

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

AZOA Services Corp. Political Action Committee (Allianz of America PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2026"/>	<input type="text" value="173516.02"/>	<input type="text" value="173516.02"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="160791.02"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1695.00"/>	<input type="text" value="8470.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="162486.02"/>	<input type="text" value="181986.02"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="19500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="162486.02"/>	<input type="text" value="162486.02"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

AZOA Services Corp. Political Action Committee (Allianz of America PAC)

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

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).....	1400.00	4710.00
(ii) Unitemized	295.00	3760.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1695.00	8470.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1695.00	8470.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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)).....▶	1695.00	8470.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1695.00	8470.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	19500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	19500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	19500.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1695.00	8470.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1695.00	8470.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
AZOA Services Corp. Political Action Committee (Allianz of America PAC)

A. Clover, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 Vista View Loop
 City Stevensville State MT Zip Code 59870-7422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Global Risks US I Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2026
Transaction ID : PR282762139352
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. Lefkin, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4112 38th St NW
 City Washington State DC Zip Code 20016-2218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) SR. V.P. - GOVERNMENT & EXTERN.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 05 / 31 / 2026
Transaction ID : PR282813539352
 Amount of Each Receipt this Period 380.00
 Memo Item
 P/R Deduction (\$190.00 Semi-Monthly)

C. Walther, Corey, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8584 Drake Court
 City Chanhassen State MN Zip Code 55317-8700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) STRATEGIC ACCOUNTS GENERAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2026
Transaction ID : PR282993239352
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	480.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AZOA Services Corp. Political Action Committee (Allianz of America PAC)

A. Ryan, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1397 Creekside Drive
 City Waconia State MN Zip Code 55387-1180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) HR Sr Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 31 / 2026**
Transaction ID : PR283039339352
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. Brown, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1060 Bayside Lane
 City Minnetrista State MN Zip Code 55364-8963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 31 / 2026**
Transaction ID : PR283046939352
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

C. Thomas, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5111 Bluff Circle
 City Edina State MN Zip Code 55436-2185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) FMO Dist Management
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 31 / 2026**
Transaction ID : PR283081739352
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AZOA Services Corp. Political Action Committee (Allianz of America PAC)

A. Guldseth, Jenny, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10312 Maryland Ave N
 City Brooklyn Park State MN Zip Code 55445-3277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) Human Resources
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2026
Transaction ID : PR283118139352
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. Muench, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9158 Sunnyvale Drive
 City Chanhassen State MN Zip Code 55317-8532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 31 / 2026
Transaction ID : PR283131739352
 Amount of Each Receipt this Period 80.00
 Memo Item
 P/R Deduction (\$40.00 Semi-Monthly)

C. Gaumont, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Lake Ct
 City North Oaks State MN Zip Code 55127-6209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 31 / 2026
Transaction ID : PR283161039352
 Amount of Each Receipt this Period 240.00
 Memo Item
 P/R Deduction (\$120.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	370.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AZOA Services Corp. Political Action Committee (Allianz of America PAC)

A. Campos Sorga, Honorio, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14115 Cherry Mound Rd
 City Houston State TX Zip Code 77077-1011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Global Risks US I Occupation (for Individual) Engineering Underwriting
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2026
Transaction ID : PR283228839352
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

B. Thiel, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8757 Stonefield Ln
 City Chanhassen State MN Zip Code 55317-4713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) Vice President, Actuarial
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2026
Transaction ID : PR285288439352
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

C. Cepek, Gretchen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5409 Londonderry Road
 City Edina State MN Zip Code 55436-1026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allianz Life North America Occupation (for Individual) Legal Operations/Attorney
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00

Date of Receipt 05 / 31 / 2026
Transaction ID : PR340591839352
 Amount of Each Receipt this Period 170.00
 Memo Item
 P/R Deduction (\$85.00 Semi-Monthly)

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
AZOA Services Corp. Political Action Committee (Allianz of America PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Wellmann, Jason, , ,			Date of Receipt MM / DD / YYYY 05 / 31 / 2026 Transaction ID : PR358130339352
Mailing Address 7430 73rd court			Amount of Each Receipt this Period 80.00
City Stillwater	State MN	Zip Code 55082-4666	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$40.00 Semi-Monthly)
Name of Employer (for Individual) Allianz Life North America		Occupation (for Individual) SVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Southwell, JoAnn, , ,			Date of Receipt MM / DD / YYYY 05 / 31 / 2026 Transaction ID : PR456050939352
Mailing Address 7731 128th Street West			Amount of Each Receipt this Period 50.00
City Apple Valley	State MN	Zip Code 55124-9767	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer (for Individual) Allianz Life North America		Occupation (for Individual) Director - HRONCALL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.			Date of Receipt MM / DD / YYYY
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	1400.00