt: 08 / 02 / 2011
Transaction ID : 0CE05A014922444F2CA
Amount of Each Receipt this Period: 31.25

C. Full Name (Last, First, Middle Initial): Todd E. Albert
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 718.75
Date of Receipt: 08 / 17 / 2011
Transaction ID : EB0B3122B637A85CD38
Amount of Each Receipt this Period: 31.25

SUBTOTAL of Receipts This Page (optional) ▶ 93.75

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Todd E. Albert

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 718.75

Date of Receipt: 09 / 01 / 2011

Transaction ID : 1E6F68A05029A197055

Amount of Each Receipt this Period: 31.25

B. Full Name (Last, First, Middle Initial)
Todd E. Albert

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 718.75

Date of Receipt: 09 / 12 / 2011

Transaction ID : F4BDB8AA7C90706131B

Amount of Each Receipt this Period: 31.25

C. Full Name (Last, First, Middle Initial)
Todd E. Albert

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 718.75

Date of Receipt: 09 / 27 / 2011

Transaction ID : 79AC8678C516EDB19E3

Amount of Each Receipt this Period: 31.25

SUBTOTAL of Receipts This Page (optional) ▶ 93.75

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Todd E. Albert
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 718.75
Date of Receipt: 10 / 11 / 2011
Transaction ID : 92DA75FBDE797ADC701
Amount of Each Receipt this Period: 31.25

B. Full Name (Last, First, Middle Initial): Todd E. Albert
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 718.75
Date of Receipt: 10 / 26 / 2011
Transaction ID : 49E10F83EF1D027C731
Amount of Each Receipt this Period: 31.25

C. Full Name (Last, First, Middle Initial): Todd E. Albert
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 718.75
Date of Receipt: 11 / 08 / 2011
Transaction ID : 39859F79326C45F9BBA
Amount of Each Receipt this Period: 31.25

SUBTOTAL of Receipts This Page (optional) ▶ 93.75

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Todd E. Albert
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 718.75
Date of Receipt: 11 / 21 / 2011
Transaction ID : 0A68DB739F1BE5DC4E3
Amount of Each Receipt this Period: 31.25

B. Full Name (Last, First, Middle Initial): Todd E. Albert
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 718.75
Date of Receipt: 11 / 30 / 2011
Transaction ID : 87BFA9806880C60B9D1
Amount of Each Receipt this Period: 31.25

C. Full Name (Last, First, Middle Initial): Todd E. Albert
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Vice President of Information Systems
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 718.75
Date of Receipt: 12 / 19 / 2011
Transaction ID : F62A36D7404955746E7
Amount of Each Receipt this Period: 31.25

SUBTOTAL of Receipts This Page (optional) ▶ 93.75

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Thomas Alighieri
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt: 10 / 19 / 2011
Transaction ID : 9E3580365B3946E405E
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): Thomas Alighieri
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt: 11 / 02 / 2011
Transaction ID : BBD10E1D7420F7456B9
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): Thomas Alighieri
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt: 11 / 16 / 2011
Transaction ID : 59DEDE9A0F5D4C03704
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 11 / 30 / 2011
Transaction ID : 18815DFABF926C44020

Amount of Each Receipt this Period: 20.00

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

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 12 / 14 / 2011
Transaction ID : 79DE9B12E4CB5205712

Amount of Each Receipt this Period: 20.00

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

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 12 / 28 / 2011
Transaction ID : 8796C4245B819677AFF

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2843.00
Date of Receipt: 07 / 15 / 2011
Transaction ID : AC8657419E75AE52EE3
Amount of Each Receipt this Period: 39.00

B.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2843.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : 37224EB690D6D97A595
Amount of Each Receipt this Period: 39.00

C.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2843.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : D71C112871330ED2AA3
Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ▶ 117.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2843.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 9DB6CCF5C9A17CE2BC7
Amount of Each Receipt this Period: 39.00

B.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2843.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : 382219B35A7225D60BB
Amount of Each Receipt this Period: 39.00

C.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2843.00
Date of Receipt: 09 / 23 / 2011
Transaction ID : 8B38CECFC2FB3A10715
Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ▶ 117.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2843.00
Date of Receipt: 09 / 30 / 2011
Transaction ID : 2DFF55AFE05B635B351
Amount of Each Receipt this Period: 800.00

B.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2843.00
Date of Receipt: 10 / 07 / 2011
Transaction ID : B04D5F42CA3F084EABC
Amount of Each Receipt this Period: 186.00

C.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2843.00
Date of Receipt: 10 / 21 / 2011
Transaction ID : E47F8CE0E5410063D82
Amount of Each Receipt this Period: 186.00

SUBTOTAL of Receipts This Page (optional) ▶ 1172.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville
State: IN
Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2843.00
Date of Receipt: 11 / 04 / 2011
Transaction ID : 28799F8A24997583487
Amount of Each Receipt this Period: 186.00

B.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville
State: IN
Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2843.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : 7329FDF327863B9C950
Amount of Each Receipt this Period: 186.00

C.
Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville
State: IN
Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2843.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : F1E9C3723292383E497
Amount of Each Receipt this Period: 186.00

SUBTOTAL of Receipts This Page (optional) ▶ 558.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2843.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : A8454FE1271F6EC4019
Amount of Each Receipt this Period: 186.00

B. Full Name (Last, First, Middle Initial): Neil Alldredge
Mailing Address: 1493 Hunters Gln
City: Zionsville State: IN Zip Code: 46077-3804
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President - State and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2843.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : 67FB3BD4420B1170146
Amount of Each Receipt this Period: 186.00

C. Full Name (Last, First, Middle Initial): Diane Allen
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Personnel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : 1798315743A1057FB1E
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 412.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Diane Allen
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Personnel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : 17A54E155DA49A109E3
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): Diane Allen
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Personnel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 85EEA703264BDD450BC
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): Diane Allen
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Personnel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : 696CF9005F4FCA178A1
Amount of Each Receipt this Period: 50.00

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Diane Allen
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Personnel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 16C47397B310ECB6BA9
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial): Diane Allen
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Personnel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 90AF799FE895420A8D5
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial): Anthony Anastanio
Mailing Address: 350 California St Ste 2100
City: San Francisco State: CA Zip Code: 94104-1409
FEC ID number of contributing federal political committee: C
Name of Employer: General Reinsurance Corporation
Occupation: West Region Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 08 / 09 / 2011
Transaction ID : FBEAC26489AE639FFDB
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1100.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 05 / 2011

Transaction ID : A87AB2B66692A80052A

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
John B. Arbuckle Jr., CIC,

Mailing Address HC 37 Box 144

City: Lewisburg | State: WV | Zip Code: 24901-9532

FEC ID number of contributing federal political committee. C

Name of Employer: Farmers Home Fire Insurance Company of
Occupation: Secretary-Treasurer/Chairman

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 39C5C45C9D07E0584EF

Amount of Each Receipt this Period: 4000.00

C. Full Name (Last, First, Middle Initial)
Herman J. Arends

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Board Member

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 05 / 2011

Transaction ID : A57B6296828647849FF

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 4750.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Rick A. Arens
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Underwriting Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 587E0978201FB0F1EF9
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Rick A. Arens
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Underwriting Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 2E94F69C0BC8C54BF34
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): W. Kim Austen
Mailing Address: PO Box 974
City: Des Moines State: IA Zip Code: 50391-2000
FEC ID number of contributing federal political committee: C
Name of Employer: ALLIED Property and Casualty Insurance
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 07 / 26 / 2011
Transaction ID : 1DA270F64CC40382E49
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1040.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): James P. Ayers
Mailing Address: 9 Kymer Rd
City: Branchville | State: NJ | Zip Code: 07826-4164
FEC ID number of contributing federal political committee: C
Name of Employer: Franklin Mutual Insurance Company
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 08 / 31 / 2011
Transaction ID : 7106B7D4-2F1D-44E6-
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Lisa M. Ayotte
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: AVP- Real Estate & Operational Service
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 360.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : EBB233AE841A24874BA
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): Lisa M. Ayotte
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: AVP- Real Estate & Operational Service
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 360.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : 893D67CFB1E0227AC78
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 560.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Lisa M. Ayotte

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: AVP- Real Estate & Operational Service

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 605C7A1E5BE68A96F81

Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Lisa M. Ayotte

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: AVP- Real Estate & Operational Service

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : CFA6BA19F2731E039DC

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Lisa M. Ayotte

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: AVP- Real Estate & Operational Service

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 46A37029BFF01F36C58

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Lisa M. Ayotte

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: AVP- Real Estate & Operational Service

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 4206E437C305A78DBEF

Amount of Each Receipt this Period: 30.00

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

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 26 / 2011

Transaction ID : BB3EABE9C6DEAD7E074

Amount of Each Receipt this Period: 500.00

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

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : CE66A026DA879D1D5FD

Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 580.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : EF8AB4555EF7BC0E199

Amount of Each Receipt this Period: 50.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : AA21EEF58524114FD06

Amount of Each Receipt this Period: 50.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : EE9225179CFB5E70A4B

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Roger Ballard CPA
Mailing Address: PO Box 618
City: Columbia State: MO Zip Code: 65205-0618
FEC ID number of contributing federal political committee: C
Name of Employer: Columbia Mutual Insurance Company
Occupation: Senior Vice President/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : 94643ABFDE3BE24AC10
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Kevin Barnes
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : B514CDD9D2D0C97C73A
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Michael E. Beaird
Mailing Address: 804 S Lincoln St
City: Philo State: IL Zip Code: 61864-9680
FEC ID number of contributing federal political committee: C
Name of Employer: Central Illinois Mutual Insurance Comp
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 38158C5267D0F0A4D8F
Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ▶ 675.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Sandy J. Bear PFMM
Mailing Address: 819 W Lafayette St, Apt 69
City: Watseka State: IL Zip Code: 60970-1090
FEC ID number of contributing federal political committee: C
Name of Employer: Watseka Mutual Insurance Company
Occupation: Secretary/Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 46665AA0D76087E4982
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial): Walter Bennett
Mailing Address: 2300 Garden Rd
City: Monterey State: CA Zip Code: 93940-5326
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: Department Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 10 / 11 / 2011
Transaction ID : 1B4333B775C53853CE9
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3000.14
Date of Receipt: 07 / 08 / 2011
Transaction ID : 134FA321E3FFFAF6687
Amount of Each Receipt this Period: 115.39

SUBTOTAL of Receipts This Page (optional) ▶ 565.39

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth | State: MI | Zip Code: 48787-0001
FEC ID number of contributing federal political committee.: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3000.14
Date of Receipt: 07 / 22 / 2011
Transaction ID : AAD90D484DE55CC5274
Amount of Each Receipt this Period: 115.39

B. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth | State: MI | Zip Code: 48787-0001
FEC ID number of contributing federal political committee.: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3000.14
Date of Receipt: 08 / 03 / 2011
Transaction ID : 7A95B8891343FB5956B
Amount of Each Receipt this Period: 115.39

C. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth | State: MI | Zip Code: 48787-0001
FEC ID number of contributing federal political committee.: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3000.14
Date of Receipt: 08 / 19 / 2011
Transaction ID : A5574AFA355A59EC253
Amount of Each Receipt this Period: 115.39

SUBTOTAL of Receipts This Page (optional) ▶ 346.17

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.14
Date of Receipt: 09 / 02 / 2011
Transaction ID : 2B42344D50A075F5CA4
Amount of Each Receipt this Period: 115.39

B. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.14
Date of Receipt: 09 / 16 / 2011
Transaction ID : 2B1DBD086E1BE706567
Amount of Each Receipt this Period: 115.39

C. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.14
Date of Receipt: 09 / 30 / 2011
Transaction ID : BA129EF27A823CB819B
Amount of Each Receipt this Period: 115.39

SUBTOTAL of Receipts This Page (optional) ▶ 346.17

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.14
Date of Receipt: 10 / 14 / 2011
Transaction ID : E48AB7B871A7E4F6F83
Amount of Each Receipt this Period: 115.39

B. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.14
Date of Receipt: 10 / 28 / 2011
Transaction ID : 7CD7CF8D77084CFCCC0
Amount of Each Receipt this Period: 115.39

C. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.14
Date of Receipt: 11 / 14 / 2011
Transaction ID : 85042555244EF62F832
Amount of Each Receipt this Period: 115.39

SUBTOTAL of Receipts This Page (optional) ▶ 346.17

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.14
Date of Receipt: 11 / 25 / 2011
Transaction ID : D925B4C9D471F66F54E
Amount of Each Receipt this Period: 115.39

B. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.14
Date of Receipt: 12 / 09 / 2011
Transaction ID : 5BA9319140726D93E54
Amount of Each Receipt this Period: 115.39

C. Full Name (Last, First, Middle Initial): John S. Benson
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.14
Date of Receipt: 12 / 23 / 2011
Transaction ID : CCB2E9D2096BFE18000
Amount of Each Receipt this Period: 115.39

SUBTOTAL of Receipts This Page (optional) ▶ 346.17

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Deborah Betten
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Claims Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 308.52
Date of Receipt: 09 / 29 / 2011
Transaction ID : B9E45676D18F999E34D
Amount of Each Receipt this Period: 51.42

B. Full Name (Last, First, Middle Initial): Deborah Betten
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Claims Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 308.52
Date of Receipt: 11 / 07 / 2011
Transaction ID : 506B3509625683F7F53
Amount of Each Receipt this Period: 51.42

C. Full Name (Last, First, Middle Initial): Deborah Betten
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Claims Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 308.52
Date of Receipt: 12 / 02 / 2011
Transaction ID : 0C6A2A6A0396E2B2B92
Amount of Each Receipt this Period: 51.42

SUBTOTAL of Receipts This Page (optional) ▶ 154.26

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 219

City: Sublimity | State: OR | Zip Code: 97385-0219

FEC ID number of contributing federal political committee. C

Name of Employer: Oregon Mutual Insurance Company
Occupation: Vice President - Marketing

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 08 / 23 / 2011

Transaction ID : 31D80541AFA98A3A8D9

Amount of Each Receipt this Period: 400.00

B. Full Name (Last, First, Middle Initial)
Stuart R. Birn

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: First Vice President, Secretary & Gene

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 093A382E66F714C8759

Amount of Each Receipt this Period: 60.00

C. Full Name (Last, First, Middle Initial)
Stuart R. Birn

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: First Vice President, Secretary & Gene

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : EC14ADAF733787DCC96

Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ▶ 520.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
John J. Bishop CPCU, CLU

Mailing Address 1390 Picardae Ct

City: Powell
State: OH
Zip Code: 43065-9791

FEC ID number of contributing federal political committee.: C

Name of Employer: Motorists Mutual Insurance Company
Occupation: Chairman, President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : A0F0B9D04BEBC98E2EF

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Clarence Boyle Sr.

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 05 / 2011

Transaction ID : 2B74F5860736341CCE3

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Clarence Boyle Sr.

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 03 / 2011

Transaction ID : BE475D150BE5103319D

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Clarence Boyle Sr.

Mailing Address 200 N Main St

City: Bel Air | State: MD | Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 28 / 2011

Transaction ID : F093FC9FB93C778840B

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Sherylyn Bradford

Mailing Address PO Box 618

City: Columbia | State: MO | Zip Code: 65205-0618

FEC ID number of contributing federal political committee. C

Name of Employer: Columbia Mutual Insurance Company
Occupation: Manager Application Services

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 06 / 2011

Transaction ID : 44850F5A66615F1507B

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Lynn Brewer

Mailing Address 500 S US Highway 77A

City: Yoakum | State: TX | Zip Code: 77995-1399

FEC ID number of contributing federal political committee. C

Name of Employer: Hochheim Prairie Farm Mutual Insurance
Occupation: Director of Information Technology

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : FFACC116831CD848ACF

Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Harold Britton
Mailing Address: 5000 9th Ave S
City: Great Falls | State: MT | Zip Code: 59405-5708
FEC ID number of contributing federal political committee: C
Name of Employer: Cascade Farmers Mutual Insurance Compa
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 09 / 14 / 2011
Transaction ID : 5EB72171CDF3CF71BD1
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis | State: IN | Zip Code: 46214
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 325.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 4F7A39D53B62C6A2760
Amount of Each Receipt this Period: 12.50

C. Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis | State: IN | Zip Code: 46214
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 325.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : 9F9E2EA27B81D21409D
Amount of Each Receipt this Period: 12.50

SUBTOTAL of Receipts This Page (optional) ▶ 1025.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis State: IN Zip Code: 46214
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 325.00
Date of Receipt: 09 / 23 / 2011
Transaction ID : 656BEA09BCB00211063
Amount of Each Receipt this Period: 12.50

B. Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis State: IN Zip Code: 46214
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 325.00
Date of Receipt: 10 / 07 / 2011
Transaction ID : C2BF403832E4617AD50
Amount of Each Receipt this Period: 12.50

C. Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis State: IN Zip Code: 46214
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 325.00
Date of Receipt: 10 / 21 / 2011
Transaction ID : 6CA2C2961C8D6D12ACA
Amount of Each Receipt this Period: 12.50

SUBTOTAL of Receipts This Page (optional) ▶ 37.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis State: IN Zip Code: 46214
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00
Date of Receipt: 11 / 04 / 2011
Transaction ID : 4675AEEE5E1FADCBA6E
Amount of Each Receipt this Period: 12.50

B.
Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis State: IN Zip Code: 46214
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : 3D2C08BC064F1B46C4B
Amount of Each Receipt this Period: 12.50

C.
Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis State: IN Zip Code: 46214
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : FF09F5FD72A18452EF4
Amount of Each Receipt this Period: 12.50

SUBTOTAL of Receipts This Page (optional) ▶ 37.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis State: IN Zip Code: 46214
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 325.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : 3030F883882EFD4F678
Amount of Each Receipt this Period: 12.50

B. Full Name (Last, First, Middle Initial): Marsha Brown
Mailing Address: 320 Ashford Drive
City: Indianapolis State: IN Zip Code: 46214
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Regulatory Affairs Counsel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 325.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : 176E9F585F8E85602A8
Amount of Each Receipt this Period: 12.50

C. Full Name (Last, First, Middle Initial): James Buch PFMM
Mailing Address: PO Box 307
City: Keystone State: IA Zip Code: 52249-0307
FEC ID number of contributing federal political committee.: C
Name of Employer: Benton Mutual Insurance Association
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 325.00
Date of Receipt: 09 / 02 / 2011
Transaction ID : F66F22E35E58B4E3EB8
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 225.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Bob I. Buchanan
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Info. Systems &
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 462.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : E8F01C6D23CB31283AE
Amount of Each Receipt this Period: 42.00

B. Full Name (Last, First, Middle Initial): Bob I. Buchanan
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Info. Systems &
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 462.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : 7EF3EF211F9E70720CC
Amount of Each Receipt this Period: 42.00

C. Full Name (Last, First, Middle Initial): Bob I. Buchanan
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Info. Systems &
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 462.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 4D341EA035A81B833FE
Amount of Each Receipt this Period: 42.00

SUBTOTAL of Receipts This Page (optional) ▶ 126.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Bob I. Buchanan
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Info. Systems &
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 462.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 92A5DD145BE542A3E26
Amount of Each Receipt this Period: 42.00

B. Full Name (Last, First, Middle Initial): Bob I. Buchanan
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Info. Systems &
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 462.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : B38B50D7199A448254B
Amount of Each Receipt this Period: 42.00

C. Full Name (Last, First, Middle Initial): Thaddeus J. Buda
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : A562352DE0A26305895
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 584.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): G. Richer Budke
Mailing Address: PO Box 219
City: Sublimity State: OR Zip Code: 97385-0219
FEC ID number of contributing federal political committee: C
Name of Employer: Sublimity Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 400.00
Date of Receipt: 08 / 22 / 2011
Transaction ID : D3AEC72E8EBB655388A
Amount of Each Receipt this Period: 400.00

B. Full Name (Last, First, Middle Initial): Stephen Buell
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 260.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : 7B1A7359DCCD55C8127
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Stephen Buell
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 260.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 260E8E71E4CEBE481ED
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Stephen Buell
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 737ACD54335C4D8FF82
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): John A. Bykowski
Mailing Address: PO Box 819
City: Appleton State: WI Zip Code: 54912-0819
FEC ID number of contributing federal political committee: C
Name of Employer: SECURA Insurance, A Mutual Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2750.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : CF2E523CF0E2C1A0348
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Jerry J. Canada CLU
Mailing Address: PO Box 1250
City: Indianapolis State: IN Zip Code: 46206-1250
FEC ID number of contributing federal political committee: C
Name of Employer: United Farm Family Mutual Insurance Co
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt: 09 / 29 / 2011
Transaction ID : FD071548801DAA66529
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 375.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Melinda Carlson
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Attorney, Legal
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 07 / 27 / 2011
Transaction ID : 962599A76A487393E7F
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): John S. Case
Mailing Address: 2302 Victoria Crossing Ln
City: Midlothian State: VA Zip Code: 23113-9679
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual Assurance Society of Virginia
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt: 07 / 08 / 2011
Transaction ID : 31187ECF9990DAF9FBF
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): John S. Case
Mailing Address: 2302 Victoria Crossing Ln
City: Midlothian State: VA Zip Code: 23113-9679
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual Assurance Society of Virginia
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt: 08 / 01 / 2011
Transaction ID : 55FE8CFAF7FE1D238F8
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 310.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): John S. Case
Mailing Address: 2302 Victoria Crossing Ln
City: Midlothian State: VA Zip Code: 23113-9679
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual Assurance Society of Virginia
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 360.00
Date of Receipt: 09 / 06 / 2011
Transaction ID : D6FBA21EF91FCFFE521
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial): John S. Case
Mailing Address: 2302 Victoria Crossing Ln
City: Midlothian State: VA Zip Code: 23113-9679
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual Assurance Society of Virginia
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 360.00
Date of Receipt: 10 / 03 / 2011
Transaction ID : 7D9213D37416CCF229E
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): John S. Case
Mailing Address: 2302 Victoria Crossing Ln
City: Midlothian State: VA Zip Code: 23113-9679
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual Assurance Society of Virginia
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 360.00
Date of Receipt: 11 / 03 / 2011
Transaction ID : DAE71BBE1662D2DD4F9
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): John S. Case
Mailing Address: 2302 Victoria Crossing Ln
City: Midlothian State: VA Zip Code: 23113-9679
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual Assurance Society of Virginia
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00
Date of Receipt: 12 / 02 / 2011
Transaction ID : 10EED2ABCB93ADE6302
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial): West Cassidy
Mailing Address: PO Box 3580
City: Hagatna State: GU Zip Code: 96932-3580
FEC ID number of contributing federal political committee: C
Name of Employer: Pacific Indemnity Insurance Company
Occupation: Executive Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00
Date of Receipt: 09 / 15 / 2011
Transaction ID : B27F23FE12AC0859235
Amount of Each Receipt this Period: 1100.00

C. Full Name (Last, First, Middle Initial): Steve J. Catranis
Mailing Address: 1439 Sequoia Cir
City: Toms River State: NJ Zip Code: 08753-2866
FEC ID number of contributing federal political committee: C
Name of Employer: Cumberland Mutual Fire Insurance Compa
Occupation: Senior Vice President - Marketing
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 08 / 09 / 2011
Transaction ID : 8B202176-76AA-4A40-
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1380.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Peter M. Cazzolla

Mailing Address 2300 Garden Rd

City: Monterey
State: CA
Zip Code: 93940-5326

FEC ID number of contributing federal political committee. C

Name of Employer: California Capital Insurance Company
Occupation: President and CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : F871014C3217730222A

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Charles M. Chamness

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee. C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 07 / 15 / 2011

Transaction ID : 8F9CACA7D26EFA0E46C

Amount of Each Receipt this Period: 90.00

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

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee. C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 07 / 29 / 2011

Transaction ID : 6ECC7895349A957AC5C

Amount of Each Receipt this Period: 90.00

SUBTOTAL of Receipts This Page (optional) ▶ 680.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Charles M. Chamness
Mailing Address: 527 W 46th St
City: Indianapolis
State: IN
Zip Code: 46208-3605
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : CE60F826F3F3638CB13
Amount of Each Receipt this Period: 90.00

B.
Full Name (Last, First, Middle Initial): Charles M. Chamness
Mailing Address: 527 W 46th St
City: Indianapolis
State: IN
Zip Code: 46208-3605
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : BF4FB16B9BFD9B24175
Amount of Each Receipt this Period: 90.00

C.
Full Name (Last, First, Middle Initial): Charles M. Chamness
Mailing Address: 527 W 46th St
City: Indianapolis
State: IN
Zip Code: 46208-3605
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : CA5A4E1E05EB8413560
Amount of Each Receipt this Period: 90.00

SUBTOTAL of Receipts This Page (optional) ▶ 270.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee: C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 23 / 2011

Transaction ID : 51C326DA61F5A2C50E1

Amount of Each Receipt this Period: 90.00

B. Full Name (Last, First, Middle Initial)
Charles M. Chamness

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee: C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 07 / 2011

Transaction ID : 184B1D0BA08D3AB4E1E

Amount of Each Receipt this Period: 90.00

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

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee: C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 21 / 2011

Transaction ID : B784DFCA7759373E1C2

Amount of Each Receipt this Period: 90.00

SUBTOTAL of Receipts This Page (optional) ▶ 270.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 11 / 04 / 2011

Transaction ID : 30382F3129803632C7F

Amount of Each Receipt this Period: 90.00

B. Full Name (Last, First, Middle Initial)
Charles M. Chamness

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 11 / 18 / 2011

Transaction ID : 087A2C77FC521E13F2E

Amount of Each Receipt this Period: 90.00

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

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 11 / 21 / 2011

Transaction ID : 0F94030B8EBFD2D9ECF

Amount of Each Receipt this Period: 160.00

SUBTOTAL of Receipts This Page (optional) ▶ 340.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 05 / 2011

