

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

ADDRESS (number and street) 2600 South River Road Des Plaines IL 60018 3286

2. FEC IDENTIFICATION NUMBER C00066472 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 11 01 2009 through 11 30 2009

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 June Holmes

Signature of Treasurer Electronically Filed by June Holmes Date 12 17 2009

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

Report Covering the Period: From:

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		44688.07
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	161074.74									
(c) Total Receipts (from Line 19)	32690.90	460167.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	193765.64	504855.64								
7. Total Disbursements (from Line 31)	36650.00	347740.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	157115.64	157115.64								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

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)	30899.99	292393.11
(ii) Unitemized	1775.92	78128.31
(iii) TOTAL (add Lines 11(a)(i) and (ii)	32675.91	370521.42
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	84500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	32675.91	455021.42
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	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	14.99	146.15
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	32690.90	460167.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	32690.90	460167.57

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37000.00	333250.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	-350.00	14490.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	36650.00	347740.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36650.00	347740.00

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)	32675.91	455021.42
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32675.91	455021.42
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 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Marguerite Tortorello

Mailing Address 4711 North Kenmore

City Chicago State IL Zip Code 60640-5980

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

Name of Employer Property Casualty Insurers Association
Occupation Sr Vice President, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3100.00

Date of Receipt 11 / 04 / 2009
Transaction ID: 30811565
Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Anthony J. Warren

Mailing Address 4467 Honeywood Lane

City Jackson State WI Zip Code 53037-9404

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

Name of Employer West Bend Mutual Group
Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 04 / 2009
Transaction ID: 30811566
Amount of Each Receipt this Period 1200.00

C.

Full Name (Last, First, Middle Initial)
Linda S Warren

Mailing Address 4467 Honeywood Lane

City Jackson State WI Zip Code 53037-9404

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

Name of Employer
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 04 / 2009
Transaction ID: 30811567
Amount of Each Receipt this Period 285.00

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)	PAGE 7 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Robert A. DiMuccio		Date of Receipt
	Mailing Address 6 Intervale Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 6 / 2 0 0 9
	City	State	Zip Code
	Cumberland	RI	02864-3331
	FEC ID number of contributing federal political committee. C		Transaction ID: 30853908
Name of Employer Amica Mutual Group		Occupation Chairman, President and CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1500.00
		<input type="text"/> 4000.00	

B.	Full Name (Last, First, Middle Initial) Daniel D. Daly		Date of Receipt
	Mailing Address 5516 Youngs Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Vernon	NY	13476-4714
	FEC ID number of contributing federal political committee. C		Transaction ID: 30885030
Name of Employer Utica National Insurance Group		Occupation V. P. Senior Marketing Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) Ms. Cindy Ghalibaf		Date of Receipt
	Mailing Address 2908 Cottonwood Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Colleyville	TX	76034-5124
	FEC ID number of contributing federal political committee. C		Transaction ID: 30885032
Name of Employer Amerisure Companies		Occupation Vice President Field Claims	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 280.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2100.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 60
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<p>A. Full Name (Last, First, Middle Initial) David A. Sampson</p> <p>Mailing Address 2435 Luckett Ave</p> <p>City State Zip Code Vienna VA 22180-6819</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Property Casualty Insurers Association</p> <p>Occupation President and CEO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2990.03</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 9</p> <p>Transaction ID: 30885034</p> <p>Amount of Each Receipt this Period 100.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Ms Cheryl Ann DeAngelo</p> <p>Mailing Address 9053 Seymour Street</p> <p>City State Zip Code Marcy NY 13403-2326</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Utica National Insurance Group</p> <p>Occupation Assistant Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 9</p> <p>Transaction ID: 30885051</p> <p>Amount of Each Receipt this Period 240.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Nicholas O Matt</p> <p>Mailing Address 36 Jordon Rd</p> <p>City State Zip Code New Hartford NY 13413-2312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Utica National Insurance Group</p> <p>Occupation Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 9</p> <p>Transaction ID: 30885052</p> <p>Amount of Each Receipt this Period 500.00</p>
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SUBTOTAL of Receipts This Page (optional)	840.00
TOTAL This Period (last page this line number only)	

**SCHEDULE 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 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Robert A. Sherman	Date of Receipt MM / DD / YYYY 11 / 17 / 2009
	Mailing Address P. O. Box 530	Transaction ID: 30885053
	City State Zip Code Utica NY 13503-0530	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Utica National Insurance Group	Occupation Sr VP, Sr Underwriting Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. J. Douglas Robinson	Date of Receipt MM / DD / YYYY 11 / 17 / 2009
	Mailing Address Box 530	Transaction ID: 30885197
	City State Zip Code Utica NY 13503-0530	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Utica National Insurance Group	Occupation President and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Mr. Richard F. Russell	Date of Receipt MM / DD / YYYY 11 / 18 / 2009
	Mailing Address 6295 Bloomfield Glens	Transaction ID: 30885198
	City State Zip Code West Bloomfield MI 48322-2512	Amount of Each Receipt this Period 900.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Amerisure Companies	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4900.00	

