

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

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

FOR LINE NUMBER: PAGE 18 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Professional Insurance Agents Political Action Committee

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

Mailing Address PO Box 594

City State Zip Code
Casselton ND 58012

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

Name of Employer Occupation
Weber Insurance Agency Insurance Agent

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	0

Transaction ID: C904418

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Larry Willis

Mailing Address 18401 NW 27th Ave

City State Zip Code
Miami FL 33056-2987

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

Name of Employer Occupation
Annette Willis Ins Agency Inc Insurance Agent

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	0

Transaction ID: C904295

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	▶	350.00
TOTAL This Period (last page this line number only)	▶	12200.00