Transaction ID : 6FC0E348B414C5CA891

Amount of Each Receipt this Period: 90.00

B. Full Name (Last, First, Middle Initial)
Charles M. Chamness

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 16 / 2011

Transaction ID : 0E8D67350EC659B70E1

Amount of Each Receipt this Period: 90.00

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

Mailing Address 527 W 46th St

City: Indianapolis
State: IN
Zip Code: 46208-3605

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 30 / 2011

Transaction ID : AD04CB1968BD93F5BDA

Amount of Each Receipt this Period: 90.00

SUBTOTAL of Receipts This Page (optional) ▶ 270.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Steve H. Chevalier

Mailing Address PO Box 40

City: Norwich
State: CT
Zip Code: 06360-0040

FEC ID number of contributing federal political committee.: C

Name of Employer: New London County Mutual Insurance Com
Occupation: President and CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 09 / 27 / 2011
Transaction ID : C0F3FEC9C16E8058971

Amount of Each Receipt this Period: 850.00

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

Mailing Address PO Box 608

City: Frederick
State: MD
Zip Code: 21705-0608

FEC ID number of contributing federal political committee.: C

Name of Employer: Frederick Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 09 / 27 / 2011
Transaction ID : A84D071AB7328BCAE4C

Amount of Each Receipt this Period: 800.00

C. Full Name (Last, First, Middle Initial)
Mark Coe

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt: 07 / 19 / 2011
Transaction ID : BCD64DC13D74510E101

Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 1675.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee.: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 08 / 02 / 2011
Transaction ID : 8132129834AE787B116
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee.: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 08 / 17 / 2011
Transaction ID : C3746CB2DE96AF258DA
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee.: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 84176E2FBA93FFC5AF6
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee.: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : 881480EA98499632F5E
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee.: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 7240E4DFF9DFA1BD92D
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee.: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 10 / 11 / 2011
Transaction ID : C4197D098316F26F5C7
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 10 / 26 / 2011
Transaction ID : EE91DBA42A8C775288E
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 11 / 08 / 2011
Transaction ID : 31AE5FDA116AEAD5DDE
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 11 / 21 / 2011
Transaction ID : 561BD55002F0FE062FE
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : D33839157045E1A030F
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Mark Coe
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: IT Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 12 / 19 / 2011
Transaction ID : 8B4DC35E724E03D9781
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Darwin G. Copeman CPCU
Mailing Address: 1202 Aerie Ln
City: Cameron State: MO Zip Code: 64429-2087
FEC ID number of contributing federal political committee: C
Name of Employer: Cameron National Insurance Company
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : 348DC72287701190C5A
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ▶ 200.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Darwin G. Copeman CPCU

Mailing Address 1202 Aerie Ln

City: Cameron | State: MO | Zip Code: 64429-2087

FEC ID number of contributing federal political committee. C

Name of Employer: Cameron National Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: 08 / 30 / 2011

Transaction ID : E21698B6D38B3DD431F

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Darwin G. Copeman CPCU

Mailing Address 1202 Aerie Ln

City: Cameron | State: MO | Zip Code: 64429-2087

FEC ID number of contributing federal political committee. C

Name of Employer: Cameron National Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 3A046638E4EE01EB90C

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Darwin G. Copeman CPCU

Mailing Address 1202 Aerie Ln

City: Cameron | State: MO | Zip Code: 64429-2087

FEC ID number of contributing federal political committee. C

Name of Employer: Cameron National Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 19657B4F5B267463B3F

Amount of Each Receipt this Period: 100.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Darwin G. Copeman CPCU

Mailing Address 1202 Aerie Ln

City: Cameron
State: MO
Zip Code: 64429-2087

FEC ID number of contributing federal political committee.: C

Name of Employer: Cameron National Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : B7F7820E2383B6B006A

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Darwin G. Copeman CPCU

Mailing Address 1202 Aerie Ln

City: Cameron
State: MO
Zip Code: 64429-2087

FEC ID number of contributing federal political committee.: C

Name of Employer: Cameron National Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: 10 / 26 / 2011

Transaction ID : 455200C2D0CB64CE5AE

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Darwin G. Copeman CPCU

Mailing Address 1202 Aerie Ln

City: Cameron
State: MO
Zip Code: 64429-2087

FEC ID number of contributing federal political committee.: C

Name of Employer: Cameron National Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt: 11 / 30 / 2011

Transaction ID : 1F3B921528480364004

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Gregg Cornell
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Board Member
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : 25CA5B4BBCEA9881632
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Connie Costigan
Mailing Address: 33305 E Truman Rd
City: Grain Valley State: MO Zip Code: 64029-8245
FEC ID number of contributing federal political committee: C
Name of Employer: CFM Insurance, Inc.
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00
Date of Receipt: 09 / 29 / 2011
Transaction ID : 3B55CC388CF071784C6
Amount of Each Receipt this Period: 60.00

C. Full Name (Last, First, Middle Initial): Jeffrey Couchman
Mailing Address: PO Box 1463
City: Minneapolis State: MN Zip Code: 55440-1463
FEC ID number of contributing federal political committee: C
Name of Employer: Western National Mutual Insurance Comp
Occupation: Vice President of Marketing & Business
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : D7815934BD225AD4D2E
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1310.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Tom Danielson
Mailing Address: PO Box 708
City: Houston State: MN Zip Code: 55943-0708
FEC ID number of contributing federal political committee: C
Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 07 / 05 / 2011
Transaction ID : 6421562E83102BF5DD2
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Anthony O. Dean
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 240.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 3D0B3876AF2B06BFE2F
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Anthony O. Dean
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 240.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : E922D675FACFF46EFFD
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 290.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Dan Dearment

Mailing Address PO Box 646

City: Bedford
State: PA
Zip Code: 15522-0646

FEC ID number of contributing federal political committee.: C

Name of Employer: Friends Cove Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt: 07 / 26 / 2011

Transaction ID : 3934C1E72CB79816D1F

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Dan Dearment

Mailing Address PO Box 646

City: Bedford
State: PA
Zip Code: 15522-0646

FEC ID number of contributing federal political committee.: C

Name of Employer: Friends Cove Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt: 08 / 19 / 2011

Transaction ID : 2A86EE7D38C254D1221

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Dan Dearment

Mailing Address PO Box 646

City: Bedford
State: PA
Zip Code: 15522-0646

FEC ID number of contributing federal political committee.: C

Name of Employer: Friends Cove Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : CF75840D70AD6225A7B

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Dan Dearment

Mailing Address PO Box 646

City: Bedford
State: PA
Zip Code: 15522-0646

FEC ID number of contributing federal political committee.: C

Name of Employer: Friends Cove Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : C07D02B3560EA8BB092

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Dan Dearment

Mailing Address PO Box 646

City: Bedford
State: PA
Zip Code: 15522-0646

FEC ID number of contributing federal political committee.: C

Name of Employer: Friends Cove Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt: 10 / 26 / 2011

Transaction ID : 80F1F44411B7AD3FC67

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Dan Dearment

Mailing Address PO Box 646

City: Bedford
State: PA
Zip Code: 15522-0646

FEC ID number of contributing federal political committee.: C

Name of Employer: Friends Cove Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt: 11 / 21 / 2011

Transaction ID : E4374D46582299C4092

Amount of Each Receipt this Period: 100.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Dan Dearment
Mailing Address: PO Box 646
City: Bedford State: PA Zip Code: 15522-0646
FEC ID number of contributing federal political committee: C
Name of Employer: Friends Cove Mutual Insurance Company
Occupation: President/CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1050.00
Date of Receipt: 12 / 20 / 2011
Transaction ID : 21B8B320366DF3A9E42
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Joseph Dechatelets CPCU
Mailing Address: PO Box 5626
City: Rockford State: IL Zip Code: 61125-0626
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1030.00
Date of Receipt: 08 / 19 / 2011
Transaction ID : 19DE68D2E98EA2AC544
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Joseph Dechatelets CPCU
Mailing Address: PO Box 5626
City: Rockford State: IL Zip Code: 61125-0626
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1030.00
Date of Receipt: 11 / 21 / 2011
Transaction ID : C7CA7234AD151A87A8B
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 07 / 08 / 2011
Transaction ID : 777AE9D6AAF315E5CDC
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 07 / 22 / 2011
Transaction ID : 341E1B2917F3954CD20
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 08 / 03 / 2011
Transaction ID : F74D0D7AF98DF0BF08F
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 08 / 19 / 2011
Transaction ID : 59A08EFE1A9ACDA4F12
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 09 / 02 / 2011
Transaction ID : 85E516E70F1DFDE3208
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 09 / 16 / 2011
Transaction ID : 0A4728D4DD94921B5ED
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 09 / 30 / 2011
Transaction ID : 6E0DA7C5C90CEBECE2B
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 10 / 14 / 2011
Transaction ID : 3EB13D865E4DB6D744F
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 10 / 28 / 2011
Transaction ID : 5C21EE8490E9E38D75B
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 11 / 14 / 2011
Transaction ID : 39D7EF15F72F67FCA2C
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 11 / 25 / 2011
Transaction ID : 8DFC2C50A5FF2A6DCAE
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00
Date of Receipt: 12 / 09 / 2011
Transaction ID : 20F196E46A5B7C48458
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Cynthia DeLong
Mailing Address: PO Box 1776
City: Yarmouth State: ME Zip Code: 04096-1776
FEC ID number of contributing federal political committee: C
Name of Employer: Patriot Insurance Company
Occupation: Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 460.00
Date of Receipt: 12 / 23 / 2011
Transaction ID : 6ACD52F2401553F3F6E
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Robert Detlefsen PhD
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 07 / 15 / 2011
Transaction ID : 7B540D7837C734400B0
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Robert Detlefsen PhD
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : 0D39F48015651412FA2
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Robert Detlefsen PhD
Mailing Address: PO Box 68700
City: Indianapolis
State: IN
Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : 416472B1187C10AF79D
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): Robert Detlefsen PhD
Mailing Address: PO Box 68700
City: Indianapolis
State: IN
Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 35BAD55AFE657F13B10
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): Robert Detlefsen PhD
Mailing Address: PO Box 68700
City: Indianapolis
State: IN
Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : 582047ABADDF47645A0
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 23 / 2011

Transaction ID : 16A1CDFA1E46A4927A5

Amount of Each Receipt this Period: 40.00

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 07 / 2011

Transaction ID : 01F86C114233B207BB5

Amount of Each Receipt this Period: 40.00

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 21 / 2011

Transaction ID : 86471DC4CE58B7044DE

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 04 / 2011

Transaction ID : 7D56C9AB6A15279D4B2

Amount of Each Receipt this Period: 40.00

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 18 / 2011

Transaction ID : 3C58691525765DA0B32

Amount of Each Receipt this Period: 40.00

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 05 / 2011

Transaction ID : 17F6D5990D085B4ED78

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Robert Detlefsen PhD
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : E7A2D413F8B46046E88
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): Robert Detlefsen PhD
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Public Policy
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : 02BA15F2B47CD185348
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Thomas A. Dials
Mailing Address: 550 Eisenhower Rd
City: Leavenworth State: KS Zip Code: 66048-1190
FEC ID number of contributing federal political committee.: C
Name of Employer: Armed Forces Insurance Exchange
Occupation: Chairman
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : 33F7A81E-54C5-42C3-
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1080.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Daniel Dierks
Mailing Address: PO Box 59
City: Traer | State: IA | Zip Code: 50675-0059
FEC ID number of contributing federal political committee: C
Name of Employer: Farmers Mutual Insurance Association
Occupation: Secretary/Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 650.00
Date of Receipt: 09 / 14 / 2011
Transaction ID : CE5A305A6D08BE70DE7
Amount of Each Receipt this Period: 400.00

B. Full Name (Last, First, Middle Initial): Cindy Doble
Mailing Address: PO Box 1463
City: Minneapolis | State: MN | Zip Code: 55440-1463
FEC ID number of contributing federal political committee: C
Name of Employer: Western National Mutual Insurance Comp
Occupation: Chief Underwriting Officer of Personal
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 08 / 01 / 2011
Transaction ID : 73F8B1DA4E7BA7A99E6
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Bernie Dochnahl
Mailing Address: 1460 Wells St
City: Enumclaw | State: WA | Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: Board of Trustees
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 07 / 12 / 2011
Transaction ID : D10FCB9AB2AB7A3F870
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1650.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Charles W. Drier
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : 85EBED9FC563ACF8E00
Amount of Each Receipt this Period: 75.00

B.
Full Name (Last, First, Middle Initial): Charles W. Drier
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : 5AB299D295A2386037D
Amount of Each Receipt this Period: 75.00

C.
Full Name (Last, First, Middle Initial): Charles W. Drier
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 7266C914329EDE3CB87
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 225.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 443EB6103E7D88CC47B

Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
Charles W. Drier

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : EE0130BDC57F90BF3DD

Amount of Each Receipt this Period: 75.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 804F54B24B47C064D30

Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 225.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Christian Drusano
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Marketing Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 214.32
Date of Receipt: 12 / 02 / 2011
Transaction ID : 9B93DEF1240DF5D3827
Amount of Each Receipt this Period: 35.72

B.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel | State: IN | Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 07 / 15 / 2011
Transaction ID : AD8FE9B40929985BCD8
Amount of Each Receipt this Period: 96.16

C.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel | State: IN | Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : BCF039A0BFD5F5BDFA3
Amount of Each Receipt this Period: 96.16

SUBTOTAL of Receipts This Page (optional) ▶ 228.04

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel
State: IN
Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : E32E66B95AA811FCAE5
Amount of Each Receipt this Period: 96.16

B.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel
State: IN
Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : B781CA1971626616F69
Amount of Each Receipt this Period: 96.16

C.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel
State: IN
Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : B0742A225ED0E74FABA
Amount of Each Receipt this Period: 96.16

SUBTOTAL of Receipts This Page (optional) ▶ 288.48

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel
State: IN
Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 09 / 23 / 2011
Transaction ID : 9C825560D92273E8E80
Amount of Each Receipt this Period: 96.16

B.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel
State: IN
Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 10 / 07 / 2011
Transaction ID : 111F7908503E416CF5D
Amount of Each Receipt this Period: 96.16

C.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel
State: IN
Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 10 / 21 / 2011
Transaction ID : E88E53E1ECB348B588E
Amount of Each Receipt this Period: 96.16

SUBTOTAL of Receipts This Page (optional) ▶ 288.48

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel
State: IN
Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 11 / 04 / 2011
Transaction ID : 98571CF4A6A115DE76C
Amount of Each Receipt this Period: 96.16

B.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel
State: IN
Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : 47FA89199B389F7522C
Amount of Each Receipt this Period: 96.16

C.
Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel
State: IN
Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : D04B869D66645C423AB
Amount of Each Receipt this Period: 96.16

SUBTOTAL of Receipts This Page (optional) ▶ 288.48

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel State: IN Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : 4826CDEDE1452380BFB
Amount of Each Receipt this Period: 96.16

B. Full Name (Last, First, Middle Initial): Gregg A. Dykstra J.D.
Mailing Address: 1838 Arrowwood Dr
City: Carmel State: IN Zip Code: 46033-9020
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : 7A725C609EBFF982C7B
Amount of Each Receipt this Period: 96.16

C. Full Name (Last, First, Middle Initial): Fred A. Edmond CPCU, CIC
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 07 / 08 / 2011
Transaction ID : 2842F0C85787DC6E017
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 230.79

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 07 / 22 / 2011

Transaction ID : 31F1C0822425940666F

Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 08 / 03 / 2011

Transaction ID : 2E9760FCFB99BF27B27

Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 08 / 19 / 2011

Transaction ID : C6888E05AFB88E2F3A4

Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 09 / 02 / 2011

Transaction ID : E900E48BDDAAD483BD9

Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 09 / 16 / 2011

Transaction ID : 4DF6668CF58B910A52F

Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 09 / 30 / 2011

Transaction ID : 24DE07619B1EE6EF06D

Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 10 / 14 / 2011

Transaction ID : 6505725A00A97CDC657

Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 10 / 28 / 2011

Transaction ID : DED23A17768ECCE2435

Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 11 / 14 / 2011

Transaction ID : AD4C74DB4156B52698F

Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 11 / 25 / 2011

Transaction ID : 03771415D99D36272CA

Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 12 / 09 / 2011

Transaction ID : DC0B77F34497F15F876

Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial)
Fred A. Edmond CPCU, CIC

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 12 / 23 / 2011

Transaction ID : 5B5715F32942FABA3D1

Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): David Eide
Mailing Address: 5350 W 78th St
City: Minneapolis State: MN Zip Code: 55439-3101
FEC ID number of contributing federal political committee: C
Name of Employer: Western National Mutual Insurance Comp
Occupation: Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : 7857C1DBB026D262200
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Jon Erickson
Mailing Address: 2102 Whitegate Dr
City: Columbia State: MO Zip Code: 65202-2335
FEC ID number of contributing federal political committee: C
Name of Employer: Columbia Mutual Insurance Company
Occupation: Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 07 / 12 / 2011
Transaction ID : C2EFDC20EB8BCA35493
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Andrew M. Eriksen
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager-Project Research & Coordinatio
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1200.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : 3BD34C9C1963451DB85
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Andrew M. Eriksen

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company

Occupation: Manager-Project Research & Coordinatio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 07 / 25 / 2011

Transaction ID : 420CA82E6D792BD20B2

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Andrew M. Eriksen

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company

Occupation: Manager-Project Research & Coordinatio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 8F1A5DF81605482A500

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Andrew M. Eriksen

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company

Occupation: Manager-Project Research & Coordinatio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : DBAC9E7513CE4ABA21A

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Andrew M. Eriksen

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager-Project Research & Coordinatio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 13B0AA18CC30F70D8A0

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Andrew M. Eriksen

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager-Project Research & Coordinatio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 5BDB0A42A988D4FD685

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mark H. Ewert

Mailing Address 3240 Nassau Dr

City: Brookfield | State: WI | Zip Code: 53045-1536

FEC ID number of contributing federal political committee: C

Name of Employer: Partners Mutual Insurance Company
Occupation: Executive Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 7C172D499D18DE43FBD

Amount of Each Receipt this Period: 500.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Richard C. Ewert CPCU, CIC

Mailing Address PO Box 2003

City: Milwaukee
State: WI
Zip Code: 53201-2003

FEC ID number of contributing federal political committee.: C

Name of Employer: Partners Mutual Insurance Company
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : E158145A9A812695E54

Amount of Each Receipt this Period: 800.00

B. Full Name (Last, First, Middle Initial)
Michael L. Faron CPCU

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Commercial Business Leader

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 09 / 07 / 2011

Transaction ID : B13D7631F23EFD42CF9

Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Michael L. Faron CPCU

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Commercial Business Leader

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 09 / 21 / 2011

Transaction ID : DE90C9302B922B1AF6A

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 820.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Michael L. Faron CPCU

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Commercial Business Leader

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
M M 10 / D D 05 / Y Y Y Y 2011

Transaction ID : 06745C6F8676586D99E

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Michael L. Faron CPCU

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Commercial Business Leader

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
M M 10 / D D 19 / Y Y Y Y 2011

Transaction ID : 93DB40FE3299028CA5B

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Michael L. Faron CPCU

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Commercial Business Leader

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt
M M 11 / D D 02 / Y Y Y Y 2011

Transaction ID : D44DAFA65DA53571C31

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Michael L. Faron CPCU
Mailing Address: 222 Ames St
City: Dedham | State: MA | Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Commercial Business Leader
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 290.00
Date of Receipt: 11 / 16 / 2011
Transaction ID : 98AE88534DCB5468809
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): Michael L. Faron CPCU
Mailing Address: 222 Ames St
City: Dedham | State: MA | Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Commercial Business Leader
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 290.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 79343F4F12EF6846619
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): Michael L. Faron CPCU
Mailing Address: 222 Ames St
City: Dedham | State: MA | Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Commercial Business Leader
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 290.00
Date of Receipt: 12 / 14 / 2011
Transaction ID : DD449962377CC95BA84
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Michael L. Faron CPCU

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Commercial Business Leader

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 12 / 28 / 2011
Transaction ID : CB61BB1CDB4E228BA9A

Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Bernard Fechtel

Mailing Address PO Box 618

City: Columbia
State: MO
Zip Code: 65205-0618

FEC ID number of contributing federal political committee. C

Name of Employer: Columbia Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 06 / 2011
Transaction ID : 19E1D7767E9B79C836C

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Eileen Fhaner AIAF, CPCU

Mailing Address 6101 Anacapri Blvd

City: Lansing
State: MI
Zip Code: 48917-3968

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Treasurer & CFO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 05 / 2011
Transaction ID : B32EEF1A4571B8E9549

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1010.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Jerome Fischer
Mailing Address: PO Box 219
City: Sublimity State: OR Zip Code: 97385-0219
FEC ID number of contributing federal political committee: C
Name of Employer: Sublimity Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 18 / 2011
Transaction ID : EECB96F9FBAC87789A6
Amount of Each Receipt this Period: 400.00

B. Full Name (Last, First, Middle Initial): Gayle Fisher
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Life Operatio
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : BB3F7ABB6CB5F6D4A0C
Amount of Each Receipt this Period: 55.00

C. Full Name (Last, First, Middle Initial): Carroll Fitzgerald
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Chairman
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : C2290775F502C6A5C1A
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 555.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Carroll Fitzgerald

Mailing Address 200 N Main St

City: Bel Air | State: MD | Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Chairman

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 03 / 2011

Transaction ID : 2251C73EF776C63CE1B

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Carroll Fitzgerald

Mailing Address 200 N Main St

City: Bel Air | State: MD | Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Chairman

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 28 / 2011

Transaction ID : EDE25B96A35ED6ADC2E

Amount of Each Receipt this Period: 100.00

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

Mailing Address PO Box 24

City: Lickingville | State: PA | Zip Code: 16332-0024

FEC ID number of contributing federal political committee. C

Name of Employer: Farmers Mutual Fire Insurance Company
Occupation: President and CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 732FBC448D5E79079DF

Amount of Each Receipt this Period: 900.00

SUBTOTAL of Receipts This Page (optional) ▶ 1100.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 24

City: Lickingville
State: PA
Zip Code: 16332-0024

FEC ID number of contributing federal political committee.: C

Name of Employer: Farmers Mutual Fire Insurance Company
Occupation: President and CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 12 / 29 / 2011

Transaction ID : E15CDC9ACDA5E8B3CE7

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Bernard M. Flynn

Mailing Address 301 Sullivan Way

City: Ewing
State: NJ
Zip Code: 08628-3406

FEC ID number of contributing federal political committee.: C

Name of Employer: New Jersey Manufacturers Insurance Com
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 07 / 11 / 2011

Transaction ID : 8CD46DF764F1D5A85E5

Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Kurt P. Foley

Mailing Address 14408 Appletree Ln

City: Fenton
State: MI
Zip Code: 48430-1433

FEC ID number of contributing federal political committee.: C

Name of Employer: Pioneer State Mutual Insurance Company
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 7BEFC66C127787F91E9

Amount of Each Receipt this Period: 550.00

SUBTOTAL of Receipts This Page (optional) ▶ 3150.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Larry L. Forrester CAE

Mailing Address 7542 E Rush Ridge Rd

City: Bloomington
State: IN
Zip Code: 47401-9731

FEC ID number of contributing federal political committee.: C

Name of Employer: Conference of Casualty Insurance Compa
Occupation: former Executive Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 2DEAD0D10A024FF5837

Amount of Each Receipt this Period: 2500.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Legal

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 4D68C58940F9B974E50

Amount of Each Receipt this Period: 20.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Legal

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : F4FE812EA7DBB180526

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 2540.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Daniel Frost
Mailing Address: 306 N Johnson St
City: Harvard State: IL Zip Code: 60033-2903
FEC ID number of contributing federal political committee: C
Name of Employer: Dunham & Chemung Mutual Insurance Comp
Occupation: CEO/Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07/08/2011
Transaction ID : 4607D216C2EBD6F38CF
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Donald Fry
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08/05/2011
Transaction ID : B959286AFAB59735B6A
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial): Donald Fry
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 11/03/2011
Transaction ID : 88CEE5F85474C293A70
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Donald Fry
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 12 / 28 / 2011
Transaction ID : 2EEA03B5C87F95737BD
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Ste 540
City: Washington | State: DC | Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 07 / 15 / 2011
Transaction ID : EDFF3BB10EA7CA3618C
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Ste 540
City: Washington | State: DC | Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : 650BF713F04F8507B65
Amount of Each Receipt this Period: 20.00

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Ste 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : DCC5F01234386C54F5C
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Ste 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 9056118ECEFD8C721E0
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Ste 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : D251B3AE4AFC6F9C925
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Suite 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt: 09 / 23 / 2011
Transaction ID : 0E3C30C75FA0BD449E7
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Suite 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt: 10 / 07 / 2011
Transaction ID : D8E7B9D7ADC51676F0C
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Suite 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt: 10 / 21 / 2011
Transaction ID : DF0FC20366B13B779BF
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Suite 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 11 / 04 / 2011
Transaction ID : 0DD01AAA03A4F8823A1
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Suite 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : 76462C4202DCF270093
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Suite 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : B139C38C27D55CD8BCD
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Suite 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : B909B638F7E9299F34A
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Matt Gannon
Mailing Address: 122 C St NW, Suite 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President Federal Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 480.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : BEC8B2E191820C29DCE
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Robert Gerding
Mailing Address: PO Box 618
City: Columbia State: MO Zip Code: 65205-0618
FEC ID number of contributing federal political committee: C
Name of Employer: Columbia Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 07 / 12 / 2011
Transaction ID : 9BDB26E3BB83825CE4C
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 290.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 07 / 08 / 2011
Transaction ID : 33E64BA2A4487289DCA
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 07 / 22 / 2011
Transaction ID : E7DD53D872F254CA480
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 08 / 03 / 2011
Transaction ID : 4CAA8E4CB880FFED7A5
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 08 / 19 / 2011
Transaction ID : 8F7116539DD9D8FFBEC
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 09 / 02 / 2011
Transaction ID : 3BCF0132BBA4ACCB06D
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 09 / 16 / 2011
Transaction ID : CE6BD182F9CBA7EDA19
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 09 / 30 / 2011
Transaction ID : F2AAC24DB03B012CE57
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 10 / 14 / 2011
Transaction ID : 07EE03D7E5AADBF301F
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 10 / 28 / 2011
Transaction ID : 7BA86119E55AFEF5A85
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 11 / 14 / 2011
Transaction ID : 609BF712B9B9F6B631A
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 11 / 25 / 2011
Transaction ID : 4F8937942025683CC4F
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 12 / 09 / 2011
Transaction ID : 37B5F00E0AAF046399E
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Bryan Gilleland
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 12 / 23 / 2011
Transaction ID : E532E526A50E757DBED
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): John Goodin
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Underwriting Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 214.32
Date of Receipt: 12 / 02 / 2011
Transaction ID : 8828F22DB4F3EB11D3D
Amount of Each Receipt this Period: 35.72

C. Full Name (Last, First, Middle Initial): Jimi Grande
Mailing Address: 5956 Coopers Landing Ct
City: Burke State: VA Zip Code: 22015-2568
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Senior Vice President-Federal and Poli
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 / 28 / 2011
Transaction ID : FAC1863F-46D8-4C0E-
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1074.19

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Jeffrey Greenwald

Mailing Address PO Box 618

City: Columbia
State: MO
Zip Code: 65205-0618

FEC ID number of contributing federal political committee.: C

Name of Employer: Columbia Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 06 / 2011

Transaction ID : 0C71292CE42982B2347

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Jonathan C. Grether CPCU

Mailing Address 202 Benck St

City: Algona
State: IA
Zip Code: 50511-7280

FEC ID number of contributing federal political committee.: C

Name of Employer: Pharmacists Mutual Insurance Company
Occupation: COO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt: 08 / 19 / 2011

Transaction ID : 6DBB9B0673DC0F29031

Amount of Each Receipt this Period: 125.00

C. Full Name (Last, First, Middle Initial)
Jonathan C. Grether CPCU

Mailing Address 202 Benck St

City: Algona
State: IA
Zip Code: 50511-7280

FEC ID number of contributing federal political committee.: C

Name of Employer: Pharmacists Mutual Insurance Company
Occupation: COO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : 6621AF4C5AF989A3E15

Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ▶ 685.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Jonathan C. Grether CPCU

Mailing Address 202 Benck St

City: Algona | State: IA | Zip Code: 50511-7280

FEC ID number of contributing federal political committee. C

Name of Employer: Pharmacists Mutual Insurance Company
Occupation: COO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt: 11 / 21 / 2011

Transaction ID : F3BBCB7F8B7E6CE2CD6

Amount of Each Receipt this Period: 125.00

B. Full Name (Last, First, Middle Initial)
Clarence Guinn CPA

Mailing Address PO Box 489

City: Rogers | State: AR | Zip Code: 72757-0489

FEC ID number of contributing federal political committee. C

Name of Employer: Farmers Mutual Insurance Company
Occupation: Assistant Secretary/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1375.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 8E3D4DD9FE5A7A36298

Amount of Each Receipt this Period: 275.00

C. Full Name (Last, First, Middle Initial)
Clarence Guinn CPA

Mailing Address PO Box 489

City: Rogers | State: AR | Zip Code: 72757-0489

FEC ID number of contributing federal political committee. C

Name of Employer: Farmers Mutual Insurance Company
Occupation: Assistant Secretary/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1375.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : 8820ED5C09020DCAB1A

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
George H. Guptill Jr.