SUBTOTAL of Receipts This Page (optional)	▶	2400.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 60
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Jeffrey Kusch	Date of Receipt MM / DD / YYYY 11 / 09 / 2009
	Mailing Address 11332 Trillium Lane North	Transaction ID: 30885199
	City State Zip Code Champlin MN 55316-2685	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Austin Mutual Insurance Company	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4600.00	

B.	Full Name (Last, First, Middle Initial) Jessica Hanson	Date of Receipt MM / DD / YYYY 11 / 12 / 2009
	Mailing Address 4086 Colleton Ct	Transaction ID: 30885200
	City State Zip Code Tallahassee FL 32311-3640	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Property Casualty Insurers Association	Occupation Public Affairs Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Jessica Hanson	Date of Receipt MM / DD / YYYY 11 / 12 / 2009
	Mailing Address 4086 Colleton Ct	Transaction ID: 30885201
	City State Zip Code Tallahassee FL 32311-3640	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Property Casualty Insurers Association	Occupation Public Affairs Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

SUBTOTAL of Receipts This Page (optional)	▶	1265.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 60
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Farid F Nagji		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 821 Canterbury Hill St		Transaction ID: 30935078		
	City San Antonio	State TX	Zip Code 78209-6038	Amount of Each Receipt this Period 600.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Argo Group US, Inc.	Occupation Sr VP & CIO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

B.	Full Name (Last, First, Middle Initial) Barbara L Sutherland		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 2138 Cardigan Hill		Transaction ID: 30935079		
	City San Antonio	State TX	Zip Code 78232-1602	Amount of Each Receipt this Period 750.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Argo Group US, Inc.	Occupation SVP Gen'l Counsel & Chief Claims Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00			

C.	Full Name (Last, First, Middle Initial) Lisa Paschal-Alcorn		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 588 Clarissa CT		Transaction ID: 30935080		
	City Naperville	State IL	Zip Code 60540-8101	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Argo Group US, Inc.	Occupation VP Human Resources			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

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)	PAGE 12 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Daniel A Cotter		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 6768 N Ionia		Transaction ID: 30935081		
	City Chicago	State IL	Zip Code 60646-2813	Amount of Each Receipt this Period 400.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Argo Group US, Inc.	Occupation VP & Deputy General Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

B.	Full Name (Last, First, Middle Initial) John W Mullen		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 1940 Woodbridge Dr.		Transaction ID: 30935082		
	City Mc Kinney	State TX	Zip Code 75070-3904	Amount of Each Receipt this Period 1460.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Unitrin, Inc.	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2460.00			

C.	Full Name (Last, First, Middle Initial) John E Condon		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 70 Hickory Drive		Transaction ID: 30935083		
	City East Greenwich	State RI	Zip Code 02818-2516	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Progressive Insurance Group	Occupation RI/MA State Claims Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	2110.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Ms. Sarah Salzwedel	Date of Receipt MM / DD / YYYY 11 / 20 / 2009
	Mailing Address N39 W29393 Burning Tree Ct.	Transaction ID: 30941775
	City State Zip Code Pewaukee WI 53072-3162	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. C	
Name of Employer American Family Insurance Group	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) James McGlennon	Date of Receipt MM / DD / YYYY 11 / 23 / 2009
	Mailing Address 149 Larch Road	Transaction ID: 30941776
	City State Zip Code Cambridge MA 02138-3316	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Liberty Mutual Group	Occupation Insurance Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Edmund F. Kelly	Date of Receipt MM / DD / YYYY 11 / 23 / 2009
	Mailing Address 175 Berkeley Street	Transaction ID: 30941777
	City State Zip Code Boston MA 02116-5066	Amount of Each Receipt this Period 3600.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Liberty Mutual Group	Occupation Chairman President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00	

SUBTOTAL of Receipts This Page (optional)	4090.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 60
(check only one)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Bruce G. Kelley

Mailing Address 14 Glenview Drive

City State Zip Code
Des Moines IA 50312-2546

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

Name of Employer Occupation
EMC Insurance Companies President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
11 / 23 / 2009

Transaction ID: 30941778

Amount of Each Receipt this Period
3000.00

B.

Full Name (Last, First, Middle Initial)
Janice W Zwinggi

Mailing Address 1752 Cypress Rapids Dr

City State Zip Code
New Braunfels TX 78130-3035

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

Name of Employer Occupation
Argo Group US, Inc. Vice President/Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2009

Transaction ID: 30942944

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Marc A Meiches

Mailing Address 43 Paine Ave.

City State Zip Code
Prides Crossing MA 01965

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

Name of Employer Occupation
Electric Insurance Group President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2009

Transaction ID: 30942947

Amount of Each Receipt this Period
1200.00

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 60
(check only one)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Gregory M Harden

Mailing Address 5 Fairway Drive

City State Zip Code
Mc Connellsville NY 13401

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

Name of Employer Occupation
Utica National Insurance Group Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2009

Transaction ID: 30942948

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Dale E Buell

Mailing Address 9946 Korber Road

City State Zip Code
Holland Patent NY 13354-4704

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

Name of Employer Occupation
Utica National Insurance Group Manager- Customer Support Center

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2009

Transaction ID: 30942950

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Chris A. Eells

Mailing Address 1187 Autumn Court

City State Zip Code
Marietta GA 30066-2872

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

Name of Employer Occupation
Utica National Insurance Group Resident VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2009