Mailing Address 208 Cleveland Ln

City: Rockaway
State: NJ
Zip Code: 07866-5801

FEC ID number of contributing federal political committee.: C

Name of Employer: Franklin Mutual Insurance Company
Occupation: Chairman

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 31 / 2011

Transaction ID : 64F8D657-30C2-4073-

Amount of Each Receipt this Period: 500.00

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

Mailing Address PO Box 618

City: Columbia
State: MO
Zip Code: 65205-0618

FEC ID number of contributing federal political committee.: C

Name of Employer: Columbia Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 06 / 2011

Transaction ID : 0E1171808ABA2AA0932

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Susan E. Haack

Mailing Address 471 E Broad St

City: Columbus
State: OH
Zip Code: 43215-3852

FEC ID number of contributing federal political committee.: C

Name of Employer: Iowa Mutual Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 2D4B47232519D8F7109

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Alice Hamm
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : A4C49611B67DF85AE83
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Alice Hamm
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 01788155C13FBFC5A82
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Alice Hamm
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 6ED4DD4B3DE2BB0FAC3
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Reiny Hanneken

Mailing Address PO Box 217

City: Pierz
State: MN
Zip Code: 56364-0217

FEC ID number of contributing federal political committee.: C

Name of Employer: Pioneer Lake Mutual Insurance Company
Occupation: Secretary Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 5DC75995F5A3B905D19

Amount of Each Receipt this Period: 250.00

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

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Vice Chairman

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 05 / 2011

Transaction ID : 42D67F31D6B08586471

Amount of Each Receipt this Period: 100.00

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

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Vice Chairman

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 03 / 2011

Transaction ID : 0585B6EF5B97FA81D1F

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 450.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): James Hardesty
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Vice Chairman
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 12 / 28 / 2011
Transaction ID : 47B91274D9A56124603
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Jeffrey F. Harrold
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 07 / 26 / 2011
Transaction ID : E24A6F9A8676C0B4940
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Christopher D. Hartrich
Mailing Address: PO Box 468
City: Neenah | State: WI | Zip Code: 54957-0468
FEC ID number of contributing federal political committee: C
Name of Employer: Jewelers Mutual Insurance Company
Occupation: Vice President HR/Organizational Devel
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 230.00
Date of Receipt: 10 / 26 / 2011
Transaction ID : 680BF4311F1439B7B20
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 2620.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 468

City: Neenah | State: WI | Zip Code: 54957-0468

FEC ID number of contributing federal political committee. C

Name of Employer: Jewelers Mutual Insurance Company

Occupation: Vice President HR/Organizational Devel

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 30 / 2011

Transaction ID : 7786C8C9DB689AFADD0

Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Joseph B. Haswell

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: Assistant Division Manager, Casualty C

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 09 / 07 / 2011

Transaction ID : 1B6276A1809A9ADAF8E

Amount of Each Receipt this Period: 10.00

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

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: Assistant Division Manager, Casualty C

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 09 / 21 / 2011

Transaction ID : 196E4ECA7ADF13C2231

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 40.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joseph B. Haswell
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Division Manager, Casualty C
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 10/05/2011
Transaction ID : DF8FE96AA44466C0A4B
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Joseph B. Haswell
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Division Manager, Casualty C
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 10/19/2011
Transaction ID : F70394E2215188B3083
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Joseph B. Haswell
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Division Manager, Casualty C
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 11/02/2011
Transaction ID : 08244A0CB1736DE0AE4
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joseph B. Haswell
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Division Manager, Casualty C
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 11/16/2011
Transaction ID : F2288209B5AD5761136
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Joseph B. Haswell
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Division Manager, Casualty C
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 11/30/2011
Transaction ID : 68B44A54356E31308ED
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Joseph B. Haswell
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Division Manager, Casualty C
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 12/14/2011
Transaction ID : A01246842535AF56849
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joseph B. Haswell
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: Assistant Division Manager, Casualty C
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 12/28/2011
Transaction ID : 8AF88E43FBE14FD6B9A
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Warren W. Heck
Mailing Address: 200 Madison Ave
City: New York State: NY Zip Code: 10016-3903
FEC ID number of contributing federal political committee: C
Name of Employer: Greater New York Mutual Insurance Comp
Occupation: Chairman & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 08/15/2011
Transaction ID : A0C68FA383666F675E2
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial): F. Timothy Hegarty Jr., CPCU
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1100.00
Date of Receipt: 07/27/2011
Transaction ID : CCEE8CBE0DBEA697A5F
Amount of Each Receipt this Period: 120.00

SUBTOTAL of Receipts This Page (optional) ▶ 2630.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 08 / 11 / 2011

Transaction ID : 26DE3CFBA94BF942195

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 08 / 25 / 2011

Transaction ID : 6C811F08769E739D223

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 07 / 2011

Transaction ID : C5B765B4713AECC9851

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 09 / 21 / 2011

Transaction ID : A80B50BD80CA615E747

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 10 / 05 / 2011

Transaction ID : C78E58434F8BF392075

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 10 / 19 / 2011

Transaction ID : 77B1BD131C60AB517DE

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 11 / 02 / 2011

Transaction ID : 0705EE22998FCF4A8D0

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 11 / 16 / 2011

Transaction ID : A8D2A1788B7CC72995A

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance

Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 11 / 30 / 2011

Transaction ID : EC51B1DB918776632BE

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 12 / 14 / 2011

Transaction ID : B1AA5F38D4029EC945E

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
F. Timothy Hegarty Jr., CPCU

Mailing Address 222 Ames St

City: Dedham | State: MA | Zip Code: 02026-1850

FEC ID number of contributing federal political committee. C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 12 / 28 / 2011

Transaction ID : C60424C61623EE3549E

Amount of Each Receipt this Period: 40.00

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

Mailing Address 1901 N Roselle Rd
Ste 340

City: Schaumburg | State: IL | Zip Code: 60195-3177

FEC ID number of contributing federal political committee. C

Name of Employer: St. Paul Reinsurance
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 0ECD106C487279005FA

Amount of Each Receipt this Period: 650.00

SUBTOTAL of Receipts This Page (optional) ▶ 730.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Stuart C. Henderson JD, CPCU

Mailing Address PO Box 1463

City: Minneapolis
State: MN
Zip Code: 55440-1463

FEC ID number of contributing federal political committee.: C

Name of Employer: Western National Mutual Insurance Comp
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2550.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : 8A568E52E0977E36F05

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Brenda G. Hennenfent

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 648AFD641FE74EFEC17

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Brenda G. Hennenfent

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 39F2B43A07B1942FAD7

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 110.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Brenda G. Hennenfent
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : AEDA050F7B4E8235095
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial): John T. Hill II, CPA
Mailing Address: 1 Park Ave
City: New York State: NY Zip Code: 10016-5802
FEC ID number of contributing federal political committee: C
Name of Employer: Magna Carta Companies
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00
Date of Receipt: 07 / 12 / 2011
Transaction ID : DF7FFEE0050040F11FF
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial): John T. Hill II, CPA
Mailing Address: 1 Park Ave
City: New York State: NY Zip Code: 10016-5802
FEC ID number of contributing federal political committee: C
Name of Employer: Magna Carta Companies
Occupation: President & COO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2600.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 18A85EF5FCA069B917A
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 2630.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Marcus E. Hill
Mailing Address: PO Box 88
City: Fort Worth State: TX Zip Code: 76101-0088
FEC ID number of contributing federal political committee: C
Name of Employer: Agricultural Workers Mutual Auto Insur
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 8342EE68659E07D4FE8
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): David F. Honold
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.18
Date of Receipt: 07 / 08 / 2011
Transaction ID : F47A391E4419CB182FC
Amount of Each Receipt this Period: 76.93

C. Full Name (Last, First, Middle Initial): David F. Honold
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.18
Date of Receipt: 07 / 22 / 2011
Transaction ID : 827386710BEA19B5DEE
Amount of Each Receipt this Period: 76.93

SUBTOTAL of Receipts This Page (optional) ▶ 403.86

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
David F. Honold

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.18

Date of Receipt: 08 / 03 / 2011

Transaction ID : CB03755E297AFE9CD06

Amount of Each Receipt this Period: 76.93

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

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.18

Date of Receipt: 08 / 19 / 2011

Transaction ID : 7978555E89EBF072FB4

Amount of Each Receipt this Period: 76.93

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

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.18

Date of Receipt: 09 / 02 / 2011

Transaction ID : 5A7301B0CCE345274F7

Amount of Each Receipt this Period: 76.93

SUBTOTAL of Receipts This Page (optional) ▶ 230.79

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
David F. Honold

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.18

Date of Receipt: 09 / 16 / 2011

Transaction ID : D28DD109ADDEF7E19BD

Amount of Each Receipt this Period: 76.93

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

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.18

Date of Receipt: 09 / 30 / 2011

Transaction ID : 9DBC2D9E44175ADFFAD

Amount of Each Receipt this Period: 76.93

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

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.18

Date of Receipt: 10 / 14 / 2011

Transaction ID : D1ABD40CBB24ECDF172

Amount of Each Receipt this Period: 76.93

SUBTOTAL of Receipts This Page (optional) ▶ 230.79

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): David F. Honold
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.18
Date of Receipt: 10 / 28 / 2011
Transaction ID : F7BBCDD3F8106CD5373
Amount of Each Receipt this Period: 76.93

B. Full Name (Last, First, Middle Initial): David F. Honold
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.18
Date of Receipt: 11 / 14 / 2011
Transaction ID : F5D273DB93C086B679A
Amount of Each Receipt this Period: 76.93

C. Full Name (Last, First, Middle Initial): David F. Honold
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.18
Date of Receipt: 11 / 25 / 2011
Transaction ID : E4E77CA44C096FD6047
Amount of Each Receipt this Period: 76.93

SUBTOTAL of Receipts This Page (optional) ▶ 230.79

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): David F. Honold
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.18
Date of Receipt: 12 / 09 / 2011
Transaction ID : ADD02B6B373A8D5A27A
Amount of Each Receipt this Period: 76.93

B. Full Name (Last, First, Middle Initial): David F. Honold
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.18
Date of Receipt: 12 / 23 / 2011
Transaction ID : EAE2B66AEF62633F371
Amount of Each Receipt this Period: 76.93

C. Full Name (Last, First, Middle Initial): Mark Hooper
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Partner
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : 927CA6044A914BF103B
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 653.86

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address 172 E State St
Ste 201

City: Columbus
State: OH
Zip Code: 43215-4321

FEC ID number of contributing federal political committee. C

Name of Employer: Ohio Insurance Institute
Occupation: Manager IT Administration & Security

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 12 / 19 / 2011

Transaction ID : CE876082AEFC4C46D00

Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Richard Hughes

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Supervisor

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 214.32

Date of Receipt: 12 / 02 / 2011

Transaction ID : 5B0D1AC16914F2D1D47

Amount of Each Receipt this Period: 35.72

C. Full Name (Last, First, Middle Initial)
Emily Huling

Mailing Address PO Box 200

City: Terrell
State: NC
Zip Code: 28682-0200

FEC ID number of contributing federal political committee. C

Name of Employer: Selling Strategies, Inc.
Occupation: Founder/President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 14 / 2011

Transaction ID : 916BA4FFC9709528000

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 295.72

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Timothy R. Hyle CPA

Mailing Address 1 Preferred Way

City: New Berlin
State: NY
Zip Code: 13411-1800

FEC ID number of contributing federal political committee.: C

Name of Employer: Preferred Mutual Insurance Company
Occupation: Corporate Controller

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt: 07 / 26 / 2011

Transaction ID : 8E0504D62ED00267685

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Timothy R. Hyle CPA

Mailing Address 1 Preferred Way

City: New Berlin
State: NY
Zip Code: 13411-1800

FEC ID number of contributing federal political committee.: C

Name of Employer: Preferred Mutual Insurance Company
Occupation: Corporate Controller

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : D6BB4F28611A97BC583

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Timothy R. Hyle CPA

Mailing Address 1 Preferred Way

City: New Berlin
State: NY
Zip Code: 13411-1800

FEC ID number of contributing federal political committee.: C

Name of Employer: Preferred Mutual Insurance Company
Occupation: Corporate Controller

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 615.00

Date of Receipt: 10 / 11 / 2011

Transaction ID : 8A8580DE7934441FD3C

Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 175.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Timothy R. Hyle CPA
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Corporate Controller
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 615.00
Date of Receipt: 11 / 02 / 2011
Transaction ID : 4D148DD9B8DD5B596FF
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial): Timothy R. Hyle CPA
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Corporate Controller
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 615.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 87B914107118077580D
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial): Theresa Jakubick
Mailing Address: PO Box 111
City: Bucyrus | State: OH | Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 07 / 19 / 2011
Transaction ID : B9587EAA3F995A90B45
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Theresa Jakubick
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 08 / 02 / 2011
Transaction ID : 20B7E0DEF309760C9B6
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Theresa Jakubick
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 08 / 17 / 2011
Transaction ID : 23B02DA6BB539C548D3
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Theresa Jakubick
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 72D17C2DF8A2F00D5F4
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Theresa Jakubick

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 12 / 2011

Transaction ID : 56A114F6CA665CDA162

Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Theresa Jakubick

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 6E2905F95C6310BA915

Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
Theresa Jakubick

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 11 / 2011

Transaction ID : 41B1524112B3CF76820

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Theresa Jakubick

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 26 / 2011

Transaction ID : 28E6EF0FEA4C5DC069B

Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Theresa Jakubick

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 08 / 2011

Transaction ID : F8191B003E8D1B30338

Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
Theresa Jakubick

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 21 / 2011

Transaction ID : BAFBAD566E573D97FBE

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Theresa Jakubick
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 15869D40A6C2107396E
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Theresa Jakubick
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Project Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 12 / 19 / 2011
Transaction ID : B4AADC6F162FEA30670
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Russell Janecka
Mailing Address: PO Box 2554
City: Victoria State: TX Zip Code: 77902-2554
FEC ID number of contributing federal political committee: C
Name of Employer: Germania Farm Mutual Insurance Associa
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 09 / 14 / 2011
Transaction ID : F7B2430DA2D409C0D05
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 290.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Lee A. Janis III
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President of Sales
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 07 / 26 / 2011
Transaction ID : E7D69797DFE18EE2475
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Robert L. Jeckel
Mailing Address: 1536 Pulaski St
City: Lincoln State: IL Zip Code: 62656-3241
FEC ID number of contributing federal political committee: C
Name of Employer: Frontier Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00
Date of Receipt: 08 / 15 / 2011
Transaction ID : 69B43E59BD82EDFDF93
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Robert L. Jeckel
Mailing Address: 1536 Pulaski St
City: Lincoln State: IL Zip Code: 62656-3241
FEC ID number of contributing federal political committee: C
Name of Employer: Frontier Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00
Date of Receipt: 09 / 29 / 2011
Transaction ID : 7A56FAB445DEF347205
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Larry Johnson
Mailing Address: 239 E 750 S
City: Fort Branch | State: IN | Zip Code: 47648-8410
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual Insurance Association of Southe
Occupation: Board Member
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 676F2983FB668CFEB85
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Mark Johnston
Mailing Address: PO Box 68700
City: Indianapolis | State: IN | Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager, Midwest Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1250.00
Date of Receipt: 09 / 21 / 2011
Transaction ID : EC1D45C219B020AC4CF
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Mark Johnston
Mailing Address: PO Box 68700
City: Indianapolis | State: IN | Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager, Midwest Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1250.00
Date of Receipt: 09 / 29 / 2011
Transaction ID : B0D50CE76FFABB7B51C
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Charles M. Jones CPCU

Mailing Address 1075 Prairie Hill Dr

City: Dixon
State: IL
Zip Code: 61021-8366

FEC ID number of contributing federal political committee. C

Name of Employer: PLN Mutual Insurance Company
Occupation: General Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : A025E28A489BAB5E756

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Eleanor Kam

Mailing Address 22635 NE Mkt Pl Dr
Ste 160

City: Redmond
State: WA
Zip Code: 98053-5885

FEC ID number of contributing federal political committee. C

Name of Employer: Prime Advisors, Inc.
Occupation: Marketing and Sales Assistant

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 14 / 2011

Transaction ID : FD188B49DA0673A083B

Amount of Each Receipt this Period: 450.00

C. Full Name (Last, First, Middle Initial)
James J. Kennedy CPCU, LUTC

Mailing Address 1475 Lighthouse Ridge Road

City: Marion
State: OH
Zip Code: 43302

FEC ID number of contributing federal political committee. C

Name of Employer: Ohio Mutual Insurance Company
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2910.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : E98FA34D7EA82053A46

Amount of Each Receipt this Period: 410.00

SUBTOTAL of Receipts This Page (optional) ▶ 1110.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Vaughn Kidd
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Supervising Underwriter
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 214.32
Date of Receipt: 12 / 02 / 2011
Transaction ID : D131D8E8C1702C92617
Amount of Each Receipt this Period: 35.72

B. Full Name (Last, First, Middle Initial): Diane King
Mailing Address: 1 Commerce Sq
City: Philadelphia | State: PA | Zip Code: 19103-1415
FEC ID number of contributing federal political committee: C
Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: Government Affairs/Relations
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 232.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : B5B895BF1202D463CE2
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Drew A. Klasing
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager, Home Office Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : 805FB3EF9B5EE986B20
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 105.72

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Drew A. Klasing
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager, Home Office Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 280.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 34712B2ADFF94B1ABBE
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial): Drew A. Klasing
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager, Home Office Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 280.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 74FDB4C60249FDF6F95
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): Kraig T. Klopfenstein
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Sales/Marketing
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 900.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : C8FA27845437EDF000C
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 135.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Kraig T. Klopfenstein

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Sales/Marketing

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 07 / 25 / 2011

Transaction ID : C2B2C0E6214073BE946

Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
Kraig T. Klopfenstein

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Sales/Marketing

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 8E1022F38ABCB2F2A51

Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Kraig T. Klopfenstein

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Sales/Marketing

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 54A41B9A2151007C44F

Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 225.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Kraig T. Klopfenstein

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Sales/Marketing

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : DC438ED0D23DA569CB4

Amount of Each Receipt this Period: 75.00

B. Full Name (Last, First, Middle Initial)
Kraig T. Klopfenstein

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Sales/Marketing

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 4738FF27B5D3D12F927

Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Steve J. Knutson

Mailing Address 30 Molly Ln

City: Esko
State: MN
Zip Code: 55733-5510

FEC ID number of contributing federal political committee.: C

Name of Employer: RAM Mutual Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 25 / 2011

Transaction ID : 154E0CC73630C63EC7F

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Pam Lahodny

Mailing Address 500 Highway 77-A

City: Yoakum | State: TX | Zip Code: 77995

FEC ID number of contributing federal political committee. C

Name of Employer: Hochheim Prairie Farm Mutual Insurance
Occupation: Claims Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : E61EC1DB0A85B98B991

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Glenn A. Lambert PFMM

Mailing Address PO Box 176

City: Raynesford | State: MT | Zip Code: 59469-0176

FEC ID number of contributing federal political committee. C

Name of Employer: Cascade Farmers Mutual Insurance Compa
Occupation: General Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 21 / 2011

Transaction ID : F02C393AAC014E8C72D

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Justin L. Lear PFMM

Mailing Address PO Box 396

City: Ellinwood | State: KS | Zip Code: 67526-0396

FEC ID number of contributing federal political committee. C

Name of Employer: Polk County Mutual Insurance Company
Occupation: Company Manager/Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 21 / 2011

Transaction ID : F9CF5B3778E26226AA9

Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 1075.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Justin L. Lear PFMM

Mailing Address PO Box 396

City: Ellinwood | State: KS | Zip Code: 67526-0396

FEC ID number of contributing federal political committee. C

Name of Employer: Polk County Mutual Insurance Company
Occupation: Company Manager/Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 12 / 20 / 2011

Transaction ID : 92D2CE64E0AB7A6A722

Amount of Each Receipt this Period: 25.00

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

Mailing Address PO Box 300

City: Orrville | State: OH | Zip Code: 44667-0300

FEC ID number of contributing federal political committee. C

Name of Employer: Mennonite Mutual Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 37316A3BB08F97D0C73

Amount of Each Receipt this Period: 1000.00

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

Mailing Address PO Box 11409

City: Portland | State: ME | Zip Code: 04104-7409

FEC ID number of contributing federal political committee. C

Name of Employer: Maine Employers' Mutual Insurance Comp
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 07 / 2011

Transaction ID : 9A16805378A89525258

Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ▶ 1425.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: President & CEO

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt
M M 08 / D D 19 / Y Y Y Y 2011

Transaction ID : ECA5D8CCDCA9F9A7E10

Amount of Each Receipt this Period
125.00

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

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: President & CEO

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt
M M 09 / D D 27 / Y Y Y Y 2011

Transaction ID : 809D07251FAB4A5D7FC

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Steven Linkous

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: President & CEO

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt
M M 10 / D D 26 / Y Y Y Y 2011

Transaction ID : 97E08FB24CFFAD1EBC4

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ 725.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Steven Linkous
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2600.00
Date of Receipt: 11 / 21 / 2011
Transaction ID : 1E23CF169FCA6520664
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Steven Linkous
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2600.00
Date of Receipt: 12 / 20 / 2011
Transaction ID : 6425AC89531746DE4AF
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Richard E. Long CPCU, AIC,
Mailing Address: PO Box 1463
City: Minneapolis | State: MN | Zip Code: 55440-1463
FEC ID number of contributing federal political committee: C
Name of Employer: Western National Mutual Insurance Comp
Occupation: Senior Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 08 / 01 / 2011
Transaction ID : B8A7D42D4499C986B2F
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Jeffrey Lopata
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee.: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Manager - Commercial Lines E-Business
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 07 / 26 / 2011
Transaction ID : E18B39109C06007C798
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): Jeffrey Lopata
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee.: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Manager - Commercial Lines E-Business
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : FA3420BFFF0927186E6
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Jeffrey Lopata
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee.: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Manager - Commercial Lines E-Business
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 10 / 11 / 2011
Transaction ID : 1B67A86CF65F7AEF70E
Amount of Each Receipt this Period: 60.00

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Jeffrey Lopata
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee.: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Manager - Commercial Lines E-Business
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 11 / 02 / 2011
Transaction ID : B8EC9F92EB9A122F0CD
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): Jeffrey Lopata
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee.: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Manager - Commercial Lines E-Business
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : DFB7E3495B7656757A0
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Mike H. Lovelady
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee.: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 240.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 37BDE36161319E97DD3
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 100.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Mike H. Lovelady

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 7A2A8E615FC5AA1D311

Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Tim Lynch

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 209F2B060C8CC3BE0CC

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Tim Lynch

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 6664EC96BAD9CC632F7

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 80.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Tim Lynch
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 320.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 6A1E51E7F17AFB5AACA
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial): Tim Lynch
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 320.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : DF270A743F5A821F1F4
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): Wilbur J. Maas PFMM
Mailing Address: PO Box 812
City: Hull State: IA Zip Code: 51239-0812
FEC ID number of contributing federal political committee: C
Name of Employer: Farmers Mutual Insurance Association o
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 400.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 4D6B824DC3A52888ED2
Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ▶ 460.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 351.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : 78E7895A25B46E0D7F8
Amount of Each Receipt this Period: 13.50

B.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 351.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : 29AE4B94AC4A03BB4DA
Amount of Each Receipt this Period: 13.50

C.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 351.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 9C4A96804318700BBF8
Amount of Each Receipt this Period: 13.50

SUBTOTAL of Receipts This Page (optional) ▶ 40.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : FE3D142599C45DFA86A
Amount of Each Receipt this Period: 13.50

B.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00
Date of Receipt: 09 / 23 / 2011
Transaction ID : B65F1CFD3B858E32EFF
Amount of Each Receipt this Period: 13.50

C.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00
Date of Receipt: 10 / 07 / 2011
Transaction ID : 33C1EAB0A55C7322A82
Amount of Each Receipt this Period: 13.50

SUBTOTAL of Receipts This Page (optional) ▶ 40.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 351.00
Date of Receipt: 10 / 21 / 2011
Transaction ID : C7DCBE5DB9107B498F2
Amount of Each Receipt this Period: 13.50

B.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 351.00
Date of Receipt: 11 / 04 / 2011
Transaction ID : E597DA4A38102925B99
Amount of Each Receipt this Period: 13.50

C.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 351.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : D3EC0B06848CDE6D8B3
Amount of Each Receipt this Period: 13.50

SUBTOTAL of Receipts This Page (optional) ▶ 40.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : 1FEFA883BBC0AEDCE52
Amount of Each Receipt this Period: 13.50

B.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : 56E02678B09691B7F69
Amount of Each Receipt this Period: 13.50

C.
Full Name (Last, First, Middle Initial): Rae Malesh
Mailing Address: 9370 Golden Leaf Way
City: Indianapolis State: IN Zip Code: 46260-5072
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant to the President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 351.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : 11BAB74897A4285D925
Amount of Each Receipt this Period: 13.50

SUBTOTAL of Receipts This Page (optional) ▶ 40.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Michael Mann
Mailing Address: 1201 Military Rd, Ste 279
City: Benton State: AR Zip Code: 72015-2908
FEC ID number of contributing federal political committee: C
Name of Employer: Action Claim Service, Inc. Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 825.00
Date of Receipt: 09/27/2011
Transaction ID : CD4A895181E56BCC2E5
Amount of Each Receipt this Period: 825.00

B. Full Name (Last, First, Middle Initial): Diane Marshall
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 07/06/2011
Transaction ID : 18CF7F7F20E15B934A6
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial): Diane Marshall
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 07/25/2011
Transaction ID : BE63346F24E793EB7DE
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 925.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Diane Marshall

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : F8A205EED19CCC93A79

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Diane Marshall

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 35BF822D83A82834C1B

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Diane Marshall

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 5564579504459EDBD27

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Diane Marshall

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 72BF61FD675BCDFFB3C

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mary Massey

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 07 / 06 / 2011

Transaction ID : 19A278E9AE0E491716F

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Joel Matthies

Mailing Address PO Box 468

City: Neenah | State: WI | Zip Code: 54957-0468

FEC ID number of contributing federal political committee.: C

Name of Employer: Jewelers Mutual Insurance Company
Occupation: Vice President - Information Technolog

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt: 07 / 29 / 2011

Transaction ID : E3F0BD195067066EC6C

Amount of Each Receipt this Period: 45.00

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joel Matthies
Mailing Address: PO Box 468
City: Neenah State: WI Zip Code: 54957-0468
FEC ID number of contributing federal political committee: C
Name of Employer: Jewelers Mutual Insurance Company
Occupation: Vice President - Information Technolog
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 08 / 30 / 2011
Transaction ID : EDBE9FE96502CA17BFA
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial): Joel Matthies
Mailing Address: PO Box 468
City: Neenah State: WI Zip Code: 54957-0468
FEC ID number of contributing federal political committee: C
Name of Employer: Jewelers Mutual Insurance Company
Occupation: Vice President - Information Technolog
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : C611A423FDD8FD8AE6B
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): Joel Matthies
Mailing Address: PO Box 468
City: Neenah State: WI Zip Code: 54957-0468
FEC ID number of contributing federal political committee: C
Name of Employer: Jewelers Mutual Insurance Company
Occupation: Vice President - Information Technolog
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 10 / 26 / 2011
Transaction ID : B397AEFD031E0727045
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joel Matthies
Mailing Address: PO Box 468
City: Neenah State: WI Zip Code: 54957-0468
FEC ID number of contributing federal political committee: C
Name of Employer: Jewelers Mutual Insurance Company
Occupation: Vice President - Information Technolog
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 345.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 78D0A4492C4F2DD3A21
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial): Don McAfee
Mailing Address: PO Box 1874
City: Mabank State: TX Zip Code: 75147-1874
FEC ID number of contributing federal political committee: C
Name of Employer: Germania Farm Mutual Insurance Associa
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 09 / 21 / 2011
Transaction ID : 7588A4F73A21F634932
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Lori McAllister
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Attorney
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : 8BC94AD320E84B11A27
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 780.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 07 / 08 / 2011
Transaction ID : 27155EED13B2F48F4C2
Amount of Each Receipt this Period: 38.47

B.
Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 07 / 22 / 2011
Transaction ID : 08A8C4BFE7469172D50
Amount of Each Receipt this Period: 38.47

C.
Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 08 / 03 / 2011
Transaction ID : 6CBA68DD96B0378B44F
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 08 / 19 / 2011
Transaction ID : 9246A7237A281342382
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 09 / 02 / 2011
Transaction ID : 50957187304A4953F28
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 09 / 16 / 2011
Transaction ID : 6ACAE705A0076028FCA
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 09 / 30 / 2011
Transaction ID : D3B3D42ECDF626D8B0C
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 10 / 14 / 2011
Transaction ID : C0402E4EC7A3D9088BB
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 10 / 28 / 2011
Transaction ID : EB38356C31AB0E1F76A
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 11 / 14 / 2011
Transaction ID : 773E0AA5948B2762F80
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 11 / 25 / 2011
Transaction ID : 727B12696C95C714F08
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.22
Date of Receipt: 12 / 09 / 2011
Transaction ID : 02CA342B37DB7888153
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Phil McCain
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, IT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 12/23/2011
Transaction ID : 66CFE3FCEC967584AA9
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Sherry L. McKenzie AAM, AIS
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 07/06/2011
Transaction ID : C546BD91E91DD59E2F7
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Sherry L. McKenzie AAM, AIS
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 07/25/2011
Transaction ID : 0253F8C057D581A3B72
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 118.47

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Sherry L. McKenzie AAM, AIS

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : D227E5945BBFC406607

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Sherry L. McKenzie AAM, AIS

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : F3248E7AE7EEB8797AF

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
Sherry L. McKenzie AAM, AIS

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : DC71C322297CED550F8

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Sherry L. McKenzie AAM, AIS

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 4F745483CF842E4F313

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Brian S. McLeod

Mailing Address 1 Mutual Ave

City: Frankenmuth | State: MI | Zip Code: 48787-0001

FEC ID number of contributing federal political committee. C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 07 / 08 / 2011

Transaction ID : 58B8FA5778757BE2F2F

Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial)
Brian S. McLeod

Mailing Address 1 Mutual Ave

City: Frankenmuth | State: MI | Zip Code: 48787-0001

FEC ID number of contributing federal political committee. C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.22

Date of Receipt: 07 / 22 / 2011

Transaction ID : 0BD9E7F480CBCEE29CE

Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 116.94

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 08 / 03 / 2011
Transaction ID : 8EB42B5280D2A0A72A9
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 08 / 19 / 2011
Transaction ID : EBAE1D30ED9BE987C0F
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 09 / 02 / 2011
Transaction ID : 2DDC70C5438E957FEAB
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 09 / 16 / 2011
Transaction ID : EA413E95193787C3894
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 09 / 30 / 2011
Transaction ID : FAAD1529DE425CEE5FE
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 10 / 14 / 2011
Transaction ID : 544358D0B7F09E48223
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 10 / 28 / 2011
Transaction ID : 27C7BCF25191610BC86
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 11 / 14 / 2011
Transaction ID : DA15386964B71612E81
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.22
Date of Receipt: 11 / 25 / 2011
Transaction ID : EDDD8DF6AD2BDE39F9D
Amount of Each Receipt this Period: 38.47

SUBTOTAL of Receipts This Page (optional) ▶ 115.41

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 12 / 09 / 2011
Transaction ID : 2DAD0DA2CB85905F875
Amount of Each Receipt this Period: 38.47

B. Full Name (Last, First, Middle Initial): Brian S. McLeod
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President, Secretary & Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.22
Date of Receipt: 12 / 23 / 2011
Transaction ID : 16D17F8D893C201DC10
Amount of Each Receipt this Period: 38.47

C. Full Name (Last, First, Middle Initial): Arthur L. Meadows
Mailing Address: RR 1 Box 113B
City: Fairmont State: WV Zip Code: 26554-9721
FEC ID number of contributing federal political committee: C
Name of Employer: Panhandle Farmers Mutual Insurance Com
Occupation: President/CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 678.00
Date of Receipt: 09 / 14 / 2011
Transaction ID : 19557F9B08C4124CAA8
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 176.94

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): John Menzies III
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : 65746B9FDC97707162B
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): John Menzies III
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 11 / 03 / 2011
Transaction ID : F221085DBB9ED6E4F38
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial): John Menzies III
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 12 / 28 / 2011
Transaction ID : EA04FD5BDDCB1231DB5
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Kevin M. Meskell
Mailing Address: 71 Inman Rd
City: Weymouth State: MA Zip Code: 02188-1825
FEC ID number of contributing federal political committee: C
Name of Employer: Quincy Mutual Fire Insurance Company
Occupation: Executive Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1175.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 861711DA244DF39CFFA
Amount of Each Receipt this Period: 175.00

B. Full Name (Last, First, Middle Initial): Albert Mezzanotte Jr.
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : 11AFFAD8E10A08C1C02
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial): Albert Mezzanotte Jr.
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 11 / 03 / 2011
Transaction ID : 962C657E052CE93660C
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 375.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Albert Mezzanotte Jr.
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 12 / 28 / 2011
Transaction ID : E728A9A9FB6FE58B231
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Scott A. Michael
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: AVP - Personal Lines Auto
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : EF8523C78BF911A22AA
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): Scott A. Michael
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: AVP - Personal Lines Auto
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : 98508784E4ED42938C4
Amount of Each Receipt this Period: 30.00

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Scott A. Michael
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: AVP - Personal Lines Auto
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : FEDE48D73EEDBF4F0D8
Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial): Scott A. Michael
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: AVP - Personal Lines Auto
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 37605699AD0E17CE239
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): Tricia A. Mickley CPA, PFMM
Mailing Address: 12120 Mason Rd
City: Morrison State: IL Zip Code: 61270-9662
FEC ID number of contributing federal political committee: C
Name of Employer: Mount Carroll Mutual Fire Insurance Co
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1400.00
Date of Receipt: 09 / 14 / 2011
Transaction ID : 491858861A064BFDECF
Amount of Each Receipt this Period: 800.00

SUBTOTAL of Receipts This Page (optional) ▶ 860.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Tricia A. Mickley CPA, PFMM
Mailing Address: 12120 Mason Rd
City: Morrison State: IL Zip Code: 61270-9662
FEC ID number of contributing federal political committee: C
Name of Employer: Mount Carroll Mutual Fire Insurance Co
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1400.00
Date of Receipt: 09 / 21 / 2011
Transaction ID : 225E1E7540C644AB1CA
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: 16533 Wanatah Trl
City: Westfield State: IN Zip Code: 46074-8101
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 07 / 15 / 2011
Transaction ID : D9F292D60A3371121C5
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: 16533 Wanatah Trl
City: Westfield State: IN Zip Code: 46074-8101
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : 634B6859ACD9F29CF0C
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 180.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: 16533 Wanatah Trl
City: Westfield State: IN Zip Code: 46074-8101
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : D12F4CD3BE171236289
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: 16533 Wanatah Trl
City: Westfield State: IN Zip Code: 46074-8101
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 812156FDFACCD0746EA
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: 16533 Wanatah Trl
City: Westfield State: IN Zip Code: 46074-8101
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : 90F683CDDE3719D1087
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
David Middleton

Mailing Address 16533 Wanatah Trl

City: Westfield
State: IN
Zip Code: 46074-8101

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt: 09 / 23 / 2011

Transaction ID : 12D952AD553BCCCB4A9

Amount of Each Receipt this Period: 40.00

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

Mailing Address 16533 Wanatah Trl

City: Westfield
State: IN
Zip Code: 46074-8101

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt: 10 / 07 / 2011

Transaction ID : 43CEE6EED70F2CFC1E3

Amount of Each Receipt this Period: 40.00

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

Mailing Address 16533 Wanatah Trl

City: Westfield
State: IN
Zip Code: 46074-8101

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt: 10 / 21 / 2011

Transaction ID : B279BD5E94B573E7E7F

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: 16533 Wanatah Trl
City: Westfield State: IN Zip Code: 46074-8101
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 11 / 04 / 2011
Transaction ID : 2D25686A5B811BCEC66
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : C6637919D854369F554
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: 16533 Wanatah Trl
City: Westfield State: IN Zip Code: 46074-8101
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : 60269B6CFE2EF2438F9
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: 16533 Wanatah Trl
City: Westfield State: IN Zip Code: 46074-8101
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : ED1B3B26C70B3E0D6C3
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): David Middleton
Mailing Address: 16533 Wanatah Trl
City: Westfield State: IN Zip Code: 46074-8101
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1040.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : 00AC878F9DDA1922F30
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee.: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 07 / 19 / 2011
Transaction ID : 66EAF9D30C234A2C63B
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 105.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 08 / 02 / 2011
Transaction ID : 9BE19692CB2A1B6C28F
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 08 / 17 / 2011
Transaction ID : C66A3FE44F20205D491
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 8FF13E3D89EFF542AE4
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 625.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : 34C7F51BB0C416D183F
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 625.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : E7AC7CEC5841DFAC2B4
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 625.00
Date of Receipt: 10 / 11 / 2011
Transaction ID : 8499086A2F134ABA270
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 625.00
Date of Receipt: 10 / 26 / 2011
Transaction ID : 42DC64C88EFA8EEA99C
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 625.00
Date of Receipt: 11 / 08 / 2011
Transaction ID : 9CEE1C708A970C87A73
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 625.00
Date of Receipt: 11 / 21 / 2011
Transaction ID : 676DB74C99C9DF0A3B7
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 7E17E13D1F22AB7DA62
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Dona L. Mohr
Mailing Address: 1725 Hopley Ave
City: Bucyrus State: OH Zip Code: 44820-3569
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Assistant Vice President-Quality Servi
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 12 / 19 / 2011
Transaction ID : E1D61C15FD436487014
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Peder Moller
Mailing Address: 360 Mount Kemble Ave
City: Morristown State: NJ Zip Code: 07960-6662
FEC ID number of contributing federal political committee: C
Name of Employer: Arch Reinsurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : E108EC3EB69EDAFD1A3
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Matt Moreau
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Property Claims Supervisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 214.32
Date of Receipt: 12 / 02 / 2011
Transaction ID : 1E1369BE449503B9A50
Amount of Each Receipt this Period: 35.72

B. Full Name (Last, First, Middle Initial): Carolyn B. Muller
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: AVP-Regional Sales Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : AA0541D545797E7B8A0
Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial): Carolyn B. Muller
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: AVP-Regional Sales Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : 2693758F2676289BAB7
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 95.72

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Carolyn B. Muller

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: AVP-Regional Sales Operations

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 4427841048E94C9D113

Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Carolyn B. Muller

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: AVP-Regional Sales Operations

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 5BEC25E6D75056B049E

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Carolyn B. Muller

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: AVP-Regional Sales Operations

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 73740899222412249C4

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Carolyn B. Muller

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: AVP-Regional Sales Operations

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 3EC635456775B53301E

Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Joel P. Murray

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Division Manager-Personal Lines & M

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 09 / 07 / 2011

Transaction ID : 3EB06E713677E0E925F

Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Joel P. Murray

Mailing Address 222 Ames St

City: Dedham
State: MA
Zip Code: 02026-1850

FEC ID number of contributing federal political committee.: C

Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Division Manager-Personal Lines & M

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 09 / 21 / 2011

Transaction ID : 820091BF817117E87A9

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 50.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joel P. Murray
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Division Manager-Personal Lines & M
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00
Date of Receipt: 10/05/2011
Transaction ID : 7B65AAA010A4A692C4D
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Joel P. Murray
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Division Manager-Personal Lines & M
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00
Date of Receipt: 10/19/2011
Transaction ID : E86E956B34402980930
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Joel P. Murray
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Division Manager-Personal Lines & M
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00
Date of Receipt: 11/02/2011
Transaction ID : 2C1E6DC3AF0C8773DD2
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joel P. Murray
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Division Manager-Personal Lines & M
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00
Date of Receipt: 11 / 16 / 2011
Transaction ID : F82D595101D2AB480B6
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Joel P. Murray
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Division Manager-Personal Lines & M
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 7121B27E2EEBDB18742
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Joel P. Murray
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Division Manager-Personal Lines & M
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00
Date of Receipt: 12 / 14 / 2011
Transaction ID : 992AC3C54450A0B8102
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joel P. Murray
Mailing Address: 222 Ames St
City: Dedham State: MA Zip Code: 02026-1850
FEC ID number of contributing federal political committee: C
Name of Employer: Norfolk & Dedham Mutual Fire Insurance
Occupation: NE Division Manager-Personal Lines & M
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 290.00
Date of Receipt: 12 / 28 / 2011
Transaction ID : AC0B491A0816A3AFA9B
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Karlyn T. Myers
Mailing Address: 1 Preferred Way
City: New Berlin State: NY Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Vice President, Corporate Secretary
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 960.00
Date of Receipt: 07 / 26 / 2011
Transaction ID : 52883AB45FFAF12FC13
Amount of Each Receipt this Period: 80.00

C. Full Name (Last, First, Middle Initial): Karlyn T. Myers
Mailing Address: 1 Preferred Way
City: New Berlin State: NY Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Vice President, Corporate Secretary
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 960.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : D662B5C149BAC22F0AB
Amount of Each Receipt this Period: 80.00

SUBTOTAL of Receipts This Page (optional) ▶ 170.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Karlyn T. Myers
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Vice President, Corporate Secretary
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 960.00
Date of Receipt: 10 / 11 / 2011
Transaction ID : 446C1398F716CB910BB
Amount of Each Receipt this Period: 120.00

B. Full Name (Last, First, Middle Initial): Karlyn T. Myers
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Vice President, Corporate Secretary
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 960.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 35B934404F29DB6020B
Amount of Each Receipt this Period: 80.00

C. Full Name (Last, First, Middle Initial): William C. Myers
Mailing Address: 1 Commerce Sq
City: Philadelphia | State: PA | Zip Code: 19103-7042
FEC ID number of contributing federal political committee: C
Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 260.00
Date of Receipt: 09 / 29 / 2011
Transaction ID : A27638AC1D867D98779
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 220.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): William C. Myers
Mailing Address: 1 Commerce Sq
City: Philadelphia State: PA Zip Code: 19103-1415
FEC ID number of contributing federal political committee: C
Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 260.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 75EBEA055D3D29C06B7
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): Eric Nelson
Mailing Address: 1460 Wells St
City: Enumclaw State: WA Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2875.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : F15EE1C24B3AEA2D91D
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Eric Nelson
Mailing Address: 1460 Wells St
City: Enumclaw State: WA Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2875.00
Date of Receipt: 08 / 01 / 2011
Transaction ID : EA102EC5DDA851DF033
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 540.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Eric Nelson
Mailing Address: 1460 Wells St
City: Enumclaw
State: WA
Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2875.00
Date of Receipt: 08 / 30 / 2011
Transaction ID : 4F584993E3C80AA614D
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial): Eric Nelson
Mailing Address: 1460 Wells St
City: Enumclaw
State: WA
Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2875.00
Date of Receipt: 10 / 03 / 2011
Transaction ID : A73953E59690C611D62
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): Eric Nelson
Mailing Address: 1460 Wells St
City: Enumclaw
State: WA
Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2875.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 7A280A08A5971D23777
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Eric Nelson
Mailing Address: 1460 Wells St
City: Enumclaw State: WA Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2875.00
Date of Receipt: 12 / 02 / 2011
Transaction ID : 491514B05D9DF0C6479
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Eric Nelson
Mailing Address: 1460 Wells St
City: Enumclaw State: WA Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2875.00
Date of Receipt: 12 / 28 / 2011
Transaction ID : 8CF4A00896C935FF4DA
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Donald H. Nikolaus
Mailing Address: PO Box 302
City: Marietta State: PA Zip Code: 17547-0302
FEC ID number of contributing federal political committee: C
Name of Employer: Donegal Mutual Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 / 17 / 2011
Transaction ID : 11D06F56DC2F4400536
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Robert O'Reilly

Mailing Address PO Box 618

City: Columbia
State: MO
Zip Code: 65205-0618

FEC ID number of contributing federal political committee.: C

Name of Employer: Columbia Mutual Insurance Company
Occupation: VP/Branch Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 06 / 2011

Transaction ID : D66DBD39501DB55FA38

Amount of Each Receipt this Period: 250.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President, Financial Accounting

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 10 / 2011

Transaction ID : 6FFF1410EEB95D5B117

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Angela Panowicz

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: Harford Mutual Insurance Company
Occupation: Underwriting Supervisor

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 514.32

Date of Receipt: 08 / 30 / 2011

Transaction ID : CCB41F9751EF79A5C3B

Amount of Each Receipt this Period: 85.72

SUBTOTAL of Receipts This Page (optional) ▶ 835.72

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Angela Panowicz
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Underwriting Supervisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 514.32
Date of Receipt: 09 / 29 / 2011
Transaction ID : 17763FB33E747AD5A96
Amount of Each Receipt this Period: 85.72

B. Full Name (Last, First, Middle Initial): Angela Panowicz
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Underwriting Supervisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 514.32
Date of Receipt: 11 / 07 / 2011
Transaction ID : 6717F47151BEA514F42
Amount of Each Receipt this Period: 85.72

C. Full Name (Last, First, Middle Initial): Angela Panowicz
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Underwriting Supervisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 514.32
Date of Receipt: 12 / 02 / 2011
Transaction ID : 57F93E643AB330AF708
Amount of Each Receipt this Period: 85.72

SUBTOTAL of Receipts This Page (optional) ▶ 257.16

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: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Sandra G. Parrillo
Mailing Address: 3 Robin Way
City: North Smithfield State: RI Zip Code: 02896-8249
FEC ID number of contributing federal political committee: C
Name of Employer: Providence Mutual Fire Insurance Compa
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 07 / 22 / 2011
Transaction ID : F171E516-D669-49EC-
Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial): John A. Paul PFMM
Mailing Address: 40962 Brothers Ave
City: Henderson State: IA Zip Code: 51541-4048
FEC ID number of contributing federal political committee: C
Name of Employer: Western Iowa Mutual Insurance Associat
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2140.00
Date of Receipt: 07 / 26 / 2011
Transaction ID : 597FAA609DAA0C5AE84
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial): John A. Paul PFMM
Mailing Address: 40962 Brothers Ave
City: Henderson State: IA Zip Code: 51541-4048
FEC ID number of contributing federal political committee: C
Name of Employer: Western Iowa Mutual Insurance Associat
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2140.00
Date of Receipt: 08 / 19 / 2011
Transaction ID : C2BE7083780A2C01478
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 2700.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address 40962 Brothers Ave

City: Henderson
State: IA
Zip Code: 51541-4048

FEC ID number of contributing federal political committee.: C

Name of Employer: Western Iowa Mutual Insurance Associat
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2140.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 7FA4D5FD7E3B7E1BC56

Amount of Each Receipt this Period: 540.00

B. Full Name (Last, First, Middle Initial)
John A. Paul PFMM

Mailing Address 40962 Brothers Ave

City: Henderson
State: IA
Zip Code: 51541-4048

FEC ID number of contributing federal political committee.: C

Name of Employer: Western Iowa Mutual Insurance Associat
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2140.00

Date of Receipt: 10 / 26 / 2011

Transaction ID : 58F6784F0F0840B8056

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
John A. Paul PFMM

Mailing Address 40962 Brothers Ave

City: Henderson
State: IA
Zip Code: 51541-4048

FEC ID number of contributing federal political committee.: C

Name of Employer: Western Iowa Mutual Insurance Associat
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2140.00

Date of Receipt: 11 / 21 / 2011

Transaction ID : 777182C0A2DBC32C9D2

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 740.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address 40962 Brothers Ave

City: Henderson
State: IA
Zip Code: 51541-4048

FEC ID number of contributing federal political committee.: C

Name of Employer: Western Iowa Mutual Insurance Associat
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2140.00

Date of Receipt: 12 / 02 / 2011

Transaction ID : F95C134627221ACE576

Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
John A. Paul PFMM

Mailing Address 40962 Brothers Ave

City: Henderson
State: IA
Zip Code: 51541-4048

FEC ID number of contributing federal political committee.: C

Name of Employer: Western Iowa Mutual Insurance Associat
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2140.00

Date of Receipt: 12 / 20 / 2011

Transaction ID : F0C6B161D226BCA49D2

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Ronette M. Payne

Mailing Address PO Box 340

City: Lincoln
State: IL
Zip Code: 62656-0340

FEC ID number of contributing federal political committee.: C

Name of Employer: Frontier Mutual Insurance Company
Occupation: Assistant Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 453B62253FE3EDB7E6D

Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ▶ 800.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joseph L. Petrelli
Mailing Address: 2715 Tuller Pkwy
City: Dublin State: OH Zip Code: 43017-2310
FEC ID number of contributing federal political committee: C
Name of Employer: Demotech, Inc.
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 07983DDB7E74B9FFC19
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Mary S. Pierce
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Home Office C
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 8186AF51A72E14C43B4
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Mary S. Pierce
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Home Office C
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : E786517E0EA30E47FB9
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Mary S. Pierce

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Home Office C

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 29B99533EB62E3D0AB6

Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Mary S. Pierce

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Home Office C

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : D60931E50E673951399

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Mike Pike

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : C3504B699BBB10CF950

Amount of Each Receipt this Period: 325.00

SUBTOTAL of Receipts This Page (optional) ▶ 375.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
June A. Poole A.I.A.F.