Transaction ID: 30942951

Amount of Each Receipt this Period
500.00

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)	PAGE 16 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Paul Blume, JR	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 430 W. sheridan Place	Transaction ID: 30942952
	City State Zip Code Lake Bluff IL 60044-2327	Amount of Each Receipt this Period 2100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Property Casualty Insurers Association	Occupation Sr VP State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3400.00	

B.	Full Name (Last, First, Middle Initial) Mr. Gregory V. Ostergren	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address Corporate Centre 1949 East Sunshine	Transaction ID: PR1456193322926
	City State Zip Code Springfield MO 65899-0001	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer American National Property and Casualt	Occupation Chairman, President and CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3300.00	P/R Deduction (\$300.00 Monthly)

C.	Full Name (Last, First, Middle Initial) Mr. James P Brannen	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3329 Waterberry Circle	Transaction ID: PR1456262922926
	City State Zip Code Waukee IA 50263-8151	Amount of Each Receipt this Period 41.67
	FEC ID number of contributing federal political committee. C	
Name of Employer FBL Financial Group	Occupation Vice President Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.37	P/R Deduction (\$41.67 Monthly)

SUBTOTAL of Receipts This Page (optional)	2441.67
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Charles T. Happel

Mailing Address 1025 N.W. 68th Avenue

City State Zip Code
Des Moines IA 50313-5455

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

Name of Employer Occupation
FBL Financial Group Sr Field Claim Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: 11 / 30 / 2009
Transaction ID: PR1456325722926
Amount of Each Receipt this Period: 40.00
P/R Deduction (\$40.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Ms. June T. Holmes

Mailing Address 409 S. Vine

City State Zip Code
Park Ridge IL 60068-4145

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

Name of Employer Occupation
Property Casualty Insurers Association Treasurer & COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3400.00

Date of Receipt: 11 / 30 / 2009
Transaction ID: PR1456336822926
Amount of Each Receipt this Period: 300.00
P/R Deduction (\$150.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
Ms. Joanne M. Orfanos

Mailing Address 2104 Butternut Lane

City State Zip Code
Northbrook IL 60062-6608

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

Name of Employer Occupation
Property Casualty Insurers Association Sr VP Membership & Marketing Communica

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 11 / 30 / 2009
Transaction ID: PR1456395522926
Amount of Each Receipt this Period: 100.00
P/R Deduction (\$50.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ 440.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 60
(check only one)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Bruce D Trost

Mailing Address 13749 Bay Hill Court

City Clive State IA Zip Code 50325-8563

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

Name of Employer FBL Financial Group Occupation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3900.00

Date of Receipt 11 / 30 / 2009

Transaction ID: PR1456453322926

Amount of Each Receipt this Period 300.00

P/R Deduction (\$300.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Mr. Cyrus S Winters

Mailing Address 524 53rd Place

City West Des Moines State IA Zip Code 50266-7255

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

Name of Employer FBL Financial Group Occupation Vice President Agency & Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.24

Date of Receipt 11 / 30 / 2009

Transaction ID: PR1456472222926

Amount of Each Receipt this Period 20.84

P/R Deduction (\$20.84 Monthly)

C.

Full Name (Last, First, Middle Initial)
Mr. Stuart A. Yakes

Mailing Address 1185 Colony Lane

City Roselle State IL Zip Code 60172-1717

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

Name of Employer Property Casualty Insurers Association Occupation VP ISS Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 30 / 2009

Transaction ID: PR1456474922926

Amount of Each Receipt this Period 40.00

P/R Deduction (\$20.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► 360.84

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Scott A. Joyner		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 57 E. Delaware #2105		Transaction ID: PR1456541522926		
	City Chicago	State IL	Zip Code 60611-1476	Amount of Each Receipt this Period 213.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$106.50 Semi-Monthly)		
	Name of Employer Property Casualty Insurers Association	Occupation Vice President Information Technology	Aggregate Year-to-Date 2543.00		

B.	Full Name (Last, First, Middle Initial) Mr. Jon D. Srna		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 512 J.C. Rogers		Transaction ID: PR1456671222926		
	City Wamego	State KS	Zip Code 66547	Amount of Each Receipt this Period 29.17	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$29.17 Monthly)		
	Name of Employer FBL Financial Group	Occupation Business Operations Vice President	Aggregate Year-to-Date 320.87		

C.	Full Name (Last, First, Middle Initial) Mr. Steven Wittmuss		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 7410 Lambert Place		Transaction ID: PR1456694622926		
	City Lincoln	State NE	Zip Code 68516-5813	Amount of Each Receipt this Period 83.34	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$83.34 Monthly)		
	Name of Employer FBL Financial Group	Occupation Property Claims Vice President	Aggregate Year-to-Date 916.74		

SUBTOTAL of Receipts This Page (optional)	325.51
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Ms. Susan G. Vincent		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1787 Sheffield		Transaction ID: PR1456707722926
	City State Zip Code Birmingham MI 48009-7224	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00
	Name of Employer Amerisure Companies	Occupation Vice President & General Counsel	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