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Vice President &Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 08 / 19 / 2011

Transaction ID : 360E181AB2A1EC94534

Amount of Each Receipt this Period: 87.50

B. Full Name (Last, First, Middle Initial)
June A. Poole A.I.A.F.

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Vice President &Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 11 / 21 / 2011

Transaction ID : 5201260DF7D3489D2A5

Amount of Each Receipt this Period: 87.50

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

Mailing Address PO Box 9

City: De Smet
State: SD
Zip Code: 57231-0009

FEC ID number of contributing federal political committee. C

Name of Employer: De Smet Farm Mutual Insurance Company
Occupation: General Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 15 / 2011

Transaction ID : 4CF2564E4210A9D7777

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 675.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Barry Preslaski

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : ABAD094D366A54B0F7A

Amount of Each Receipt this Period: 30.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : FCF40D9F21DD73D282C

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Barry Preslaski

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : E7B92EADDA0A13C17A4

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Lee Rademacher

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Commercial Li

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 7AF453D752C79413939

Amount of Each Receipt this Period: 30.00

B. Full Name (Last, First, Middle Initial)
Lee Rademacher

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Commercial Li

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 0AC68FD9ECB77214D8F

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Lee Rademacher

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Commercial Li

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 2B5F6BE9818E9F68BD9

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Lee Rademacher

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Commercial Li

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 8D296FDE03C7E389C45

Amount of Each Receipt this Period: 30.00

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

Mailing Address PO Box 239

City: Upper Sandusky
State: OH
Zip Code: 43351-0239

FEC ID number of contributing federal political committee.: C

Name of Employer: Farmers Mutual Relief Association of W
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : ED83625EC837C9B962A

Amount of Each Receipt this Period: 300.00

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

Mailing Address 13400 N White Cloud Ct

City: Camby
State: IN
Zip Code: 46113-8708

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 07 / 15 / 2011

Transaction ID : 7947C5CF6272131D611

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 350.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): David Reddick PhD
Mailing Address: 13400 N White Cloud Ct
City: Camby | State: IN | Zip Code: 46113-8708
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : FD07E2F33FD71665754
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): David Reddick PhD
Mailing Address: 13400 N White Cloud Ct
City: Camby | State: IN | Zip Code: 46113-8708
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : E34D4ED027725573A7E
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): David Reddick PhD
Mailing Address: 13400 N White Cloud Ct
City: Camby | State: IN | Zip Code: 46113-8708
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 440DF1CD6DA5A7353B6
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
David Reddick PhD

Mailing Address 13400 N White Cloud Ct

City: Camby
State: IN
Zip Code: 46113-8708

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 09 / 12 / 2011

Transaction ID : F4E1B0DD9406E0851D0

Amount of Each Receipt this Period: 20.00

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

Mailing Address 13400 N White Cloud Ct

City: Camby
State: IN
Zip Code: 46113-8708

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 09 / 23 / 2011

Transaction ID : 0557C46FE1E5DC5D7F2

Amount of Each Receipt this Period: 20.00

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

Mailing Address 13400 N White Cloud Ct

City: Camby
State: IN
Zip Code: 46113-8708

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 10 / 07 / 2011

Transaction ID : 8BB78C595C73D3FF29F

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
David Reddick PhD

Mailing Address 13400 N White Cloud Ct

City: Camby
State: IN
Zip Code: 46113-8708

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 10 / 21 / 2011

Transaction ID : 57512EB9EF3BF22C90F

Amount of Each Receipt this Period: 20.00

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

Mailing Address 13400 N White Cloud Ct

City: Camby
State: IN
Zip Code: 46113-8708

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 11 / 04 / 2011

Transaction ID : 4403FA940FD03C6534E

Amount of Each Receipt this Period: 20.00

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

Mailing Address 13400 N White Cloud Ct

City: Camby
State: IN
Zip Code: 46113-8708

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 11 / 18 / 2011

Transaction ID : 57B2C78C87B6076EAE4

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): David Reddick PhD
Mailing Address: 13400 N White Cloud Ct
City: Camby State: IN Zip Code: 46113-8708
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : 882F6D7CF2CB9F1C620
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): David Reddick PhD
Mailing Address: 13400 N White Cloud Ct
City: Camby State: IN Zip Code: 46113-8708
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : 1D961EDDE81EDEA3C05
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): David Reddick PhD
Mailing Address: 13400 N White Cloud Ct
City: Camby State: IN Zip Code: 46113-8708
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Director - Public Policy Research
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : AE534C76A4C808FD6BB
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Theodore Reinbold

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: AVP, Commercial Lines Underwriting

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 27 / 2011

Transaction ID : 174BCD47AF34A3E6B34

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Janey Repensek

Mailing Address 1460 Wells St

City: Enumclaw
State: WA
Zip Code: 98022-3003

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: Trustee

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 07 / 15 / 2011

Transaction ID : AF7ABF8E6F9B791CB03

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Liz Reynolds CPCU, API

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Southeast Region

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 21 / 2011

Transaction ID : 307C3C44259802F2A07

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 510.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Liz Reynolds CPCU, API

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Southeast Region

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 11 / 04 / 2011

Transaction ID : AC54EC8C12B5AC81F5F

Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Liz Reynolds CPCU, API

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Southeast Region

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 11 / 18 / 2011

Transaction ID : D06CC063263E5B1242B

Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Liz Reynolds CPCU, API

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Southeast Region

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 05 / 2011

Transaction ID : 5097C5EEE9BB9C5A97E

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Liz Reynolds CPCU, API

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Southeast Region

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 16 / 2011

Transaction ID : 030632E8E916C9AF1FF

Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Liz Reynolds CPCU, API

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Southeast Region

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 30 / 2011

Transaction ID : 57059C03972E6E1FDB9

Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Jonathan R. Riekse

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Personal Lines

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 07 / 06 / 2011

Transaction ID : 55E5EB800556CD8539F

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Jonathan R. Riekse

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Personal Lines

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 07 / 25 / 2011

Transaction ID : AA44C9379B98BF25718

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Jonathan R. Riekse

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Personal Lines

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 96849ADB621F0001A26

Amount of Each Receipt this Period: 80.00

C. Full Name (Last, First, Middle Initial)
Jonathan R. Riekse

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Personal Lines

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 25C95FD087F53E3FEAA

Amount of Each Receipt this Period: 80.00

SUBTOTAL of Receipts This Page (optional) ▶ 200.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Jonathan R. Riekse

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company

Occupation: Senior Vice President, Personal Lines

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 778E636EEF21ED3EA2A

Amount of Each Receipt this Period: 80.00

B. Full Name (Last, First, Middle Initial)
Jonathan R. Riekse

Mailing Address PO Box 30660

City: Lansing | State: MI | Zip Code: 48909-8160

FEC ID number of contributing federal political committee: C

Name of Employer: Auto-Owners Insurance Company

Occupation: Senior Vice President, Personal Lines

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : BD963AD039F0C695F20

Amount of Each Receipt this Period: 120.00

C. Full Name (Last, First, Middle Initial)
L. Gerald Roach CPCU, FLMI

Mailing Address 4027 Monument Ave

City: Richmond | State: VA | Zip Code: 23230-3907

FEC ID number of contributing federal political committee: C

Name of Employer: Mutual Assurance Society of Virginia

Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3320.00

Date of Receipt: 07 / 08 / 2011

Transaction ID : 8AED99E608BCA29AB10

Amount of Each Receipt this Period: 240.00

SUBTOTAL of Receipts This Page (optional) ▶ 440.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
L. Gerald Roach CPCU, FLMI

Mailing Address 4027 Monument Ave

City: Richmond
State: VA
Zip Code: 23230-3907

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: President

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
3320.00

Date of Receipt
M M 08 / D D 01 / Y Y Y Y 2011

Transaction ID : DB93FD8EA99F064FACF

Amount of Each Receipt this Period
240.00

B. Full Name (Last, First, Middle Initial)
L. Gerald Roach CPCU, FLMI

Mailing Address 4027 Monument Ave

City: Richmond
State: VA
Zip Code: 23230-3907

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: President

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
3320.00

Date of Receipt
M M 09 / D D 06 / Y Y Y Y 2011

Transaction ID : 4250686293F457B1AAF

Amount of Each Receipt this Period
240.00

C. Full Name (Last, First, Middle Initial)
L. Gerald Roach CPCU, FLMI

Mailing Address 4027 Monument Ave

City: Richmond
State: VA
Zip Code: 23230-3907

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: President

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
3320.00

Date of Receipt
M M 09 / D D 27 / Y Y Y Y 2011

Transaction ID : A41E43B4066F9F4AA44

Amount of Each Receipt this Period
450.00

SUBTOTAL of Receipts This Page (optional) ▶ 930.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
L. Gerald Roach CPCU, FLMI

Mailing Address 4027 Monument Ave

City: Richmond
State: VA
Zip Code: 23230-3907

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: President

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
3320.00

Date of Receipt
M M 10 / D D 03 / Y Y Y Y 2011

Transaction ID : 58498BD09D29A31408E

Amount of Each Receipt this Period
240.00

B. Full Name (Last, First, Middle Initial)
L. Gerald Roach CPCU, FLMI

Mailing Address 4027 Monument Ave

City: Richmond
State: VA
Zip Code: 23230-3907

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: President

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
3320.00

Date of Receipt
M M 11 / D D 03 / Y Y Y Y 2011

Transaction ID : A8B8BA5C4167CD8C6AD

Amount of Each Receipt this Period
240.00

C. Full Name (Last, First, Middle Initial)
L. Gerald Roach CPCU, FLMI

Mailing Address 4027 Monument Ave

City: Richmond
State: VA
Zip Code: 23230-3907

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: President

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
3320.00

Date of Receipt
M M 12 / D D 02 / Y Y Y Y 2011

Transaction ID : 8577291FC5EC213D94F

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional) ▶ 720.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Mary Jane Rodgers

Mailing Address PO Box 297

City: Somerset
State: OH
Zip Code: 43783-0297

FEC ID number of contributing federal political committee.: C

Name of Employer: Perry County Mutual Fire Insurance Com
Occupation: Secretary

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 14 / 2011

Transaction ID : 3DB18A5BC8297C210D2

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Ed Roesch

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: Litigation Examiner

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 10 / 21 / 2011

Transaction ID : 83D12001323CE61360A

Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Ed Roesch

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: Litigation Examiner

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 11 / 04 / 2011

Transaction ID : 0EE08BDDE4BE50F389D

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 520.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Ed Roesch
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: NAMIC Insurance Company, Inc.
Occupation: Litigation Examiner
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : 60D30060D5DAFFF4198
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): Ed Roesch
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: NAMIC Insurance Company, Inc.
Occupation: Litigation Examiner
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : 8F3682D31E83B02119E
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): Ed Roesch
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: NAMIC Insurance Company, Inc.
Occupation: Litigation Examiner
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : 34529D0E4F1A10ED1BA
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Ed Roesch
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: NAMIC Insurance Company, Inc.
Occupation: Litigation Examiner
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : 8471A4E4DC229DFB922
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Malcolm Rowland AIC
Mailing Address: PO Box 5626
City: Rockford State: IL Zip Code: 61125-0626
FEC ID number of contributing federal political committee: C
Name of Employer: Rockford Mutual Insurance Company
Occupation: Vice President-Reinsurance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 09 / 30 / 2011
Transaction ID : 05B4A1DF5E70F4F7112
Amount of Each Receipt this Period: 520.00

C. Full Name (Last, First, Middle Initial): Mary Rowlinson
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 07 / 19 / 2011
Transaction ID : 0B56FA648E2CBA35166
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 555.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Mary Rowlinson

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
M M 08 / D D 02 / Y Y Y Y 2011

Transaction ID : 3557E00E443FB57DFF8

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mary Rowlinson

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
M M 08 / D D 17 / Y Y Y Y 2011

Transaction ID : 1DE48516AAD8927ADFD

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mary Rowlinson

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
M M 09 / D D 01 / Y Y Y Y 2011

Transaction ID : 05F0BED2F11DD65A410

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Mary Rowlinson

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
M M 09 / D D 12 / Y Y Y Y 2011

Transaction ID : 4FF3F1F0CDD9C1A1C34

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mary Rowlinson

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
M M 09 / D D 27 / Y Y Y Y 2011

Transaction ID : B47807D74C8EA22EBC3

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mary Rowlinson

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
M M 10 / D D 11 / Y Y Y Y 2011

Transaction ID : 265EFF04DA03699CC22

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Mary Rowlinson
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 10 / 26 / 2011
Transaction ID : 95E182DDEABC5E6A04D
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Mary Rowlinson
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 11 / 08 / 2011
Transaction ID : 18B786A7F0408F90A94
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Mary Rowlinson
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 625.00
Date of Receipt: 11 / 21 / 2011
Transaction ID : F8DA64A2B548C05699E
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Mary Rowlinson
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : D6B741E0A3472A18D31
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Mary Rowlinson
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: United Ohio Insurance Company
Occupation: Claims Operations Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00
Date of Receipt: 12 / 19 / 2011
Transaction ID : 83ADAB8D3E238B9014C
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Rodney J. Rupp
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Executive Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1480.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : DE1DFB0E418654F3459
Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ▶ 110.00

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Rodney J. Rupp
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Executive Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1480.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : 7FE8FBB095A20E8A2B2
Amount of Each Receipt this Period: 60.00

B. Full Name (Last, First, Middle Initial): Rodney J. Rupp
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Executive Vice President, Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1480.00
Date of Receipt: 07 / 27 / 2011
Transaction ID : 7971A49BB2C53BE3F05
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Timothy Rutledge
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director of Accounting
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 214.32
Date of Receipt: 12 / 02 / 2011
Transaction ID : 4ED5E1B867E43F38B52
Amount of Each Receipt this Period: 35.72

SUBTOTAL of Receipts This Page (optional) ▶ 1095.72

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Timothy B. Salge

Mailing Address 1217 Gardenia Dr

City: New Braunfels
State: TX
Zip Code: 78130-5905

FEC ID number of contributing federal political committee. C

Name of Employer: Farmers Mutual Fire Insurance Associat
Occupation: President/General Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 23 / 2011
Transaction ID : 60240EE7562FD46C6CA

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Carol Sanders

Mailing Address PO Box 468

City: Neenah
State: WI
Zip Code: 54957-0468

FEC ID number of contributing federal political committee. C

Name of Employer: Jewelers Mutual Insurance Company
Occupation: CFO, Corporate Treasurer and Senior Vi

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 10 / 26 / 2011
Transaction ID : DBCB4D5261E76CFC4C0

Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
Carol Sanders

Mailing Address PO Box 468

City: Neenah
State: WI
Zip Code: 54957-0468

FEC ID number of contributing federal political committee. C

Name of Employer: Jewelers Mutual Insurance Company
Occupation: CFO, Corporate Treasurer and Senior Vi

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 30 / 2011
Transaction ID : 628468A00EB7237F7BA

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 290.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Francis R. Santoro

Mailing Address 1 Commerce Sq

City: Philadelphia
State: PA
Zip Code: 19103-7042

FEC ID number of contributing federal political committee.: C

Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: Assistant Vice President, Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 242.50

Date of Receipt: 09 / 29 / 2011

Transaction ID : D24AE6926399160A4D2

Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Francis R. Santoro

Mailing Address 1 Commerce Sq

City: Philadelphia
State: PA
Zip Code: 19103-1415

FEC ID number of contributing federal political committee.: C

Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: Assistant Vice President, Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 242.50

Date of Receipt: 11 / 30 / 2011

Transaction ID : 728FE324BBEE33A6509

Amount of Each Receipt this Period: 40.00

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

Mailing Address PO Box 708

City: Houston
State: MN
Zip Code: 55943-0708

FEC ID number of contributing federal political committee.: C

Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 11 / 2011

Transaction ID : AC31FE84B1E13E236BC

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 310.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Linda M. Schmidt
Mailing Address: 500 S US Highway 77A
City: Yoakum State: TX Zip Code: 77995-1399
FEC ID number of contributing federal political committee: C
Name of Employer: Hochheim Prairie Farm Mutual Insurance
Occupation: Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 09 / 29 / 2011
Transaction ID : C01D1D108B436DD435D
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial): Kenneth Schroeder
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Commercial Unde
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : 3CA6FC8FC4D14508EF6
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Kenneth Schroeder
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Commercial Unde
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : AC04AFF8C49F83AF1F1
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 130.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Commercial Unde

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 46FFC9A85556AD23558

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Kenneth Schroeder

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Commercial Unde

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : CB9DC5B2C190238DC95

Amount of Each Receipt this Period: 40.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Commercial Unde

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 2608D4C03DF4B0A7DE4

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Commercial Unde

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 2F32E219168CFC88ECD

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Wayne M. Schuh

Mailing Address 107 Forrest Ave
Ste 11

City: Narberth
State: PA
Zip Code: 19072-2219

FEC ID number of contributing federal political committee.: C

Name of Employer: St. George Capital, LP
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 10 / 2011

Transaction ID : 844476773E0B983CD2D

Amount of Each Receipt this Period: 1000.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Director - Agency Systems

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : E2DA9E791480C8359A4

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 1070.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Director - Agency Systems

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : CC7C3D428BA1E45BDC2

Amount of Each Receipt this Period: 30.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Director - Agency Systems

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : B8BADDAAD0CF03DA297

Amount of Each Receipt this Period: 30.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Director - Agency Systems

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 6CCF3AA52473C759410

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Richard Schumacher PFMM
Mailing Address: PO Box 168
City: Hartley State: IA Zip Code: 51346-0168
FEC ID number of contributing federal political committee: C
Name of Employer: Glidden Mutual Insurance Association
Occupation: Former Secretary/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1450.00
Date of Receipt: 09 / 14 / 2011
Transaction ID : 67F84C74D7AE5A18235
Amount of Each Receipt this Period: 1200.00

B. Full Name (Last, First, Middle Initial): Betty Schuster
Mailing Address: PO Box 618
City: Columbia State: MO Zip Code: 65205-0618
FEC ID number of contributing federal political committee: C
Name of Employer: Columbia Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : 7814F416C1C5A922F6B
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Stephen Scott
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : B296C2C572F6305DBED
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 1550.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Stephen Scott
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 11 / 03 / 2011
Transaction ID : 901FE483C30AC5D2263
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Stephen Scott
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 12 / 28 / 2011
Transaction ID : ECEAFBCC908362DF212
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial): Kurt H. Seelbach CPA, CPCU
Mailing Address: 550 Eisenhower Rd
City: Leavenworth | State: KS | Zip Code: 66048-1190
FEC ID number of contributing federal political committee: C
Name of Employer: Florists' Mutual Insurance Company
Occupation: Executive Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 08 / 29 / 2011
Transaction ID : D1CBDC2C-22D2-4276-
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1200.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Paul Sells
Mailing Address: 1 Commerce Sq
City: Philadelphia State: PA Zip Code: 19103-7042
FEC ID number of contributing federal political committee: C
Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: Compensation Supervisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: 09 / 29 / 2011
Transaction ID : 606CAA0C72FF414736F
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Paul Sells
Mailing Address: 1 Commerce Sq
City: Philadelphia State: PA Zip Code: 19103-1415
FEC ID number of contributing federal political committee: C
Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: Compensation Supervisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : D35F949C7DFC813A671
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Gregory Shell
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : DEDE9C8FD616B79C5A1
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 100.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Gregory Shell

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 07 / 25 / 2011

Transaction ID : BBC27B15B6260B3C4B1

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Gregory Shell

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : F836E32848FC3F4AF5B

Amount of Each Receipt this Period: 35.00

C. Full Name (Last, First, Middle Initial)
Gregory Shell

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : EB7CD7F5092404A664B

Amount of Each Receipt this Period: 35.00

SUBTOTAL of Receipts This Page (optional) ▶ 110.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Gregory Shell

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 34ABE9AD5E16A452315

Amount of Each Receipt this Period: 35.00

B. Full Name (Last, First, Middle Initial)
Gregory Shell

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : E9CE665B6C64C4CB3F6

Amount of Each Receipt this Period: 35.00

C. Full Name (Last, First, Middle Initial)
Christopher G. Shipe CPCU, AIT

Mailing Address 15 Whispering Knolls Ln

City: Berryville
State: VA
Zip Code: 22611-2571

FEC ID number of contributing federal political committee.: C

Name of Employer: Farmers & Mechanics Mutual Insurance C
Occupation: Former President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 08 / 19 / 2011

Transaction ID : 49B3DA8A9B643127245

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 320.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Christopher G. Shipe CPCU, AIT

Mailing Address 15 Whispering Knolls Ln

City: Berryville
State: VA
Zip Code: 22611-2571

FEC ID number of contributing federal political committee. C

Name of Employer: Farmers & Mechanics Mutual Insurance C
Occupation: Former President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 21 / 2011

Transaction ID : 80C01C24C9C438AE172

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Ronald Simon FLMI

Mailing Address 602 Shoreline Dr

City: Dewitt
State: MI
Zip Code: 48820-8707

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 08 / 05 / 2011

Transaction ID : 81F25713EFBC4CBA7D6

Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Kristen Sizelove

Mailing Address 1420 Bayswater Ln

City: Cicero
State: IN
Zip Code: 46034-9404

FEC ID number of contributing federal political committee. C

Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 07 / 15 / 2011

Transaction ID : 06DA95F643B9FDCA5E0

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 2770.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero | State: IN | Zip Code: 46034-9404
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : 68D07E7D1D5049E29DE
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero | State: IN | Zip Code: 46034-9404
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : 3C635A975641FA93E88
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero | State: IN | Zip Code: 46034-9404
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 0AD6321AD1EF84152A5
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero
State: IN
Zip Code: 46034-9404
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : 15D915CA2EDDDFC6106
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero
State: IN
Zip Code: 46034-9404
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 09 / 23 / 2011
Transaction ID : 0C1C61A637EC69D04CC
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero
State: IN
Zip Code: 46034-9404
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 10 / 07 / 2011
Transaction ID : 37F025DF919A5B27FD1
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero State: IN Zip Code: 46034-9404
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 10 / 21 / 2011
Transaction ID : 549385592E6E116894F
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero State: IN Zip Code: 46034-9404
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 11 / 04 / 2011
Transaction ID : 81A08CC947FB6E8B003
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero State: IN Zip Code: 46034-9404
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : 2DA701577615BE7E57A
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero State: IN Zip Code: 46034-9404
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : 08F8583698B9F161CAF
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero State: IN Zip Code: 46034-9404
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : F10D451F56C2BAB1B6E
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): Kristen Sizelove
Mailing Address: 1420 Bayswater Ln
City: Cicero State: IN Zip Code: 46034-9404
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Member Development
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : B7A36EBC634C6B13FEC
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Steven C. Sliver CPA
Mailing Address: 10147 Tanglewood Dr
City: Huntingdon State: PA Zip Code: 16652-7408
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual Benefit Insurance Company
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 08 / 19 / 2011
Transaction ID : 911B887FE376E4BAA0E
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial): Steven C. Sliver CPA
Mailing Address: 10147 Tanglewood Dr
City: Huntingdon State: PA Zip Code: 16652-7408
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual Benefit Insurance Company
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 11 / 21 / 2011
Transaction ID : D68B9D6F3468C0C1116
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): Abigail Smith
Mailing Address: 200 N Main St
City: Bel Air State: MD Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : 5B7318B0C160A016B43
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Abigail Smith
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company | Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 11 / 03 / 2011
Transaction ID : FB21DB95B427DBCFD38
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial): Abigail Smith
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company | Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 12 / 28 / 2011
Transaction ID : 69D7670EEBC308E0324
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial): John K. Smith CRM, CIC,
Mailing Address: 21 Riverview Dr
City: Ewing | State: NJ | Zip Code: 08628-2617
FEC ID number of contributing federal political committee: C
Name of Employer: Pennsylvania Lumbermens Mutual Insuran | Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 3051.00
Date of Receipt: 07 / 19 / 2011
Transaction ID : E7C7B5228AA4113C98E
Amount of Each Receipt this Period: 234.00

SUBTOTAL of Receipts This Page (optional) ▶ 434.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
John K. Smith CRM, CIC,

Mailing Address 21 Riverview Dr

City: Ewing
State: NJ
Zip Code: 08628-2617

FEC ID number of contributing federal political committee.: C

Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3051.00

Date of Receipt: 08 / 17 / 2011

Transaction ID : 6F4821DEEE541865A4E

Amount of Each Receipt this Period: 156.00

B. Full Name (Last, First, Middle Initial)
John K. Smith CRM, CIC,

Mailing Address 21 Riverview Dr

City: Ewing
State: NJ
Zip Code: 08628-2617

FEC ID number of contributing federal political committee.: C

Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3051.00

Date of Receipt: 09 / 12 / 2011

Transaction ID : 6BECB3D7BA268F403FF

Amount of Each Receipt this Period: 156.00

C. Full Name (Last, First, Middle Initial)
John K. Smith CRM, CIC,

Mailing Address 21 Riverview Dr

City: Ewing
State: NJ
Zip Code: 08628-2617

FEC ID number of contributing federal political committee.: C

Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3051.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : B70253421D9AACDB35B

Amount of Each Receipt this Period: 1500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1812.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
John K. Smith CRM, CIC,

Mailing Address 21 Riverview Dr

City: Ewing
State: NJ
Zip Code: 08628-2617

FEC ID number of contributing federal political committee.: C

Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3051.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : 6A16DC84C26A3EC59BB

Amount of Each Receipt this Period: 156.00

B. Full Name (Last, First, Middle Initial)
John K. Smith CRM, CIC,

Mailing Address 21 Riverview Dr

City: Ewing
State: NJ
Zip Code: 08628-2617

FEC ID number of contributing federal political committee.: C

Name of Employer: Pennsylvania Lumbermens Mutual Insuran
Occupation: President & CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3051.00

Date of Receipt: 11 / 30 / 2011

Transaction ID : 79848A0A74C997ED8A3

Amount of Each Receipt this Period: 312.00

C. Full Name (Last, First, Middle Initial)
Irica Solomon

Mailing Address 122 C St NW
Ste 540

City: Washington
State: DC
Zip Code: 20001-2102

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Political Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.12

Date of Receipt: 07 / 15 / 2011

Transaction ID : DBA07CC19088E8E1B23

Amount of Each Receipt this Period: 45.46

SUBTOTAL of Receipts This Page (optional) ▶ 513.46

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Irica Solomon
Mailing Address: 122 C St NW, Ste 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Political Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.12
Date of Receipt: M M 07 / D D 29 / Y Y Y Y 2011
Transaction ID : D96D2886729352788F7
Amount of Each Receipt this Period: 45.46

B.
Full Name (Last, First, Middle Initial): Irica Solomon
Mailing Address: 122 C St NW, Ste 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Political Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.12
Date of Receipt: M M 08 / D D 12 / Y Y Y Y 2011
Transaction ID : C167F3D6B108CA0C3B7
Amount of Each Receipt this Period: 45.46

C.
Full Name (Last, First, Middle Initial): Irica Solomon
Mailing Address: 122 C St NW, Ste 540
City: Washington State: DC Zip Code: 20001-2102
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Political Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.12
Date of Receipt: M M 08 / D D 26 / Y Y Y Y 2011
Transaction ID : 87433D838DC3C83616E
Amount of Each Receipt this Period: 45.46

SUBTOTAL of Receipts This Page (optional) ▶ 136.38

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Irica Solomon

Mailing Address 122 C St NW
Ste 540

City: Washington
State: DC
Zip Code: 20001-2102

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Political Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.12

Date of Receipt: 09 / 12 / 2011

Transaction ID : F2E547AC3C7967E7A98

Amount of Each Receipt this Period: 45.46

B. Full Name (Last, First, Middle Initial)
Irica Solomon

Mailing Address 122 C St NW
Ste 540

City: Washington
State: DC
Zip Code: 20001-2102

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Political Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.12

Date of Receipt: 09 / 23 / 2011

Transaction ID : 98A5EEBF6C0C70BF19E

Amount of Each Receipt this Period: 45.46

C. Full Name (Last, First, Middle Initial)
Irica Solomon

Mailing Address 122 C St NW
Ste 540

City: Washington
State: DC
Zip Code: 20001-2102

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Political Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.12

Date of Receipt: 10 / 07 / 2011

Transaction ID : AAE63AA95CD37E021E1

Amount of Each Receipt this Period: 45.46

SUBTOTAL of Receipts This Page (optional) ▶ 136.38

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Irica Solomon

Mailing Address 122 C St NW
Ste 540

City: Washington
State: DC
Zip Code: 20001-2102

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Political Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.12

Date of Receipt: 10 / 21 / 2011

Transaction ID : F64C62B23055A6551A1

Amount of Each Receipt this Period: 45.46

B. Full Name (Last, First, Middle Initial)
Irica Solomon

Mailing Address 2625 S Arlington Ridge Rd

City: Arlington
State: VA
Zip Code: 22202-2269

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Political Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.12

Date of Receipt: 11 / 04 / 2011

Transaction ID : 1DA4B6CED234CCA94A9

Amount of Each Receipt this Period: 45.46

C. Full Name (Last, First, Middle Initial)
Irica Solomon

Mailing Address 2625 S Arlington Ridge Rd

City: Arlington
State: VA
Zip Code: 22202-2269

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Political Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.12

Date of Receipt: 11 / 18 / 2011

Transaction ID : 69134CDA33F73D15F8A

Amount of Each Receipt this Period: 45.46

SUBTOTAL of Receipts This Page (optional) ▶ 136.38

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Irica Solomon
Mailing Address: 2625 S Arlington Ridge Rd
City: Arlington
State: VA
Zip Code: 22202-2269
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Political Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.12
Date of Receipt: 12 / 05 / 2011
Transaction ID : 87C4113FBCD572566F7
Amount of Each Receipt this Period: 45.46

B.
Full Name (Last, First, Middle Initial): Irica Solomon
Mailing Address: 2625 S Arlington Ridge Rd
City: Arlington
State: VA
Zip Code: 22202-2269
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Political Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.12
Date of Receipt: 12 / 16 / 2011
Transaction ID : F09C6ED9BE9129BC041
Amount of Each Receipt this Period: 45.46

C.
Full Name (Last, First, Middle Initial): Irica Solomon
Mailing Address: 2625 S Arlington Ridge Rd
City: Arlington
State: VA
Zip Code: 22202-2269
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Political Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.12
Date of Receipt: 12 / 30 / 2011
Transaction ID : 9DF3E59DDE14FB67428
Amount of Each Receipt this Period: 45.46

SUBTOTAL of Receipts This Page (optional) ▶ 136.38

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President - Forest Regio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 07 / 06 / 2011

Transaction ID : DC5A68D2229845B4DA1

Amount of Each Receipt this Period: 30.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President - Forest Regio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 07 / 25 / 2011

Transaction ID : E31D7342C17E66A712D

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Steven C. Speicher

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President - Forest Regio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : EC01C8B1FC596A20FF3

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President - Forest Regio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : F2CF34CE50B16036F00

Amount of Each Receipt this Period: 30.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President - Forest Regio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 343DF6204F9C63B3AEA

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
Steven C. Speicher

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President - Forest Regio

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : AB3B03CF584499BBC84

Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Randy Sprouse
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Applications Development Supervisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 214.32
Date of Receipt: 12 / 02 / 2011
Transaction ID : DD397ED800F8F78C682
Amount of Each Receipt this Period: 35.72

B. Full Name (Last, First, Middle Initial): Bryan Stanwood
Mailing Address: 1460 Wells St
City: Enumclaw | State: WA | Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: Vice President of Underwriting
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : C98E57B500B50A186AD
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Bryan Stanwood
Mailing Address: 1460 Wells St
City: Enumclaw | State: WA | Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: Vice President of Underwriting
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 08 / 01 / 2011
Transaction ID : 7C261EE6125D2E7B20A
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 115.72

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Bryan Stanwood
Mailing Address: 1460 Wells St
City: Enumclaw State: WA Zip Code: 98022-3003
FEC ID number of contributing federal political committee: C
Name of Employer: Mutual of Enumclaw Insurance Company
Occupation: Vice President of Underwriting
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 08 / 30 / 2011
Transaction ID : 8D4C9BCB8A58F7A00D9
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): Edward Stuckrath
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President - Westminister
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : 91F291AE169E0A0D378
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Edward Stuckrath
Mailing Address: 6101 Anacapri Blvd
City: Lansing State: MI Zip Code: 48917-3968
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President - Westminister
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : CBC1A7C0C2D8B88A19A
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Edward Stuckrath

Mailing Address 6101 Anacapri Blvd

City: Lansing
State: MI
Zip Code: 48917-3968

FEC ID number of contributing federal political committee. C

Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President - Westminister

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : CBB733801A3CD15C7E8

Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Paul G. Stueven PFMM

Mailing Address 1285 Highway 15 S

City: Fairmont
State: MN
Zip Code: 56031-4461

FEC ID number of contributing federal political committee. C

Name of Employer: Fairmont Farmers Mutual Insurance Comp
Occupation: Manager/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3975.00

Date of Receipt: 09 / 14 / 2011

Transaction ID : B4B3E51CDB554235274

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Paul G. Stueven PFMM

Mailing Address 1285 Highway 15 S

City: Fairmont
State: MN
Zip Code: 56031-4461

FEC ID number of contributing federal political committee. C

Name of Employer: Fairmont Farmers Mutual Insurance Comp
Occupation: Manager/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3975.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 607CD73DA0D57CB5DD5

Amount of Each Receipt this Period: 975.00

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Amy Sullivan
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 69D2922FB96F6308788
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Amy Sullivan
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt: 12 / 19 / 2011
Transaction ID : EE3E2AC0C4B037610E2
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Tim F. Sullivan RPLU
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 07 / 15 / 2011
Transaction ID : F968DB15275C72C34C4
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 40.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 07 / 29 / 2011

Transaction ID : D7C99E98D44E9D9B563

Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 08 / 12 / 2011

Transaction ID : B86F3A8D04561F10377

Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 08 / 26 / 2011

Transaction ID : B119FDDC581E35DC57D

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Tim F. Sullivan RPLU
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : 21B2D0C4D25177DD939
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Tim F. Sullivan RPLU
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 09 / 23 / 2011
Transaction ID : CE101B0A07AADD4A19C
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Tim F. Sullivan RPLU
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 10 / 07 / 2011
Transaction ID : 0909F91C37D82CAD750
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 10 / 21 / 2011

Transaction ID : 9DFF7861E719B43618C

Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 11 / 04 / 2011

Transaction ID : C9D9D8A0AA4FD8390EF

Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 11 / 18 / 2011

Transaction ID : CA9D77155D21759D037

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 05 / 2011

Transaction ID : 75E002C51E2067590E9

Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 16 / 2011

Transaction ID : 532E72CF5A773D24A1E

Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial)
Tim F. Sullivan RPLU

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: NAMIC Insurance Company, Inc.
Occupation: SVP of Claims, Compliance, Product Dev

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 30 / 2011

Transaction ID : 4D25DCBE96B5E01D4DC

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Robin Suydam
Mailing Address: PO Box 400
City: Branchville | State: NJ | Zip Code: 07826-0400
FEC ID number of contributing federal political committee.: C
Name of Employer: Franklin Mutual Insurance Company
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 09 / 27 / 2011
Transaction ID : 3DCA37EAE0A41C68C2C
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial): Christopher P. Taft CPA
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee.: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 23 / 2011
Transaction ID : 31BD8EAA1BF8FF49C31
Amount of Each Receipt this Period: 625.00

C. Full Name (Last, First, Middle Initial): Christopher P. Taft CPA
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee.: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: President & CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 11 / 21 / 2011
Transaction ID : 4BF2513D0C2D71D9647
Amount of Each Receipt this Period: 625.00

SUBTOTAL of Receipts This Page (optional) ▶ 1550.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Susan K. Taggart PFMM

Mailing Address PO Box 68

City: Remington
State: IN
Zip Code: 47977-0068

FEC ID number of contributing federal political committee.: C

Name of Employer: Remington Farmers Mutual Insurance Com
Occupation: Company Manager

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 09 / 14 / 2011
Transaction ID : 24EFFE77ACCB72FAB87

Amount of Each Receipt this Period: 100.00

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

Mailing Address PO Box 100045

City: Duluth
State: GA
Zip Code: 30096-9345

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 820.00

Date of Receipt: 07 / 06 / 2011
Transaction ID : F364CD077B59BE3A9BD

Amount of Each Receipt this Period: 60.00

C. Full Name (Last, First, Middle Initial)
Jeffrey Tagsold

Mailing Address PO Box 100045

City: Duluth
State: GA
Zip Code: 30096-9345

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 820.00

Date of Receipt: 07 / 25 / 2011
Transaction ID : FFEE81F520AE7DD854B

Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ▶ 220.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Jeffrey Tagsold
Mailing Address: PO Box 100045
City: Duluth State: GA Zip Code: 30096-9345
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 820.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 6A3C2AD1F4B43F3E21E
Amount of Each Receipt this Period: 85.00

B. Full Name (Last, First, Middle Initial): Jeffrey Tagsold
Mailing Address: PO Box 100045
City: Duluth State: GA Zip Code: 30096-9345
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 820.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : 7435665F448AF7C8926
Amount of Each Receipt this Period: 85.00

C. Full Name (Last, First, Middle Initial): Jeffrey Tagsold
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 820.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 4628A8899C307A647A6
Amount of Each Receipt this Period: 85.00

SUBTOTAL of Receipts This Page (optional) ▶ 255.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Jeffrey Tagsold
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 820.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : C1D4CF1BB9F2E4F2B21
Amount of Each Receipt this Period: 85.00

B. Full Name (Last, First, Middle Initial): Dave Talbert
Mailing Address: 500 S US Highway 77A
City: Yoakum State: TX Zip Code: 77995-1399
FEC ID number of contributing federal political committee: C
Name of Employer: Hochheim Prairie Farm Mutual Insurance
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : 76A0AE97B2C8B35D5EC
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Brian Taylor
Mailing Address: PO Box 310
City: Wellsburg State: WV Zip Code: 26070-0310
FEC ID number of contributing federal political committee: C
Name of Employer: Municipal Mutual Insurance Company
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : E01B17C816C4C51D5BD
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1585.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis
State: IN
Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 07 / 15 / 2011
Transaction ID : 4896C99C6FEEF780B12
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis
State: IN
Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 07 / 29 / 2011
Transaction ID : 58815CA1774A60997ED
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis
State: IN
Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 520.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : 4979F8B339B9D5A20BF
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 4CAC0280ECDCC99B164
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : CEDBEAD6B6C268981FC
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 09 / 23 / 2011
Transaction ID : C6C2B32D79874B452FB
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 10 / 07 / 2011
Transaction ID : D3D018D1E0BAF47D2CB
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 10 / 21 / 2011
Transaction ID : 6CA44E026DC5A7F3B88
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 11 / 04 / 2011
Transaction ID : 93340BC8E12E697CCBF
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : 8E61F61F9BC83BA92A5
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : 3E1CA5B5FFFF4825D50
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Paul Tetrault
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : B17D327E92C70B7FE3E
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Paul Tetrault

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: State Affairs Manager/Northeast Region

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 30 / 2011

Transaction ID : BE571A33FB28AC1F409

Amount of Each Receipt this Period: 20.00

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President of Human Resourc

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 07 / 06 / 2011

Transaction ID : 874346A6C9DE11AEF89

Amount of Each Receipt this Period: 45.00

C. Full Name (Last, First, Middle Initial)
Daniel J. Thelen

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President of Human Resourc

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 07 / 25 / 2011

Transaction ID : 1EBA99A2064ECB419B6

Amount of Each Receipt this Period: 45.00

SUBTOTAL of Receipts This Page (optional) ▶ 110.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Daniel J. Thelen
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President of Human Resourc
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 540.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 4E004FDC16E21642B78
Amount of Each Receipt this Period: 45.00

B. Full Name (Last, First, Middle Initial): Daniel J. Thelen
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President of Human Resourc
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 540.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : A470A45C29458860F0D
Amount of Each Receipt this Period: 45.00

C. Full Name (Last, First, Middle Initial): Daniel J. Thelen
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President of Human Resourc
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 540.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 54692BD5A97852EDD48
Amount of Each Receipt this Period: 45.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Daniel J. Thelen

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President of Human Resourc

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 3153DBC26CE421AB58C

Amount of Each Receipt this Period: 45.00

B. Full Name (Last, First, Middle Initial)
Joe Thesing

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 07 / 15 / 2011

Transaction ID : C479E3CF5B28F60E342

Amount of Each Receipt this Period: 20.00

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

Mailing Address PO Box 68700

City: Indianapolis
State: IN
Zip Code: 46268-0700

FEC ID number of contributing federal political committee.: C

Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt: 07 / 29 / 2011

Transaction ID : 2399062A749F5A8CA2F

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 85.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 08 / 12 / 2011
Transaction ID : BD7F59B233DCCB5790A
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 08 / 26 / 2011
Transaction ID : 88B214C3F00A36EA2DA
Amount of Each Receipt this Period: 20.00

C. Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 09 / 12 / 2011
Transaction ID : B4B46FEF7EFD269051B
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 09 / 23 / 2011
Transaction ID : F568E2F2D01355FD166
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 10 / 07 / 2011
Transaction ID : D3A48FB7C39296487A4
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 10 / 21 / 2011
Transaction ID : 3CF5090A57D641D337B
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis
State: IN
Zip Code: 46268-0700
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 11 / 04 / 2011
Transaction ID : 081C5EA9A950A92ED61
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis
State: IN
Zip Code: 46268-0700
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 11 / 18 / 2011
Transaction ID : 8FA45D75F63137EF503
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis
State: IN
Zip Code: 46268-0700
FEC ID number of contributing federal political committee.: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 12 / 05 / 2011
Transaction ID : FA734AC4453C13EBBB3
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : DE4EF09DAD985DF00D0
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): Joe Thesing
Mailing Address: PO Box 68700
City: Indianapolis State: IN Zip Code: 46268-0700
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Assistant Vice President - State Affai
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 680.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : F5A9F074D2E49A16A47
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Bruce D. Thomas PFMM
Mailing Address: 1615 E Elm St
City: Algona State: IA Zip Code: 50511-2022
FEC ID number of contributing federal political committee: C
Name of Employer: Heartland Mutual Insurance Association
Occupation: President/CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 3300.00
Date of Receipt: 07 / 15 / 2011
Transaction ID : F3DEECCAD1D98750D85
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 180.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Bruce D. Thomas PFMM

Mailing Address 1615 E Elm St

City: Algona | State: IA | Zip Code: 50511-2022

FEC ID number of contributing federal political committee. C

Name of Employer: Heartland Mutual Insurance Association
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt: 08 / 12 / 2011

Transaction ID : 697F1BE747397BC1CCE

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Bruce D. Thomas PFMM

Mailing Address 1615 E Elm St

City: Algona | State: IA | Zip Code: 50511-2022

FEC ID number of contributing federal political committee. C

Name of Employer: Heartland Mutual Insurance Association
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt: 09 / 14 / 2011

Transaction ID : 5E798F37453490749D4

Amount of Each Receipt this Period: 1250.00

C. Full Name (Last, First, Middle Initial)
Bruce D. Thomas PFMM

Mailing Address 1615 E Elm St

City: Algona | State: IA | Zip Code: 50511-2022

FEC ID number of contributing federal political committee. C

Name of Employer: Heartland Mutual Insurance Association
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt: 09 / 16 / 2011

Transaction ID : 710F54755240D0EE6A9

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 1450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Bruce D. Thomas PFMM

Mailing Address 1615 E Elm St

City: Algona | State: IA | Zip Code: 50511-2022

FEC ID number of contributing federal political committee. C

Name of Employer: Heartland Mutual Insurance Association
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt: 09 / 21 / 2011
Transaction ID : F9FE3464505B4546158

Amount of Each Receipt this Period: 800.00

B. Full Name (Last, First, Middle Initial)
Bruce D. Thomas PFMM

Mailing Address 1615 E Elm St

City: Algona | State: IA | Zip Code: 50511-2022

FEC ID number of contributing federal political committee. C

Name of Employer: Heartland Mutual Insurance Association
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt: 09 / 29 / 2011
Transaction ID : 6F551536328ED444885

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Bruce D. Thomas PFMM

Mailing Address 1615 E Elm St

City: Algona | State: IA | Zip Code: 50511-2022

FEC ID number of contributing federal political committee. C

Name of Employer: Heartland Mutual Insurance Association
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt: 10 / 07 / 2011
Transaction ID : 0660ADEE97A1C30B80C

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 950.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Bruce D. Thomas PFMM

Mailing Address 1615 E Elm St

City: Algona | State: IA | Zip Code: 50511-2022

FEC ID number of contributing federal political committee. C

Name of Employer: Heartland Mutual Insurance Association
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt: 11 / 14 / 2011

Transaction ID : B75068B9706263C8AEB

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Bruce D. Thomas PFMM

Mailing Address 1615 E Elm St

City: Algona | State: IA | Zip Code: 50511-2022

FEC ID number of contributing federal political committee. C

Name of Employer: Heartland Mutual Insurance Association
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt: 12 / 12 / 2011

Transaction ID : FB579693E2C62E6781B

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Gary W. Thompson CPCU, CIC

Mailing Address 3903 Keystone Ct

City: Columbia | State: MO | Zip Code: 65203-5361

FEC ID number of contributing federal political committee. C

Name of Employer: Columbia Mutual Insurance Company
Occupation: President/CEO

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 07 / 06 / 2011

Transaction ID : E1E3467768470D6E648

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1200.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address 200 N Main St

City: Bel Air | State: MD | Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 05 / 2011

Transaction ID : 6599753B45D77B6D38C

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Brian Topping

Mailing Address 200 N Main St

City: Bel Air | State: MD | Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 03 / 2011

Transaction ID : AD5588F55A7F7AEC164

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Brian Topping

Mailing Address 200 N Main St

City: Bel Air | State: MD | Zip Code: 21014-3554

FEC ID number of contributing federal political committee. C

Name of Employer: Harford Mutual Insurance Company
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 12 / 28 / 2011

Transaction ID : 56CA23302B40A6C2536

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 07 / 08 / 2011

Transaction ID : F5909EAED5AB1088BA1

Amount of Each Receipt this Period: 39.00

B. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 07 / 22 / 2011

Transaction ID : C5A013EC735D4BEC257

Amount of Each Receipt this Period: 39.00

C. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 08 / 03 / 2011

Transaction ID : F13D72BE0B933F42789

Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ▶ 117.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 08 / 19 / 2011

Transaction ID : D023DAAA1BD76592816

Amount of Each Receipt this Period: 39.00

B. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 09 / 02 / 2011

Transaction ID : 7D92D82020DAF2BB594

Amount of Each Receipt this Period: 39.00

C. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 09 / 16 / 2011

Transaction ID : 7797429B302EA5CEF87

Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ▶ 117.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 09 / 30 / 2011

Transaction ID : B5119EF2CC4F3A66855

Amount of Each Receipt this Period: 39.00

B. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 10 / 14 / 2011

Transaction ID : E86EC044222CC8F9127

Amount of Each Receipt this Period: 39.00

C. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 10 / 28 / 2011

Transaction ID : BF508FC797370027280

Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ▶ 117.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 11 / 14 / 2011

Transaction ID : 4C57CD62FBA8BC0E3E7

Amount of Each Receipt this Period: 39.00

B. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 11 / 25 / 2011

Transaction ID : 0F85C55FD01A3F81216

Amount of Each Receipt this Period: 39.00

C. Full Name (Last, First, Middle Initial)
Randall Trinklein

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1014.00

Date of Receipt: 12 / 09 / 2011

Transaction ID : 85CE85448819F89F0DC

Amount of Each Receipt this Period: 39.00

SUBTOTAL of Receipts This Page (optional) ▶ 117.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Randall Trinklein
Mailing Address: 1 Mutual Ave
City: Frankenmuth | State: MI | Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Vice President of Administration
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1014.00
Date of Receipt: 12 / 23 / 2011
Transaction ID : 38A6F5C047879AAD357
Amount of Each Receipt this Period: 39.00

B. Full Name (Last, First, Middle Initial): Andy Trower
Mailing Address: PO Box 219
City: Sublimity | State: OR | Zip Code: 97385-0219
FEC ID number of contributing federal political committee: C
Name of Employer: Sublimity Insurance Company
Occupation: Senior Vice President, Marketing & Und
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 09 / 14 / 2011
Transaction ID : 1F91AA139127D3FE112
Amount of Each Receipt this Period: 400.00

C. Full Name (Last, First, Middle Initial): Ellen S. Truant
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Vice President-Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 464.32
Date of Receipt: 08 / 01 / 2011
Transaction ID : 4FB6BB7C99DC7191969
Amount of Each Receipt this Period: 35.72

SUBTOTAL of Receipts This Page (optional) ▶ 474.72

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Ellen S. Truant
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Vice President-Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 464.32
Date of Receipt: 08 / 30 / 2011
Transaction ID : CAA9E0408221CF7384F
Amount of Each Receipt this Period: 35.72

B. Full Name (Last, First, Middle Initial): Ellen S. Truant
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Vice President-Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 464.32
Date of Receipt: 09 / 29 / 2011
Transaction ID : 19D3DFF9DE6A7E5B2D4
Amount of Each Receipt this Period: 35.72

C. Full Name (Last, First, Middle Initial): Ellen S. Truant
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Vice President-Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 464.32
Date of Receipt: 11 / 07 / 2011
Transaction ID : AF9024001144B03EAF2
Amount of Each Receipt this Period: 35.72

SUBTOTAL of Receipts This Page (optional) ▶ 107.16

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Ellen S. Truant
Mailing Address: 200 N Main St
City: Bel Air | State: MD | Zip Code: 21014-3554
FEC ID number of contributing federal political committee: C
Name of Employer: Harford Mutual Insurance Company
Occupation: Vice President-Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 464.32
Date of Receipt: 12 / 02 / 2011
Transaction ID : 94AE817FBAEB6C8B460
Amount of Each Receipt this Period: 35.72

B. Full Name (Last, First, Middle Initial): Gregg R. U'Ren
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 285.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 2D113A68FFD7D12D39F
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Gregg R. U'Ren
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 285.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : DFFC99B9FFF7FEF3AA4
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 85.72

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Gregg R. U'Ren
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 972FB2BD210500A78CB
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial): Gregg R. U'Ren
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 026B186AB2BF11CEC29
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial): Michael Ulmer
Mailing Address: 9404 Gladstone Dr
City: Pittsboro State: IN Zip Code: 46167-9042
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: 10 / 21 / 2011
Transaction ID : 618D10CF7B2CC12FC70
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Michael Ulmer
Mailing Address: 9404 Gladstone Dr
City: Pittsboro State: IN Zip Code: 46167-9042
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: 11/04/2011
Transaction ID : 3CD8473FEBC2225030E
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Michael Ulmer
Mailing Address: 9404 Gladstone Dr
City: Pittsboro State: IN Zip Code: 46167-9042
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: 11/18/2011
Transaction ID : 3AF661D56DC24EAD11D
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Michael Ulmer
Mailing Address: 9404 Gladstone Dr
City: Pittsboro State: IN Zip Code: 46167-9042
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 260.00
Date of Receipt: 12/05/2011
Transaction ID : FEFD6DEDF62AE71A06A
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Michael Ulmer
Mailing Address: 9404 Gladstone Dr
City: Pittsboro State: IN Zip Code: 46167-9042
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 12 / 16 / 2011
Transaction ID : 9A1E7CB97D5FE2316CC
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Michael Ulmer
Mailing Address: 9404 Gladstone Dr
City: Pittsboro State: IN Zip Code: 46167-9042
FEC ID number of contributing federal political committee: C
Name of Employer: National Association of Mutual Insuran
Occupation: Vice President - Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt: 12 / 30 / 2011
Transaction ID : AFD42E80F7E4A488F3F
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Aaron J. Valentine
Mailing Address: 1 Preferred Way
City: New Berlin State: NY Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Senior Vice President, Treasurer & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 780.00
Date of Receipt: 07 / 26 / 2011
Transaction ID : 0D8F2B0C82293F1D4B9
Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ▶ 80.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Aaron J. Valentine
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Senior Vice President, Treasurer & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 780.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 88A032BAC360750BA95
Amount of Each Receipt this Period: 60.00

B. Full Name (Last, First, Middle Initial): Aaron J. Valentine
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Senior Vice President, Treasurer & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 780.00
Date of Receipt: 10 / 11 / 2011
Transaction ID : 0B44710F9A4A8209662
Amount of Each Receipt this Period: 90.00

C. Full Name (Last, First, Middle Initial): Aaron J. Valentine
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Senior Vice President, Treasurer & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 780.00
Date of Receipt: 11 / 02 / 2011
Transaction ID : B03C56EA0E6A014F59C
Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ▶ 210.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Aaron J. Valentine
Mailing Address: 1 Preferred Way
City: New Berlin | State: NY | Zip Code: 13411-1800
FEC ID number of contributing federal political committee: C
Name of Employer: Preferred Mutual Insurance Company
Occupation: Senior Vice President, Treasurer & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 780.00
Date of Receipt: 11 / 30 / 2011
Transaction ID : 83B5097F8BCC232BC6E
Amount of Each Receipt this Period: 60.00

B. Full Name (Last, First, Middle Initial): Robert J. Wagner
Mailing Address: PO Box 618
City: Columbia | State: MO | Zip Code: 65205-0618
FEC ID number of contributing federal political committee: C
Name of Employer: Columbia Mutual Insurance Company
Occupation: Chairman
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00
Date of Receipt: 07 / 12 / 2011
Transaction ID : E1D5A488286348540FC
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Jerry Wallace
Mailing Address: PO Box 30660
City: Lansing | State: MI | Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 07 / 27 / 2011
Transaction ID : 4BD138128F07FDA372F
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1310.00

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): James J. Walsh Jr.
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 600.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : DF9923801C385BF4ADB
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial): James J. Walsh Jr.
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 600.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : B3FCC8A18806C386312
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial): James J. Walsh Jr.
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Claims
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 600.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : BF95D090B57A9645B11
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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
James J. Walsh Jr.