B.	Full Name (Last, First, Middle Initial) Mr. David B. Hostetter		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 37154 Weymouth		Transaction ID: PR1456707922926
	City State Zip Code Livonia MI 48152-4096	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00
	Name of Employer Amerisure Companies	Occupation Vice President	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 620.00		

C.	Full Name (Last, First, Middle Initial) Ms. Pamela A. Burgess		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 2604 Eaton Cross		Transaction ID: PR1456708022926
	City State Zip Code Royal Oak MI 48073-3723	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
	Name of Employer Amerisure Companies	Occupation Vice President Internal Audit	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	190.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Ms. Debra Szmagaj	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1267 Old Milford Farms	Transaction ID: PR1456708122926
	City State Zip Code Milford MI 48381-3373	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Bi-Weekly)
	Name of Employer Occupation Amerisure Companies Vice President - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Mr. Don A. Smith	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 54021 Trent River Drive	Transaction ID: PR1456708222926
	City State Zip Code Shelby Township MI 48315-1438	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$35.00 Bi-Weekly)
	Name of Employer Occupation Amerisure Companies Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.00	

C.	Full Name (Last, First, Middle Initial) Mr. Thomas E. Hoeg	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 17950 Cranbrook Court	Transaction ID: PR1456708422926
	City State Zip Code Northville MI 48167-4335	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
	Name of Employer Occupation Amerisure Companies Executive Vice President & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1255.00	

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	FOR LINE NUMBER: (check only one)	PAGE 22 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Roy D Kinnan	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 46139 Galway Drive	Transaction ID: PR1456708922926
	City State Zip Code Novi MI 48374-3972	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer Amerisure Companies	Occupation Senior Vice President & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

B.	Full Name (Last, First, Middle Initial) Mr. Derick Adams	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 26777 Halsted Road	Transaction ID: PR1456719922926
	City State Zip Code Farmington Hills MI 48331-3577	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer Amerisure Companies	Occupation Vice President Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

C.	Full Name (Last, First, Middle Initial) Mr Frank L. Petersmark, III	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 30611 Munger	Transaction ID: PR1456720122926
	City State Zip Code Livonia MI 48154-6234	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Amerisure Companies	Occupation Vice President - IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00	

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)	PAGE 23 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Daniel J. Graf		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 45000 Drocton		Transaction ID: PR1456720622926
	City Novi	State MI	Zip Code 48375-3802
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
	Name of Employer Amerisure Companies	Occupation Vice President Investments	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 990.77		

B.	Full Name (Last, First, Middle Initial) Douglas R. Roggenbaum		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3955 Pitt		Transaction ID: PR1456720722926
	City Waterford	State MI	Zip Code 48328-1144
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Amerisure Companies	Occupation Vice President	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Ms. Carol A. Taylor		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 18155 Magnolia Avenue		Transaction ID: PR1456720822926
	City Southfield	State MI	Zip Code 48075-4107
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Amerisure Companies	Occupation Vice President and Counsel	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

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)	PAGE 24 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. James Mangan		Date of Receipt
	Mailing Address 26777 Halsted Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Farmington Hills	MI	48331-3586
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1456721122926
Name of Employer Amerisure Companies		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 20.00
			P/R Deduction (\$10.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Mr. Michael Dieterle		Date of Receipt
	Mailing Address 47202 White Pines Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Novi	MI	48374-3697
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1456721822926
Name of Employer Amerisure Companies		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 865.00	<input type="text"/> 70.00
			P/R Deduction (\$35.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Mr. Donald Griffin		Date of Receipt
	Mailing Address 1706 Belcourt Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Elgin	IL	60120-7541
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1456723322926
Name of Employer Property Casualty Insurers Association		Occupation Vice President Personal Lines	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	<input type="text"/> 50.00
			P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 140.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Donald J. Seibel	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1537 South 45th	Transaction ID: PR1456728822926
	City State Zip Code West Des Moines IA 50265-5765	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$55.00 Monthly)
Name of Employer FBL Financial Group	Occupation Insurance Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 502.50	

B.	Full Name (Last, First, Middle Initial) Mr. Stephen W. Broadie	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 480 Florian Drive	Transaction ID: PR1456730422926
	City State Zip Code Des Plaines IL 60016-5716	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Vice President Financial Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

C.	Full Name (Last, First, Middle Initial) Ms. Ann Marie Weber	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1432 South Fairview	Transaction ID: PR1456730722926
	City State Zip Code Park Ridge IL 60068-5210	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation VP, Regional Manager State Government	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	▶	145.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 60
(check only one)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Matthew J. Simon

Mailing Address 412 Rosario Lane

City State Zip Code
White Lake MI 48386-4404

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

Name of Employer Occupation
Amerisure Companies Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1456735922926

Amount of Each Receipt this Period
20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Mr. Scott S Shuck

Mailing Address 32432 Northwoods

City State Zip Code
Adel IA 50003-8626

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

Name of Employer Occupation
FBL Financial Group Insurance Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1456737022926

Amount of Each Receipt this Period
20.00

P/R Deduction (\$20.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Mr. Rod J. Babbitt

Mailing Address 340 NE Cedar Avenue

City State Zip Code
Earlham UT 50072-1081

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

Name of Employer Occupation
FBL Financial Group Business Unit Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1456737522926

Amount of Each Receipt this Period
25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **65.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Brett L Clausen

Mailing Address 12955 E Mercer Lane

City State Zip Code
Scottsdale AZ 85259-4416

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

Name of Employer Occupation
FBL Financial Group Business Unit Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 916.74

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1456751422926

Amount of Each Receipt this Period
83.34

P/R Deduction (\$83.34 Monthly)

B.