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 9944BCAC869C3BA422E

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
James J. Walsh Jr.

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 008196090565DA50061

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
James J. Walsh Jr.

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Vice President-Claims

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 7313AB8B141D8B9D758

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)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Joseph Walsh CPCU

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Manager Farm Lines Underwriter

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 26 / 2011

Transaction ID : 2A7926F07004362C212

Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Joseph Walsh CPCU

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Manager Farm Lines Underwriter

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 08 / 2011

Transaction ID : 2136D40A7326D7775CE

Amount of Each Receipt this Period: 10.00

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

Mailing Address PO Box 111

City: Bucyrus
State: OH
Zip Code: 44820-0111

FEC ID number of contributing federal political committee.: C

Name of Employer: Ohio Mutual Insurance Company
Occupation: Manager Farm Lines Underwriter

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 21 / 2011

Transaction ID : C08EE4D4B130F70A4D1

Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 30.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Joseph Walsh CPCU
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Manager Farm Lines Underwriter
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11/30/2011
Transaction ID : 9B71692218766715ADA
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial): Joseph Walsh CPCU
Mailing Address: PO Box 111
City: Bucyrus State: OH Zip Code: 44820-0111
FEC ID number of contributing federal political committee: C
Name of Employer: Ohio Mutual Insurance Company
Occupation: Manager Farm Lines Underwriter
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 12/19/2011
Transaction ID : 15812C8B99F08E79474
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial): Merle Walter
Mailing Address: PO Box 9
City: De Smet State: SD Zip Code: 57231-0009
FEC ID number of contributing federal political committee: C
Name of Employer: De Smet Farm Mutual Insurance Company
Occupation: Claims Supervisor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 09/27/2011
Transaction ID : 638E875D359B4A70CF3
Amount of Each Receipt this Period: 800.00

SUBTOTAL of Receipts This Page (optional) ▶ 820.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Ian R. Ward
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Investments and
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt: 07 / 06 / 2011
Transaction ID : 83A53E19F07B9B3B0C2
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): Ian R. Ward
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Investments and
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt: 07 / 25 / 2011
Transaction ID : 77158805B1B8B945931
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Ian R. Ward
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Investments and
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt: 09 / 01 / 2011
Transaction ID : 0B9498360438E903851
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Ian R. Ward
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Investments and
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt: 09 / 28 / 2011
Transaction ID : 48FDF54B023A5ECF1B4
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial): Ian R. Ward
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Investments and
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt: 10 / 24 / 2011
Transaction ID : 373C5658F361BE5FE6A
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): Ian R. Ward
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Senior Vice President, Investments and
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 2304D617F2600E3FE63
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Linda S. Wares PFMM

Mailing Address 929 W Locust St

City: Belvidere | State: IL | Zip Code: 61008-4216

FEC ID number of contributing federal political committee. C

Name of Employer: Belvidere Mutual Insurance Company
Occupation: Office Manager/Secretary

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 07 / 19 / 2011

Transaction ID : 39938403623245FB882

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Linda S. Wares PFMM

Mailing Address 929 W Locust St

City: Belvidere | State: IL | Zip Code: 61008-4216

FEC ID number of contributing federal political committee. C

Name of Employer: Belvidere Mutual Insurance Company
Occupation: Office Manager/Secretary

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 09 / 29 / 2011

Transaction ID : B220287CD1E6CAA4C37

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Rufus Watson

Mailing Address 1044 Saint Johns Dr

City: Maryville | State: TN | Zip Code: 37801-9609

FEC ID number of contributing federal political committee. C

Name of Employer: Farmers Mutual of Tennessee
Occupation: Director

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 21 / 2011

Transaction ID : 01FFFB9563BF8890339

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Actuary

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
1008.00

Date of Receipt
M M 07 / D D 06 / Y Y Y Y 2011

Transaction ID : 8E5C35BD69F8BEDEB7A

Amount of Each Receipt this Period
84.00

B. Full Name (Last, First, Middle Initial)
Mark Wenger

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Actuary

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
1008.00

Date of Receipt
M M 07 / D D 25 / Y Y Y Y 2011

Transaction ID : B4FFFB2FAB9997E7841

Amount of Each Receipt this Period
84.00

C. Full Name (Last, First, Middle Initial)
Mark Wenger

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Actuary

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
1008.00

Date of Receipt
M M 09 / D D 01 / Y Y Y Y 2011

Transaction ID : 3C673ACF83CEF227EB6

Amount of Each Receipt this Period
84.00

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

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

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Actuary

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 2B003A9748D478F4C3D

Amount of Each Receipt this Period: 84.00

B. Full Name (Last, First, Middle Initial)
Mark Wenger

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Actuary

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : AD47D9CA0BE2C03E371

Amount of Each Receipt this Period: 84.00

C. Full Name (Last, First, Middle Initial)
Mark Wenger

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Actuary

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 6F1BDBB3F77488029F6

Amount of Each Receipt this Period: 84.00

SUBTOTAL of Receipts This Page (optional) ▶ 252.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Jamie Whisnant
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 350.00
Date of Receipt: 08 / 05 / 2011
Transaction ID : 35E34AE7AB2B7A3EB77
Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial): Wayne F. White CPA, PFMM
Mailing Address: 78 Hill Farm Rd
City: Conway State: AR Zip Code: 72032-9041
FEC ID number of contributing federal political committee: C
Name of Employer: Farmers Union Mutual Insurance Company
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 19 / 2011
Transaction ID : 5FA3FD55082190637F7
Amount of Each Receipt this Period: 625.00

C. Full Name (Last, First, Middle Initial): Wayne F. White CPA, PFMM
Mailing Address: 78 Hill Farm Rd
City: Conway State: AR Zip Code: 72032-9041
FEC ID number of contributing federal political committee: C
Name of Employer: Farmers Union Mutual Insurance Company
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 11 / 21 / 2011
Transaction ID : 722A092265A4F3EDA6C
Amount of Each Receipt this Period: 625.00

SUBTOTAL of Receipts This Page (optional) ▶ 1600.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Scott S. Wilder
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Regional Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 07 / 27 / 2011
Transaction ID : 92E579E0391DFE4B87B
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial): James W. Wilds CPCU, ARM,
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1090.00
Date of Receipt: 07 / 08 / 2011
Transaction ID : CF779393AE8FFEED073
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial): James W. Wilds CPCU, ARM,
Mailing Address: 1 Mutual Ave
City: Frankenmuth State: MI Zip Code: 48787-0001
FEC ID number of contributing federal political committee: C
Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 1090.00
Date of Receipt: 07 / 22 / 2011
Transaction ID : 03C33F685A8AF4EFDC7
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 380.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 08 / 03 / 2011
Transaction ID : 80441AF191D46301FA7

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 08 / 19 / 2011
Transaction ID : FAC5D118376461D50EB

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 09 / 02 / 2011
Transaction ID : 09C1F2259C8611AD61D

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 09 / 16 / 2011

Transaction ID : D1E5E38F1D350C97A90

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : F8A93AF3A76106C5859

Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 09 / 30 / 2011

Transaction ID : DC3C028D21AE012471F

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 130.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 10 / 14 / 2011

Transaction ID : 3407F58D5BE02AE0458

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 10 / 28 / 2011

Transaction ID : 3FD62076AB2C3AC2F0A

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 11 / 14 / 2011

Transaction ID : D5B5C7AC0F545E3E705

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 11 / 25 / 2011

Transaction ID : F1E606F86B0B429F51C

Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 12 / 09 / 2011

Transaction ID : 167B26E5CB57FCF8E75

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
James W. Wilds CPCU, ARM,

Mailing Address 1 Mutual Ave

City: Frankenmuth
State: MI
Zip Code: 48787-0001

FEC ID number of contributing federal political committee.: C

Name of Employer: Frankenmuth Mutual Insurance Company
Occupation: Senior Vice President

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 1090.00

Date of Receipt: 12 / 23 / 2011

Transaction ID : 056F6513644046F77B7

Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 120.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Denise G. Williams

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager-East Michigan Underwriting

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 09 / 28 / 2011

Transaction ID : 297AE36BE92F07F7C2D

Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Denise G. Williams

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager-East Michigan Underwriting

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 49495BE797681ADDDA8

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Denise G. Williams

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Manager-East Michigan Underwriting

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 9391AE6D588202DC959

Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Jon D. Williams
Mailing Address: PO Box 30660
City: Lansing State: MI Zip Code: 48909-8160
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 510.00
Date of Receipt: 07 / 27 / 2011
Transaction ID : B2A101EB7A490E1585A
Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial): William Woodbury
Mailing Address: 401 Shoreline Dr
City: Dewitt State: MI Zip Code: 48820-7714
FEC ID number of contributing federal political committee: C
Name of Employer: Auto-Owners Insurance Company
Occupation: SVP, Assoc. Secretary & Assoc. General
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 215.00
Date of Receipt: 12 / 01 / 2011
Transaction ID : 7AFB9724E206E5782EE
Amount of Each Receipt this Period: 42.00

C. Full Name (Last, First, Middle Initial): Sharon V. Woodward
Mailing Address: 411 Walnut St # 3611
City: Green Cove Springs State: FL Zip Code: 32043-3443
FEC ID number of contributing federal political committee: C
Name of Employer: Baltimore Equitable Insurance
Occupation: President/CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 300.00
Date of Receipt: 10 / 26 / 2011
Transaction ID : 5BD72498D167BA36426
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 492.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Jeffrey S. Wrobel SR, CPCU,

Mailing Address 9603 Janvery Court

City: Richmond
State: VA
Zip Code: 23233-3745

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: EVP, IT & Underwriting

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt
M M 09 / D D 06 / Y Y Y Y 2011

Transaction ID : B3D389BD2D12C8360E7

Amount of Each Receipt this Period
24.00

B. Full Name (Last, First, Middle Initial)
Jeffrey S. Wrobel SR, CPCU,

Mailing Address 9603 Janvery Court

City: Richmond
State: VA
Zip Code: 23233-3745

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: EVP, IT & Underwriting

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt
M M 10 / D D 03 / Y Y Y Y 2011

Transaction ID : 6209389FFBBD0C3CAEF

Amount of Each Receipt this Period
24.00

C. Full Name (Last, First, Middle Initial)
Jeffrey S. Wrobel SR, CPCU,

Mailing Address 9603 Janvery Court

City: Richmond
State: VA
Zip Code: 23233-3745

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: EVP, IT & Underwriting

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
287.00

Date of Receipt
M M 11 / D D 03 / Y Y Y Y 2011

Transaction ID : 5CE220D3535A2EB274A

Amount of Each Receipt this Period
24.00

SUBTOTAL of Receipts This Page (optional) ▶ 72.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Jeffrey S. Wrobel SR, CPCU,

Mailing Address 9603 Janvery Court

City: Richmond
State: VA
Zip Code: 23233-3745

FEC ID number of contributing federal political committee.: C

Name of Employer: Mutual Assurance Society of Virginia
Occupation: EVP, IT & Underwriting

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 287.00

Date of Receipt: 12 / 02 / 2011
Transaction ID : F0C21DD1B375858B2AF

Amount of Each Receipt this Period: 24.00

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

Mailing Address 200 N Main St

City: Bel Air
State: MD
Zip Code: 21014-3554

FEC ID number of contributing federal political committee.: C

Name of Employer: DEVCO Mutual Association
Occupation: Executive Vice President/General Manag

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 214.32

Date of Receipt: 12 / 02 / 2011
Transaction ID : 87B988FD45DDDC69603

Amount of Each Receipt this Period: 35.72

C. Full Name (Last, First, Middle Initial)
Steve Zabriskie

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Sales

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt: 09 / 28 / 2011
Transaction ID : DAC36E2A6F32CBDD4EF

Amount of Each Receipt this Period: 22.00

SUBTOTAL of Receipts This Page (optional) ▶ 81.72

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Steve Zabriskie

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Sales

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt: 10 / 24 / 2011

Transaction ID : 44027165B91C43BCE9D

Amount of Each Receipt this Period: 22.00

B. Full Name (Last, First, Middle Initial)
Steve Zabriskie

Mailing Address PO Box 30660

City: Lansing
State: MI
Zip Code: 48909-8160

FEC ID number of contributing federal political committee.: C

Name of Employer: Auto-Owners Insurance Company
Occupation: Assistant Vice President-Sales

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt: 12 / 01 / 2011

Transaction ID : 3BF69821CB6934BE44E

Amount of Each Receipt this Period: 22.00

C. Full Name (Last, First, Middle Initial)
Jerry G. Zenke PFMM

Mailing Address 42846 County Road 12

City: Dakota
State: MN
Zip Code: 55925-4094

FEC ID number of contributing federal political committee.: C

Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: General Manager/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2870.00

Date of Receipt: 07 / 15 / 2011

Transaction ID : C29191C36A3FA517705

Amount of Each Receipt this Period: 210.00

SUBTOTAL of Receipts This Page (optional) ▶ 254.00

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Jerry G. Zenke PFMM

Mailing Address 42846 County Road 12

City: Dakota
State: MN
Zip Code: 55925-4094

FEC ID number of contributing federal political committee.: C

Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: General Manager/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2870.00

Date of Receipt: 08 / 12 / 2011

Transaction ID : 82F87C24A17E83DE30F

Amount of Each Receipt this Period: 210.00

B. Full Name (Last, First, Middle Initial)
Jerry G. Zenke PFMM

Mailing Address 42846 County Road 12

City: Dakota
State: MN
Zip Code: 55925-4094

FEC ID number of contributing federal political committee.: C

Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: General Manager/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2870.00

Date of Receipt: 09 / 16 / 2011

Transaction ID : 6EB8CE24DCB60CB2245

Amount of Each Receipt this Period: 210.00

C. Full Name (Last, First, Middle Initial)
Jerry G. Zenke PFMM

Mailing Address 42846 County Road 12

City: Dakota
State: MN
Zip Code: 55925-4094

FEC ID number of contributing federal political committee.: C

Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: General Manager/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2870.00

Date of Receipt: 09 / 21 / 2011

Transaction ID : E8FD5E6D4DA818CC6AC

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 670.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Jerry G. Zenke PFMM

Mailing Address 42846 County Road 12

City: Dakota
State: MN
Zip Code: 55925-4094

FEC ID number of contributing federal political committee.: C

Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: General Manager/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2870.00

Date of Receipt: 09 / 27 / 2011

Transaction ID : 557048319B9B80DF86F

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Jerry G. Zenke PFMM

Mailing Address 42846 County Road 12

City: Dakota
State: MN
Zip Code: 55925-4094

FEC ID number of contributing federal political committee.: C

Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: General Manager/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2870.00

Date of Receipt: 10 / 07 / 2011

Transaction ID : 3A3E5714E18B5DE00F2

Amount of Each Receipt this Period: 210.00

C. Full Name (Last, First, Middle Initial)
Jerry G. Zenke PFMM

Mailing Address 42846 County Road 12

City: Dakota
State: MN
Zip Code: 55925-4094

FEC ID number of contributing federal political committee.: C

Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: General Manager/Treasurer

Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 2870.00

Date of Receipt: 11 / 14 / 2011

Transaction ID : 7AC6684DB5FC38A4923

Amount of Each Receipt this Period: 210.00

SUBTOTAL of Receipts This Page (optional) ▶ 520.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Jerry G. Zenke PFMM
Mailing Address: 42846 County Road 12
City: Dakota
State: MN
Zip Code: 55925-4094
FEC ID number of contributing federal political committee: C
Name of Employer: Mound Prairie Mutual Insurance Company
Occupation: General Manager/Treasurer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2870.00
Date of Receipt: 12 / 12 / 2011
Transaction ID : 9426502659D3235105A
Amount of Each Receipt this Period: 210.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City:
State:
Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City:
State:
Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 210.00

TOTAL This Period (last page this line number only) ▶ 129915.16

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Cc Services Inc Country Political Action Committee
Mailing Address: 1701 N Towanda Avenue, PO Box 2020
City: Bloomington State: IL Zip Code: 61702
FEC ID number of contributing federal political committee: C C00390971
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: M M 11 / D D 30 / Y Y Y Y 2011
Transaction ID : 33471B9C269A937D6DA
Amount of Each Receipt this Period: 5000.00

B.
Full Name (Last, First, Middle Initial): Employers Mutual Casualty Company Committee for Responsible Federal Government
Mailing Address: 717 Mulberry Street
City: Des Moines State: IA Zip Code: 50309
FEC ID number of contributing federal political committee: C C00163873
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: M M 11 / D D 21 / Y Y Y Y 2011
Transaction ID : 118F735C54A47B68235
Amount of Each Receipt this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): Grange Mutual Casualty Company Pac
Mailing Address: 671 South High Street, PO Box1218
City: Columbus State: OH Zip Code: 43216
FEC ID number of contributing federal political committee: C C00302695
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 3000.00
Date of Receipt: M M 12 / D D 19 / Y Y Y Y 2011
Transaction ID : 63FB5B36483B61239F4
Amount of Each Receipt this Period: 3000.00

SUBTOTAL of Receipts This Page (optional) ▶ 13000.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Nationwide Mutual Insurance Company Political Action Committee

Mailing Address One Nationwide Plaza
1-32-301

City: Columbus State: OH Zip Code: 43215

FEC ID number of contributing federal political committee. C C00076174

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: M M 07 / D D 26 / Y Y Y Y 2011

Transaction ID : F16D2F8FC379A0E9CB4

Amount of Each Receipt this Period: 1250.00

B. Full Name (Last, First, Middle Initial)
Secura Insurance a Mutual Company Pac (SECURA INS PAC)

Mailing Address 2401 S. Memorial Drive

City: Appleton State: WI Zip Code: 54915

FEC ID number of contributing federal political committee. C C00343384

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: M M 08 / D D 22 / Y Y Y Y 2011

Transaction ID : C86B790621AB985D00D

Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Shelter Mutual Insurance Company Federal Pac

Mailing Address 1817 West Broadway

City: Columbia State: MO Zip Code: 65218

FEC ID number of contributing federal political committee. C C00140384

Name of Employer

Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: M M 12 / D D 08 / Y Y Y Y 2011

Transaction ID : 72A465AF53540F848B2

Amount of Each Receipt this Period: 4000.00

SUBTOTAL of Receipts This Page (optional) ▶ 10250.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial)
State Auto Employees Fed Pac Committee of State Automobile Mutual Insurance Company

Mailing Address 518 East Broad Street

City: Columbus
State: OH
Zip Code: 43215

FEC ID number of contributing federal political committee. C C00430884

Name of Employer

Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 09 / 01 / 2011

Transaction ID : 146FCEB4775D91AAF54

Amount of Each Receipt this Period: 2500.00

B.
Full Name (Last, First, Middle Initial)
United Services Automobile Association Employee Pac - Usaa Employee Pac

Mailing Address 9800 Fredericksburg Road

City: San Antonio
State: TX
Zip Code: 78288

FEC ID number of contributing federal political committee. C C00164145

Name of Employer

Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 19 / 2011

Transaction ID : 04D626445C548150F0D

Amount of Each Receipt this Period: 5000.00

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer

Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶ 7500.00

TOTAL This Period (last page this line number only) ▶ 30750.00

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
NAMIC Administrative Fund

Mailing Address 3601 Vincennes Road

City: Indianapolis | State: IN | Zip Code: 46268

FEC ID number of contributing federal political committee. C

Name of Employer | Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1455.87

Date of Receipt: 07 / 29 / 2011

Transaction ID : 1585A54A44E024F2CED

Amount of Each Receipt this Period: 104.69

Reimb. of bank fees

B. Full Name (Last, First, Middle Initial)
NAMIC Administrative Fund

Mailing Address 3601 Vincennes Road

City: Indianapolis | State: IN | Zip Code: 46268

FEC ID number of contributing federal political committee. C

Name of Employer | Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1455.87

Date of Receipt: 08 / 22 / 2011

Transaction ID : 66F0DC16DAD1014B3D4

Amount of Each Receipt this Period: 104.69

Reimb. of bank fees

C. Full Name (Last, First, Middle Initial)
NAMIC Administrative Fund

Mailing Address 3601 Vincennes Road

City: Indianapolis | State: IN | Zip Code: 46268

FEC ID number of contributing federal political committee. C

Name of Employer | Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1455.87

Date of Receipt: 09 / 12 / 2011

Transaction ID : A9D9239AC26418DCAE6

Amount of Each Receipt this Period: 38.24

Reimb. of bank fees

SUBTOTAL of Receipts This Page (optional) ▶ 247.62

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
NAMIC Administrative Fund

Mailing Address 3601 Vincennes Road

City: Indianapolis | State: IN | Zip Code: 46268

FEC ID number of contributing federal political committee. C

Name of Employer | Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1455.87

Date of Receipt: 09 / 16 / 2011

Transaction ID : 73B118EBB62128F3B28

Amount of Each Receipt this Period: 232.69

Remb. of bank fees

B. Full Name (Last, First, Middle Initial)
NAMIC Administrative Fund

Mailing Address 3601 Vincennes Road

City: Indianapolis | State: IN | Zip Code: 46268

FEC ID number of contributing federal political committee. C

Name of Employer | Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1455.87

Date of Receipt: 10 / 21 / 2011

Transaction ID : CC51B1F34FB7C0FE0C1

Amount of Each Receipt this Period: 135.93

Reimb. of bank fees

C. Full Name (Last, First, Middle Initial)
NAMIC Administrative Fund

Mailing Address 3601 Vincennes Road

City: Indianapolis | State: IN | Zip Code: 46268

FEC ID number of contributing federal political committee. C

Name of Employer | Occupation

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 1455.87

Date of Receipt: 11 / 18 / 2011

Transaction ID : 22BF172F0EDE239F791

Amount of Each Receipt this Period: 781.55

Reimb. of bank fees

SUBTOTAL of Receipts This Page (optional) ▶ 1150.17

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

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): NAMIC Administrative Fund
Mailing Address: 3601 Vincennes Road
City: Indianapolis State: IN Zip Code: 46268
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 1455.87
Date of Receipt: 12 / 16 / 2011
Transaction ID : 1A9FFD6EDBDDF076FFA
Amount of Each Receipt this Period: 58.08
Reimb. of bank fees

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 58.08

TOTAL This Period (last page this line number only) ▶ 1455.87

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: 8751 N Michigan Road
City: Indianapolis State: IN Zip Code: 46268
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 07 / 31 / 2011
Transaction ID : 5B0EF7A8576D28C83A4
Amount of Each Disbursement this Period: 142.93

B. Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: 8751 N Michigan Road
City: Indianapolis State: IN Zip Code: 46268
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 08 / 31 / 2011
Transaction ID : 98EB7D1336447018D7E
Amount of Each Disbursement this Period: 232.69

C. Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: 8751 N Michigan Road
City: Indianapolis State: IN Zip Code: 46268
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 30 / 2011
Transaction ID : 183426D3ED6DB3F141E
Amount of Each Disbursement this Period: 135.93

SUBTOTAL of Disbursements This Page (optional) ▶ 511.55

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: 8751 N Michigan Road
City: Indianapolis State: IN Zip Code: 46268
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 31 / 2011
Transaction ID : 6951EC4A436C25A54FE
Amount of Each Disbursement this Period: 781.55

B. Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: 8751 N Michigan Road
City: Indianapolis State: IN Zip Code: 46268
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 30 / 2011
Transaction ID : E364D91C3D3EDAA5186
Amount of Each Disbursement this Period: 58.08