Full Name (Last, First, Middle Initial)
Julie Petelle

Mailing Address 1550 Wicke

City State Zip Code
Des Plaines IL 60018-3203

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

Name of Employer Occupation
Property Casualty Insurers Association Director Membership & Business Develop

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1456754522926

Amount of Each Receipt this Period
20.00

P/R Deduction (\$10.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
Mr. Michael F. Gilhooly

Mailing Address 12135 Flambeau Drive

City State Zip Code
Palos Heights IL 60463-1659

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

Name of Employer Occupation
Property Casualty Insurers Association Director State Political Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1456768822926

Amount of Each Receipt this Period
60.00

P/R Deduction (\$30.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **163.34**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 60
(check only one)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Jeff Fuller

Mailing Address 4921 Keane Drive

City State Zip Code
Carmichael CA 95608-6025

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

Name of Employer Property Casualty Insurers Association
Occupation Vice President and General Counsel ACI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1456783922926

Amount of Each Receipt this Period
50.00

P/R Deduction (\$25.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
Mr. Edward H. Wagner

Mailing Address 1259 Dorchester

City State Zip Code
Birmingham MI 48009-5995

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

Name of Employer Amerisure Companies
Occupation Vice President & Chief Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1525802222926

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Mr. Randy M. Lester

Mailing Address 501 Hickory Lake Drive

City State Zip Code
Brandon FL 33511-6337

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

Name of Employer Amerisure Companies
Occupation Vice President Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1556188122926

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

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)	PAGE 29 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Todd B. Ruthruff	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 14615 Tudor Chase Drive	Transaction ID: PR1566733122926
	City State Zip Code Tampa FL 33626-3338	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer Amerisure Companies	Occupation Vice President & Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 620.00	

B.	Full Name (Last, First, Middle Initial) Ms. Judith D. Greer	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 28454 Elmira	Transaction ID: PR1577038922926
	City State Zip Code Livonia MI 48150-3105	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Amerisure Companies	Occupation Manager - Quality & Productivity	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

C.	Full Name (Last, First, Middle Initial) Mr. Stephen P. Solimine	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3624 Wolcott Drive	Transaction ID: PR1577039022926
	City State Zip Code Flower Mound TX 75028-8712	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Amerisure Companies	Occupation Vice President Regional Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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:	PAGE 30 / 60
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Glenn E. Farley		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 600 Lansdowne Drive		Transaction ID: PR1578285322926
	City Westland	State MI	Zip Code 48185-3493
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Amerisure Companies	Occupation Corporate Claims Manager	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

B.	Full Name (Last, First, Middle Initial) Mr. Mark F. Fox		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 29911 Robert		Transaction ID: PR1578285422926
	City Livonia	State MI	Zip Code 48150-3045
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
	Name of Employer Amerisure Companies	Occupation AVP Special Risk	P/R Deduction (\$30.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 740.00		

C.	Full Name (Last, First, Middle Initial) Ms. Lori Lee Tobis		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 450 South Vernon		Transaction ID: PR1578285722926
	City Dearborn	State MI	Zip Code 48124-1393
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer Amerisure Companies	Occupation AVP Legal Operations	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

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)	PAGE 31 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. David P. Galbraith		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 580 Michigan Avenue		Transaction ID: PR1578285822926
	City Marysville	State MI	Zip Code 48040-1157
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer Amerisure Companies	Occupation Vice President Loss Control	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

B.	Full Name (Last, First, Middle Initial) Noel K McKibbin		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 34076 Millcreek Court		Transaction ID: PR1613251022926
	City Adel	State IA	Zip Code 50003-8364
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer FBL Financial Group	Occupation Vice President Claims	P/R Deduction (\$30.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

C.	Full Name (Last, First, Middle Initial) Mr. Keith T. Bateman		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 765 Highland Avenue		Transaction ID: PR1621445522926
	City Glen Ellyn	State IL	Zip Code 60137-3853
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Property Casualty Insurers Association	Occupation Vice President Workers Compensation	P/R Deduction (\$10.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

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)	PAGE 32 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Reynold E. Becker	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1047 Falmore Drive	Transaction ID: PR1632197522926
	City Palatine State IL Zip Code 60067-7021	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Global Issues and Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

B.	Full Name (Last, First, Middle Initial) Ms. Ann W. Spragens	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 5510 Chase Avenue	Transaction ID: PR1632493222926
	City Downers Grove State IL Zip Code 60515-4268	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Sr Vice President, Secretary & General	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C.	Full Name (Last, First, Middle Initial) Mr. Kevin Richard Clary	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 140 Fountain Pkwy Blvd. Ste 200	Transaction ID: PR1633305722926
	City St Petersburg State FL Zip Code 33716	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Bi-Weekly)
Name of Employer Amerisure Companies	Occupation Vice President - Loss Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 60
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Ms. Yvonne Macks Hobson

Mailing Address 8933 Minne Wana Road

City State Zip Code
Clarkston MI 48348-3318

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

Name of Employer Occupation
Amerisure Companies UW Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1633306022926

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Mr. Benjamin J. McKay

Mailing Address 1401 South Joyce Street

City State Zip Code
Arlington VA 22202-1874

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

Name of Employer Occupation
Property Casualty Insurers Association Sr. VP Federal Government Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2991.74

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1695170222926

Amount of Each Receipt this Period
208.34

P/R Deduction (\$104.17 Se-mi-Monthly)

C.

Full Name (Last, First, Middle Initial)
Ms. Jean Demas

Mailing Address 2839 St. Anton Court

City State Zip Code
Lisle IL 60532-3429

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

Name of Employer Occupation
Property Casualty Insurers Association Assistant Vice President Publishing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1716716522926

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Sem-i-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **268.34**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 60
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr David T. Sebastian

Mailing Address 17127 Jonquil Avenue

City State Zip Code
Lakeville MN 55044-9175

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

Name of Employer Occupation
FBL Financial Group Vice President- Sales

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2009

Transaction ID: PR1752164522926

Amount of Each Receipt this Period
30.00

P/R Deduction (\$30.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Mr Thomas R. Litjen

Mailing Address 3917 Barcroft Mews Court

City State Zip Code
Falls Church VA 22041-1235

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

Name of Employer Occupation
Property Casualty Insurers Association VP Federal Government Relations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2291.74

Date of Receipt
MM / DD / YYYY
11 / 30 / 2009

Transaction ID: PR1790384222926

Amount of Each Receipt this Period
208.34

P/R Deduction (\$104.17 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
Mr Dale D Chula

Mailing Address 14780 Hawthorn Drive

City State Zip Code
Clive IA 50325-7765

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

Name of Employer Occupation
FBL Financial Group Insurance Executive

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2009

Transaction ID: PR1810342422926

Amount of Each Receipt this Period
30.00

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **268.34**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr Joe Woods		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 2100 Plumbrook		Transaction ID: PR1812180422926
	City State Zip Code Austin TX 78746-6232	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00
	Name of Employer Property Casualty Insurers Association Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Asst VP State Government Relations Aggregate Year-to-Date ▼ 330.00	P/R Deduction (\$15.00 Semi-Monthly)

B.	Full Name (Last, First, Middle Initial) D. Kenton Brine		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1500 Water Street SW No 2		Transaction ID: PR1829855022926
	City State Zip Code Olympia WA 98501-2295	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 60.00
	Name of Employer Property Casualty Insurers Association Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Asst. VP State Government Relations Aggregate Year-to-Date ▼ 330.00	P/R Deduction (\$30.00 Semi-Monthly)

C.	Full Name (Last, First, Middle Initial) Marshall E. Wandrei		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 10444 Pavillion Court		Transaction ID: PR1883581522926
	City State Zip Code Shelby Township MI 48315-6647	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
	Name of Employer Amerisure Companies Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director, Information Technology Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$10.00 Bi-Weekly)

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: PAGE 36 / 60
(check only one)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Todd J. Cicero

Mailing Address 5240 Kernwood Court

City State Zip Code
Palm Harbor FL 34685-3627

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

Name of Employer Occupation
Amerisure Companies Customer Service Center Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1886330722926

Amount of Each Receipt this Period
20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Ms Kelly Campbell

Mailing Address 228 Sugarbin Ct.

City State Zip Code
Longmont CO 80501-9715

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

Name of Employer Occupation
Property Casualty Insurers Association VP State Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1932624222926

Amount of Each Receipt this Period
40.00

P/R Deduction (\$20.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
Daniel H. Johnson

Mailing Address 10715 David Taylor Dr.
Suite 500

City State Zip Code
Charlotte NC 28262-1283

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

Name of Employer Occupation
Amerisure Companies Core Service Center Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: PR1936820222926

Amount of Each Receipt this Period
24.00

P/R Deduction (\$12.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **84.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 / 60
<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Kay Bauslaugh		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 26777 Halsted Road		Transaction ID: PR2020348322926
	City Farmington Hills	State MI	Zip Code 48331-3577
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Amerisure Companies	Occupation Reinsurance Manager	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B.	Full Name (Last, First, Middle Initial) Mr. Tony Burbank		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 26777 Halsted Road		Transaction ID: PR2020348522926
	City Farmington Hills	State MI	Zip Code 48331-3577
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Amerisure Companies	Occupation Corporate Services Manager	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Rebecca Chapa		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 26777 Halsted Road		Transaction ID: PR2020348622926
	City Farmington Hills	State MI	Zip Code 48331-3577
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer Amerisure Companies	Occupation Territorial Manager	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

SUBTOTAL of Receipts This Page (optional)	▶	70.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 60
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Mr. Kurt D Gallinger

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Government Relation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1490.00

Date of Receipt 11 / 30 / 2009

Transaction ID: PR202034922926

Amount of Each Receipt this Period 120.00

P/R Deduction (\$60.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
Mr Bobby D Jones