C. Full Name (Last, First, Middle Initial): Chase Bank
Mailing Address: 8751 N Michigan Road
City: Indianapolis State: IN Zip Code: 46268
Purpose of Disbursement: Bank fees
Candidate Name:
Category/Type: 001
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 31 / 2011
Transaction ID : D90243B64670123C2BC
Amount of Each Disbursement this Period: 112.42

SUBTOTAL of Disbursements This Page (optional) ▶ 952.05

TOTAL This Period (last page this line number only) ▶ 1463.60

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Andre Carson for Congress
Mailing Address: PO Box 1863
City: Indianapolis State: IN Zip Code: 46206
Purpose of Disbursement: 2012 Primary
Candidate Name: Andre D. Carson
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IN District: 07
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 16 / 2011
Transaction ID : F29A77F1553E43B2BEC
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Bill Flores for Congress
Mailing Address: PO Box 6207
City: Bryan State: TX Zip Code: 77805
Purpose of Disbursement: 2012 Primary
Candidate Name: William H. Flores
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 17
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 07 / 2011
Transaction ID : E8825901C3932ED731D
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Bluegrass Committee
Mailing Address: 220 1/2 E St., NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: 2011 Contribution
Candidate Name: Bluegrass Committee
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) Contribution
Date of Disbursement: 11 / 22 / 2011
Transaction ID : DA8940F5A29BE60820C
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Bob Corker for Senate 2012
Mailing Address: 1910 21st Avenue South
City: Nashville State: TN Zip Code: 37212
Purpose of Disbursement: 2012 General
Category/Type: 011
Candidate Name: Bob Corker
Office Sought: ☐ House ☒ Senate ☐ President
State: TN District:
Disbursement For: 2012 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 07 / 19 / 2011
Transaction ID : 1C6D9DC399396BB5B72
Amount of Each Disbursement this Period: 500.00

B. Full Name (Last, First, Middle Initial): Bob Corker for Senate 2012
Mailing Address: 1910 21st Avenue South
City: Nashville State: TN Zip Code: 37212
Purpose of Disbursement: 2012 Primary
Category/Type: 011
Candidate Name: Bob Corker
Office Sought: ☐ House ☒ Senate ☐ President
State: TN District:
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 19 / 2011
Transaction ID : 659FD19511D9AD6C5D2
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Cathy McMorris Rodgers for Congress
Mailing Address: Box 137
City: Spokane State: WA Zip Code: 99210
Purpose of Disbursement: 2012 Primary
Category/Type: 011
Candidate Name: Cathy McMorris Rodgers
Office Sought: ☒ House ☐ Senate ☐ President
State: WA District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 07 / 2011
Transaction ID : FB7BD9B9760AE2509DF
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Chris Gibson for Congress
Mailing Address: PO Box 234
City: Saratoga Springs State: NY Zip Code: 12866
Purpose of Disbursement: 2012 Primary
Candidate Name: Christopher Patrick Gibson
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 20
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 26 / 2011
Transaction ID : 4838E717BD4DF788F1E
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Citizens for Prosperity in America Today Pac
Mailing Address: 228 S Washington St Ste 115
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: 2011 Contribution
Candidate Name: Citizens for Prosperity in America Today Pac
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) Contribution
Date of Disbursement: 12 / 06 / 2011
Transaction ID : 0F72D98A4285009A17C
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Cleaver for Congress
Mailing Address: 4801 Main Street, Stuite 1000
City: Kansas City State: MO Zip Code: 64112
Purpose of Disbursement: 2012 Primary
Candidate Name: Emanuel Cleaver II
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MO District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 21 / 2011
Transaction ID : 233A4232C9F3DD8BF6D
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Dave Camp for Congress
Mailing Address: 5915 Eastman Avenue, Suite 100
City: Midland State: MI Zip Code: 48640
Purpose of Disbursement: 2012 Primary
Candidate Name: Dave Camp
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 04
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 22 / 2011
Transaction ID : E55581099F811130AA4
Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial): David Vitter for Us Senate
Mailing Address: PO Box 8175
City: Metairie State: LA Zip Code: 70011
Purpose of Disbursement: 2016 Primary
Candidate Name: David Vitter
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: LA District:
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 08 / 2011
Transaction ID : 6253F0B8C8F4511E63C
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Diane Black for Congress
Mailing Address: PO Box 1437
City: Gallatin State: TN Zip Code: 37066
Purpose of Disbursement: 2012 Primary
Candidate Name: Diane Black
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 06
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 19 / 2011
Transaction ID : 4DABEF709C813132708
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Dold for Congress
Mailing Address: PO Box 8145
City: Northfield State: IL Zip Code: 60093
Purpose of Disbursement: 2012 Primary
Candidate Name: Robert James Dold Jr.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 10
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 08 / 2011
Transaction ID : 1FE8E1914FCDCC0DA99
Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial): Friends of Congressman Tim Holden
Mailing Address: 424 South Second Street, PO Box 37
City: Saint Clair State: PA Zip Code: 17970
Purpose of Disbursement: 2012 Primary
Candidate Name: Timothy Holden
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 17
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 08 / 2011
Transaction ID : 525DB566B7259A4CC00
Amount of Each Disbursement this Period: 500.00

C. Full Name (Last, First, Middle Initial): Friends of Congressman Tim Holden
Mailing Address: 424 South Second Street, PO Box 37
City: Saint Clair State: PA Zip Code: 17970
Purpose of Disbursement: 2012 Primary
Candidate Name: Timothy Holden
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 17
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 06 / 2011
Transaction ID : 2F1F7EC742C5DA07CA1
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 3500.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Friends of Dennis Ross
Mailing Address: PO Box 7310
City: Lakeland State: FL Zip Code: 33807
Purpose of Disbursement: 2012 Primary
Candidate Name: Dennis A. Ross
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 12
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 25 / 2011
Transaction ID : D5CFED169200D22A332
Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial): Friends of Dick Lugar Inc
Mailing Address: PO Box 55952
City: Indianapolis State: IN Zip Code: 46205
Purpose of Disbursement: 2012 Primary
Candidate Name: Richard Green Lugar
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: IN District:
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 16 / 2011
Transaction ID : 3FB70CC7A76D5031821
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Friends of Erik Paulsen
Mailing Address: PO Box 44369
250 Prairie Center Drive
City: Eden Prairie State: MN Zip Code: 55344
Purpose of Disbursement: 2012 Primary
Candidate Name: Erik Paulsen
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MN District: 03
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 22 / 2011
Transaction ID : E1C59EE536D9F4FE983
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Friends of Jeb Hensarling
Mailing Address: PO Box 820504
City: Dallas State: TX Zip Code: 75382
Purpose of Disbursement: 2012 Primary
Category/Type: 011
Candidate Name: Thomas Jeb Hensarling
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 11 / 2011
Transaction ID : 9A6F6B0BB405DD3D950
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Friends of Sherrod Brown
Mailing Address: PO Box 76187
City: Washington State: DC Zip Code: 20013
Purpose of Disbursement: 2012 Primary
Category/Type: 011
Candidate Name: Sherrod Brown
Office Sought: ☐ House ☒ Senate ☐ President
State: OH District:
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 08 / 2011
Transaction ID : D250A3B6FDF33BFCBF8
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Friends of Sherrod Brown
Mailing Address: PO Box 76187
City: Washington State: DC Zip Code: 20013
Purpose of Disbursement: 2012 Primary
Category/Type: 011
Candidate Name: Sherrod Brown
Office Sought: ☐ House ☒ Senate ☐ President
State: OH District:
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 25 / 2011
Transaction ID : E144DCD5FB40B0BED23
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b 22 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Gardner for Congress 2012
Mailing Address: PO Box 2408
City: Loveland State: CO Zip Code: 80539
Purpose of Disbursement: 2012 Primary
Candidate Name: Cory Gardner
Office Sought: [X] House [ ] Senate [ ] President
State: CO District: 04
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Category/Type: 011
Date of Disbursement: 12 / 16 / 2011
Transaction ID : 28C633808FFB14933C4
Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial): Heartland Values Pac
Mailing Address: PO Box 505
City: Sioux Falls State: SD Zip Code: 57101
Purpose of Disbursement: 2011 Contribution
Candidate Name: Heartland Values Pac
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2011 [ ] Primary [ ] General [X] Other (specify) Contribution
Category/Type: 011
Date of Disbursement: 07 / 19 / 2011
Transaction ID : AAE521F1186062F55F5
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Hoosiers for Rokita, Inc.
Mailing Address: 7643 East U.S. 36
City: Avon State: IN Zip Code: 46123
Purpose of Disbursement: 2012 Primary
Candidate Name: Theodore Edward Rokita
Office Sought: [X] House [ ] Senate [ ] President
State: IN District: 04
Disbursement For: 2012 [X] Primary [ ] General [ ] Other (specify)
Category/Type: 011
Date of Disbursement: 12 / 06 / 2011
Transaction ID : 4928447C8B1DF6D158E
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Hoyer for Congress
Mailing Address: 700 13th Street, NW, Suite 600
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: 2012 Primary
Candidate Name: Steny H. Hoyer
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MD District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 22 / 2011
Transaction ID : 38A1281BC2D37F8D0A7
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Huizenga for Congress
Mailing Address: 441 Williams Court
City: Zeeland State: MI Zip Code: 49464
Purpose of Disbursement: 2012 Primary
Candidate Name: William P. Huizenga
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 02
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 26 / 2011
Transaction ID : 70196047FD21ACEA866
Amount of Each Disbursement this Period: -2000.00

C. Full Name (Last, First, Middle Initial): Jim Gerlach for Congress Committee
Mailing Address: PO Box 87
City: Uwchland State: PA Zip Code: 19480
Purpose of Disbursement: 2012 Primary
Candidate Name: James W. Gerlach
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 06
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 29 / 2011
Transaction ID : 029ADF99DC9C4079A6A
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1500.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Jim Himes for Congress
Mailing Address: 857 Post Road, #312
City: Fairfield State: CT Zip Code: 06824
Purpose of Disbursement: 2012 Primary
Candidate Name: James A. Himes
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CT District: 04
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 22 / 2011
Transaction ID : D7B47D81FF65FF02AA6
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Jim Jordan for Congress
Mailing Address: 1709 State Route 560 South
City: Urbana State: OH Zip Code: 43078
Purpose of Disbursement: 2012 Primary
Candidate Name: James Jordan
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 04
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 07 / 2011
Transaction ID : 33B144CDF044691C864
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): John Campbell for Congress
Mailing Address: 7700 Irvine Center Drive Suite 800
City: Irvine State: CA Zip Code: 92618
Purpose of Disbursement: 2012 Primary
Candidate Name: John B. T. Campbell III
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 48
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 22 / 2011
Transaction ID : C8449953B43B4863EA9
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Judy Biggert for Congress
Mailing Address: PO Box 637
City: Hinsdale State: IL Zip Code: 60522
Purpose of Disbursement: 2012 Primary
Candidate Name: Judy Biggert
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 11
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 08 / 2011
Transaction ID : FB9589815A8D8214C00
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Judy Biggert for Congress
Mailing Address: PO Box 637
City: Hinsdale State: IL Zip Code: 60522
Purpose of Disbursement: 2012 Primary
Candidate Name: Judy Biggert
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 11
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 07 / 2011
Transaction ID : E593DAB4CCF66F08D02
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Kind for Congress Committee
Mailing Address: 205 5th Avenue South
City: La Crosse State: WI Zip Code: 54601
Purpose of Disbursement: 2012 Primary
Candidate Name: Ron Kind
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WI District: 03
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 25 / 2011
Transaction ID : 5FC57C9E70E330B1FA5
Amount of Each Disbursement this Period: 1000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Kristi for Congress
Mailing Address: PO Box 852
City: Sioux Falls State: SD Zip Code: 57101
Purpose of Disbursement: 2012 Primary
Candidate Name: Kristi Lynn Noem
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: SD District: 01
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 22 / 2011
Transaction ID : 70DA321CC722FEBB893
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Lofgren for Congress
Mailing Address: C/O Contribution Solutions, Llc
123 E. San Carlos St., #531
City: San Jose State: CA Zip Code: 95112
Purpose of Disbursement: 2012 Primary
Candidate Name: Zoe Lofgren
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 19
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 19 / 2011
Transaction ID : AFB58349D280D05E356
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Longhorn Pac
Mailing Address: PO Box 30844
City: Bethesda State: MD Zip Code: 20824
Purpose of Disbursement: 2011 Contribution
Candidate Name: Longhorn Pac
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) Contribution
Date of Disbursement: 12 / 16 / 2011
Transaction ID : 1A09935CC2993B111BC
Amount of Each Disbursement this Period: 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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)
21b 22 [X] 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Majority Committee Pac--Mc Pac
Mailing Address: PO Box 10134
City: Bakersfield State: CA Zip Code: 93389
Purpose of Disbursement: 2011 Contribution
Candidate Name: Majority Committee Pac--Mc Pac
Category/Type: 011
Office Sought: House [ ] Senate [ ] President [ ] State: District:
Disbursement For: 2011 Primary [ ] General [ ] Other (specify) [X] Contribution
Date of Disbursement: 12 / 16 / 2011
Transaction ID : B468DC29AF997D9AF10
Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial): Marco Rubio for Us Senate
Mailing Address: PO Box 140420
City: Miami State: FL Zip Code: 33114
Purpose of Disbursement: 2016 Primary
Candidate Name: Marco Antonio Rubio
Category/Type: 011
Office Sought: House [ ] Senate [X] President [ ] State: FL District:
Disbursement For: 2016 Primary [X] General [ ] Other (specify) [ ]
Date of Disbursement: 09 / 26 / 2011
Transaction ID : DD15D3F2BB598F2F88E
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Mica for Congress
Mailing Address: PO Box 181546
City: Casselberry State: FL Zip Code: 32718
Purpose of Disbursement: 2012 Primary
Candidate Name: John L. Mica
Category/Type: 011
Office Sought: House [X] Senate [ ] President [ ] State: FL District: 07
Disbursement For: 2012 Primary [X] General [ ] Other (specify) [ ]
Date of Disbursement: 12 / 06 / 2011
Transaction ID : 48D16AF252A0BD736B8
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 10000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Michael Grimm for Congress
Mailing Address: PO Box 270
City: Staten Island State: NY Zip Code: 10310
Purpose of Disbursement: 2012 Primary
Candidate Name: Michael G. Grimm
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 13
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07/19/2011
Transaction ID : E50453A84B23AA313ED
Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial): Moore for Congress
Mailing Address: PO Box 16646
City: Milwaukee State: WI Zip Code: 53216
Purpose of Disbursement: 2012 Primary
Candidate Name: Gwendolynne Moore
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: WI District: 04
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10/25/2011
Transaction ID : B520008EC8F8F520D27
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Prairieland Pac
Mailing Address: 228 S Washington St Ste 115
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: 2011 Contribution
Candidate Name: Prairieland Pac
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) Contribution
Date of Disbursement: 11/22/2011
Transaction ID : 19D6219737A1145A3E1
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Price for Congress
Mailing Address: PO Box 425
City: Roswell State: GA Zip Code: 30077
Purpose of Disbursement: 2012 Primary
Candidate Name: Thomas E. Price M.D.
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 06
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 13 / 2011
Transaction ID : 653D15B50F27BE74A16
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Prosperity Pac
Mailing Address: 1006 Pendleton Street
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: 2011 Contribution
Candidate Name: Prosperity Pac
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) Contribution
Date of Disbursement: 11 / 22 / 2011
Transaction ID : 964B8E34D9213656D70
Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Randy Hultgren for Congress
Mailing Address: PO Box 717
City: St Charles State: IL Zip Code: 60174
Purpose of Disbursement: 2012 Primary
Candidate Name: Randall M. Hultgren
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 14
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 07 / 2011
Transaction ID : AF509E9DECF20BDA0D6
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Reed Committee
Mailing Address: PO Box 8628
City: Cranston State: RI Zip Code: 02920
Purpose of Disbursement: 2014 Primary
Candidate Name: Jack Francis Reed
Category/Type: 011
Office Sought: ☐ House ☒ Senate ☐ President
State: RI District:
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 06 / 2011
Transaction ID : B8759E805EFFFF6FEDD
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Richard Hanna for Congress Committee
Mailing Address: PO Box 118
City: Utica State: NY Zip Code: 13503
Purpose of Disbursement: 2012 Primary
Candidate Name: Richard L. Hanna
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 24
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 16 / 2011
Transaction ID : BD1729F650F7100D637
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Robert Hurt for Congress
Mailing Address: PO Box 8
City: Chatham State: VA Zip Code: 24531
Purpose of Disbursement: 2012 Primary
Candidate Name: Robert Hurt
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 22 / 2011
Transaction ID : 63C9220C07B203FFD6B
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 6500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Schock for Congress
Mailing Address: PO Box 10555
City: Peoria State: IL Zip Code: 61612
Purpose of Disbursement: 2012 Primary
Candidate Name: Aaron Schock
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 18
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07/29/2011
Transaction ID : E41683A8219A8A5604B
Amount of Each Disbursement this Period: -2000.00

B. Full Name (Last, First, Middle Initial): Schweikert for Congress
Mailing Address: 8776 E Shea Blvd, Suite B3A-626
City: Scottsdale State: AZ Zip Code: 85260
Purpose of Disbursement: 2012 Primary
Candidate Name: David Schweikert
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: AZ District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10/13/2011
Transaction ID : A2656226C2BF0C3B69F
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Scott Garrett for Congress
Mailing Address: PO Box 905
City: Newton State: NJ Zip Code: 07860
Purpose of Disbursement: 2012 Primary
Candidate Name: Ernest Scott Garrett
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 05
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11/07/2011
Transaction ID : 2163FC3AE700D810CE7
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Senate Conservatives Fund
Mailing Address: 228 S. Washington St., Ste. 115
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: 2011 Contribution
Candidate Name: Senate Conservatives Fund
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: 10 / 13 / 2011
Transaction ID : 107BACDAB8EDA916C8A
Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial): Sires for Congress
Mailing Address: 6050 Blvd. East
City: West New York State: NJ Zip Code: 07093
Purpose of Disbursement: 2012 Primary
Candidate Name: Albio Sires
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 13
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 10 / 13 / 2011
Transaction ID : 52FA45D5F0106DAECBB
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): South Dakota First
Mailing Address: PO Box 155
City: Sioux Falls State: SD Zip Code: 57101
Purpose of Disbursement: 2011 Contribution
Candidate Name: South Dakota First
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2011 ☐ Primary ☐ General ☒ Other (specify) ▼ Contribution
Date of Disbursement: 09 / 08 / 2011
Transaction ID : 0FFB3FD46F0B95E3FF1
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Southerland for Congress
Mailing Address: PO Box 1692
City: Lynn Haven State: FL Zip Code: 32444
Purpose of Disbursement: 2012 Primary
Candidate Name: William Steve Southerland II
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 02
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 10 / 25 / 2011
Transaction ID : 9901BE5766B87956F2C
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Steve Fincher for Congress
Mailing Address: PO Box 11153
City: Jackson State: TN Zip Code: 38308
Purpose of Disbursement: 2012 Primary
Candidate Name: Stephen Lee Fincher
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: TN District: 08
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 09 / 08 / 2011
Transaction ID : 788BFA05808276B529E
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Stivers for Congress
Mailing Address: 4679 Winterset Drive
City: Columbus State: OH Zip Code: 43220
Purpose of Disbursement: 2012 Primary
Candidate Name: Steve Stivers
Category/Type: 011
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 15
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 16 / 2011
Transaction ID : ACD3EE365DC06665496
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Supporting Conservatives of Today and Tomorrow (SCOTT PAC)

Mailing Address PO Box 905

City: Newton State: NJ Zip Code: 07860

Purpose of Disbursement: 2011 Contribution

Candidate Name: Supporting Conservatives of Today and Tomorrow (SCOTT PAC)

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2011
☐ Primary ☐ General
☒ Other (specify) ▼ Contribution

Date of Disbursement: 11 / 07 / 2011

Transaction ID : 3CA349E75738612CC15

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Tiberi for Congress

Mailing Address 2931 E Dublin Granville Road
Suite 190

City: Columbus State: OH Zip Code: 43231

Purpose of Disbursement: 2012 Primary

Candidate Name: Patrick J. Tiberi

Category/Type: 011

Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 12

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement: 09 / 08 / 2011

Transaction ID : 725624215E2E7906641

Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
Tom Reed for Congress

Mailing Address PO Box 450

City: Victor State: NY Zip Code: 14564

Purpose of Disbursement: 2012 Primary

Candidate Name: Thomas W. Reed II.

Category/Type: 011

Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 29

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement: 09 / 29 / 2011

Transaction ID : D28B39AA23A502A06C7

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A.
Full Name (Last, First, Middle Initial): Westmoreland for Congress
Mailing Address: PO Box 458
City: Sharpsburg State: GA Zip Code: 30277
Purpose of Disbursement: 2012 Primary
Category/Type: 011
Candidate Name: Lynn A. Westmoreland
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 03
Disbursement For: 2012 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 11 / 22 / 2011
Transaction ID : 6935B15AD9560FA9CA9
Amount of Each Disbursement this Period: 4000.00

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Category/Type:
Candidate Name:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

TOTAL This Period (last page this line number only) ▶ 98000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Campaign fund of Bob DeWeese

Mailing Address 6206 GLEN HILL RD

City: Louisville State: KY Zip Code: 40222

Purpose of Disbursement: Nonfederal Contribution

Candidate Name

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 16 / 2011

Transaction ID : E0BA928527408DB85BB

Amount of Each Disbursement this Period: 350.00

B. Full Name (Last, First, Middle Initial)
Campaign Fund of Robert R. Damron

Mailing Address 231 Fairway West

City: Nicholasville State: KY Zip Code: 40356

Purpose of Disbursement: Nonfederal Contribution

Candidate Name

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 16 / 2011

Transaction ID : 97BED90EA713C1CAA9C

Amount of Each Disbursement this Period: 350.00

C. Full Name (Last, First, Middle Initial)
Citizens for Buchy

Mailing Address 2191 Oak Street

City: Maria Stein State: OH Zip Code: 45860

Purpose of Disbursement: Nonfederal Contribution

Candidate Name

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 09 / 29 / 2011

Transaction ID : 491D18E2AB70B4C1920

Amount of Each Disbursement this Period: 750.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1450.00

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)
21b 22 23 24 25 26
27 28a 28b 28c X 29 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Citizens for Stinziano
Mailing Address: 550 East Walnut Street
City: Columbus State: OH Zip Code: 43215
Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type: 011
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 10 / 13 / 2011
Transaction ID : 26905609CFF14AF6145
Amount of Each Disbursement this Period: 500.00

B. Full Name (Last, First, Middle Initial): Committee to Elect David L. Williams
Mailing Address: P O BOX 666
City: BURKESVILLE State: KY Zip Code: 42717
Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type: 011
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 12 / 16 / 2011
Transaction ID : EF3D615439B14369F16
Amount of Each Disbursement this Period: 350.00

C. Full Name (Last, First, Middle Initial): Committee to Elect Gregory D. Stumbo
Mailing Address: PO BOX 1473
City: PRESTONSBURG State: KY Zip Code: 41653
Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type: 011
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 12 / 16 / 2011
Transaction ID : AAA099088417D9700EC
Amount of Each Disbursement this Period: 350.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1200.00

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial): Friends of Faber
Mailing Address: 7706 State Route 703
City: Celina State: OH Zip Code: 45822
Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 05 / 2011
Transaction ID : E9D055E7D2CB37A03EF
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): Jeffrey Hoover for State Representative
Mailing Address: PO Box 985
City: Jamestown State: KY Zip Code: 42629
Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 16 / 2011
Transaction ID : 2FB0FD79651A680A793
Amount of Each Disbursement this Period: 350.00

C. Full Name (Last, First, Middle Initial): Katie Stein for State Senate
Mailing Address: 21 Fairway Drive
City: Southgate State: KY Zip Code: 41071
Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type: 011
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 16 / 2011
Transaction ID : 0EFFFBD002905BEFBC4
Amount of Each Disbursement this Period: 350.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1700.00

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)
21b 22 23 24 25 26
27 28a 28b 28c X 29 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Keep State Representative Jeff Greer

Mailing Address PO Box 1007

City: Bradenburg
State: KY
Zip Code: 40108

Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type: 011

Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 12 / 16 / 2011

Transaction ID : 09164455B41D3403BBC

Amount of Each Disbursement this Period: 350.00

B. Full Name (Last, First, Middle Initial)
Re-Elect Senator Robert Stivers

Mailing Address 207 Main St

City: Manchester
State: KY
Zip Code: 40962

Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type: 011

Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 12 / 16 / 2011

Transaction ID : 3163103AA212404CBE6

Amount of Each Disbursement this Period: 350.00

C. Full Name (Last, First, Middle Initial)
Riggs for Representative

Mailing Address PO Box 24586

City: Louisville
State: KY
Zip Code: 40224

Purpose of Disbursement: Nonfederal Contribution
Candidate Name:
Category/Type: 011

Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)

Date of Disbursement: 12 / 16 / 2011

Transaction ID : CEE3A276505ED46ED45

Amount of Each Disbursement this Period: 350.00

SUBTOTAL of Disbursements This Page (optional) ▶ 1050.00

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
National Association of Mutual Insurance Companies PAC

A. Full Name (Last, First, Middle Initial)
Ruth Teichman for Senate

Mailing Address 434E. Old Hywy 50

City: Stafford State: KS Zip Code: 67578

Purpose of Disbursement: Nonfederal Contribution

Candidate Name

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 16 / 2011

Transaction ID : 104DA2837F75A0B1515

Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Tom Buford for State Senate

Mailing Address 409 West Maple Street

City: Nicholasville State: KY Zip Code: 40356

Purpose of Disbursement: Nonfederal Contribution

Candidate Name

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 16 / 2011

Transaction ID : 702F6A739D0C82A6DFC

Amount of Each Disbursement this Period: 350.00

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type:

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: / /

Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 1350.00

TOTAL This Period (last page this line number only) ▶ 6750.00