Mailing Address 26777 Halsted Road

City Farmington Hills State MI Zip Code 48331-3577

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

Name of Employer Amerisure Companies Occupation Claims Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 30 / 2009

Transaction ID: PR202034932926

Amount of Each Receipt this Period 20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
Carla Pike

Mailing Address 5221 N O'Connor Blvd #400

City Irving State TX Zip Code 75039

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

Name of Employer Amerisure Companies Occupation Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 30 / 2009

Transaction ID: PR2020350122926

Amount of Each Receipt this Period 20.00

P/R Deduction (\$10.00 Bi-Weekly)

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)	PAGE 39 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Robert Stahl		Date of Receipt
	Mailing Address 26777 Halsted Road		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Farmington Hills	MI	48331-3577
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Amerisure Companies		Occupation Claims Facility Manager	Transaction ID: PR2020350622926
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	Amount of Each Receipt this Period <input type="text" value="20.00"/>
			P/R Deduction (\$10.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) Debra Even		Date of Receipt
	Mailing Address 26777 Halsted		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Farmington Hills	MI	48331-3577
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Amerisure Companies		Occupation Credit Manager	Transaction ID: PR2059592222926
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="625.00"/>	Amount of Each Receipt this Period <input type="text" value="50.00"/>
			P/R Deduction (\$25.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) Harry J. Dell		Date of Receipt
	Mailing Address 2316 Hulett Avenue		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Faribault	MN	55021-2273
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Austin Mutual Insurance Company		Occupation 1st Vice President & Treasurer	Transaction ID: PR2127495022926
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="552.65"/>	Amount of Each Receipt this Period <input type="text" value="63.16"/>
			P/R Deduction (\$31.58 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="133.16"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Mr. Paul Kangas	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1704 W. Abingdon	Transaction ID: PR2127524022926
	City State Zip Code Alexandria DC 22314-1024	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Asst VP, Federal Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

B.	Full Name (Last, First, Middle Initial) Vincent T Donnelly	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 174 Meadow View Lane	Transaction ID: PR2151653922926
	City State Zip Code Lansdale PA 19446-5931	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Monthly)
Name of Employer PMA Insurance Group	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Ryan N Albers	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3416 Giles St.	Transaction ID: PR2194012422926
	City State Zip Code West Des Moines IA 50265-4025	Amount of Each Receipt this Period 29.17
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$29.17 Monthly)
Name of Employer FBL Financial Group	Occupation Commercial Agriculture Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.87	

SUBTOTAL of Receipts This Page (optional)	▶	179.17
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)	PAGE 41 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Keith M DeMers		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 2768 NW 76th Ave		Transaction ID: PR2194437722926
	City Ankeny	State IA	Zip Code 50023-9420
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.00
	Name of Employer FBL Financial Group	Occupation Business Center Director	P/R Deduction (\$22.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00		

B.	Full Name (Last, First, Middle Initial) Susan R Halterman		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 5698 Chatham Street		Transaction ID: PR2194734622926
	City Johnston	State IA	Zip Code 50131-8779
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.17
	Name of Employer FBL Financial Group	Occupation Director, Data Management	P/R Deduction (\$29.17 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.87		

C.	Full Name (Last, First, Middle Initial) Joel B Jacobsen		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3279 N Avenue		Transaction ID: PR2194735122926
	City Adel	State IA	Zip Code 50003-8142
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer FBL Financial Group	Occupation Vice President Underwriting	P/R Deduction (\$25.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

SUBTOTAL of Receipts This Page (optional)	▶	76.17
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: PAGE 42 / 60 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

<p>A. Full Name (Last, First, Middle Initial) Jane E Keister</p> <p>Mailing Address 604 W Walnut</p> <p>City State Zip Code Riley KS 66531-9644</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation FBL Financial Group Insurance Executive</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 275.00</p>	<p>Date of Receipt 11 / 30 / 2009</p> <p>Transaction ID: PR2194736022926</p> <p>Amount of Each Receipt this Period 25.00</p> <p>P/R Deduction (\$25.00 Monthly)</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Brain C Neitzel</p> <p>Mailing Address 560 Lookout Court</p> <p>City State Zip Code Waukee IA 50263-8435</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation FBL Financial Group Corporate Tax Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 229.24</p>	<p>Date of Receipt 11 / 30 / 2009</p> <p>Transaction ID: PR2194738222926</p> <p>Amount of Each Receipt this Period 20.84</p> <p>P/R Deduction (\$20.84 Monthly)</p>
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<p>C. Full Name (Last, First, Middle Initial) Leo M Orth, Jr</p> <p>Mailing Address 14614 Wilden Drive</p> <p>City State Zip Code Urbandale IA 50323-2070</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation FBL Financial Group Vice President research & Development</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 550.00</p>	<p>Date of Receipt 11 / 30 / 2009</p> <p>Transaction ID: PR2194743422926</p> <p>Amount of Each Receipt this Period 50.00</p> <p>P/R Deduction (\$50.00 Monthly)</p>
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SUBTOTAL of Receipts This Page (optional)	95.84
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) David E. Fiedler		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 26777 Halsted Road		Transaction ID: PR2213620422926
	City Farmington Hills	State MI	Zip Code 48331-3577
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
	Name of Employer Amerisure Companies	Occupation Director - IT Infrastructure & Service	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

B.	Full Name (Last, First, Middle Initial) James Michael Ashley		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 2300 Cabot Drive #200		Transaction ID: PR2216671722926
	City Lisle	State IL	Zip Code 60532-4618
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Amerisure Companies	Occupation Claims Facility Manager	P/R Deduction (\$10.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) David A. Sampson		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 2435 Luckett Ave		Transaction ID: PR2228336722926
	City Vienna	State VA	Zip Code 22180-6819
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 355.00
	Name of Employer Property Casualty Insurers Association	Occupation President and CEO	P/R Deduction (\$177.50 Se-mi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3345.03		

SUBTOTAL of Receipts This Page (optional)	▶	385.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 60
(check only one)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Ms. Ann Gray

Mailing Address 3309 Holly Street

City State Zip Code
Alexandria VA 22305-1824

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

Name of Employer: Property Casualty Insurers Association
Occupation: Asst to President & Director DC Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 11 / 30 / 2009
Transaction ID: PR2228782922926
Amount of Each Receipt this Period: 50.00
P/R Deduction (\$25.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
Patrick I. Leeper

Mailing Address 1134 W. Ward Parkway

City State Zip Code
Springfield MO 65810-2581

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

Name of Employer: American National Property and Casualty
Occupation: AVP-Lic & Field Perf Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 11 / 30 / 2009
Transaction ID: PR2237485022926
Amount of Each Receipt this Period: 25.00
P/R Deduction (\$25.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Kristee Ann Buff

Mailing Address 4522 State Hwy J

City State Zip Code
Rogersville MO 65742-7211

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

Name of Employer: American National Property and Casualty
Occupation: Director - Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 11 / 30 / 2009
Transaction ID: PR2243345022926
Amount of Each Receipt this Period: 25.00
P/R Deduction (\$25.00 Monthly)

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: PAGE 45 / 60
(check only one)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)
Stuart M. Paulson

Mailing Address 4781 E. Lakota Ct.

City Springfield State MO Zip Code 65809

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

Name of Employer American National Property and Casualty
Occupation Asst VP, Deputy General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 30 / 2009
Transaction ID: PR2243345422926

Amount of Each Receipt this Period 20.00

P/R Deduction (\$20.00 Monthly)

B.

Full Name (Last, First, Middle Initial)
Janet A. Clark

Mailing Address 1432. Rockingham Ave

City Nixa State MO Zip Code 65714-7649

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

Name of Employer American National Property and Casualty
Occupation Vice President - Underwriting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 30 / 2009
Transaction ID: PR2245152222926

Amount of Each Receipt this Period 25.00

P/R Deduction (\$25.00 Monthly)

C.

Full Name (Last, First, Middle Initial)
Deirdre Manna

Mailing Address 1548 Maple Avenue

City Northbrook State IL Zip Code 60062-5475

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

Name of Employer Property Casualty Insurers Association
Occupation VP Industry, Regulatory and Political

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 30 / 2009
Transaction ID: PR2247336322926

Amount of Each Receipt this Period 100.00

P/R Deduction (\$50.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► 145.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 60
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Jerry W. Jones

Mailing Address 4127 E. Crosswinds Ct.

City Springfield State MO Zip Code 65809-3526

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

Name of Employer American National Property and Casualty Occupation Vice President - Claims Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 30 / 2009

Transaction ID: PR2247624822926

Amount of Each Receipt this Period 20.00

P/R Deduction (\$20.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Mr. Scott A. Kappmeyer

Mailing Address 1054 186th Street

City Homewood State IL Zip Code 60430-3518

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

Name of Employer Property Casualty Insurers Association Occupation Vice President Finance and Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 30 / 2009

Transaction ID: PR2247688722926

Amount of Each Receipt this Period 50.00

P/R Deduction (\$25.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
Daniel J. Behrens

Mailing Address 5954 Robin Road

City Pleasant Hill State IA Zip Code 50327-2193

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

Name of Employer FBL Financial Group Occupation Claims Auditor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.24

Date of Receipt 11 / 30 / 2009

Transaction ID: PR2256796622926

Amount of Each Receipt this Period 20.84

P/R Deduction (\$20.84 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 90.84

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Greg LaCost	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1212 Sunset	Transaction ID: PR2257245122926
	City State Zip Code Mt Prospect IL 60056-4024	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Asst VP State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

B.	Full Name (Last, First, Middle Initial) Stacy Olson	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 10 2nd Street NE Suite 300	Transaction ID: PR2263458022926
	City State Zip Code Minneapolis MN 55413-2270	Amount of Each Receipt this Period 26.66
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$13.33 Semi-Monthly)
Name of Employer Austin Mutual Insurance Company	Occupation Vice President - Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.34	

C.	Full Name (Last, First, Middle Initial) Marguerite Tortorello	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 4711 North Kenmore	Transaction ID: PR2357924922926
	City State Zip Code Chicago IL 60640-5980	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$150.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Sr Vice President, Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3400.00	

SUBTOTAL of Receipts This Page (optional)	376.66
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Shannon Lee Smith	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 631 Ashton Lane	Transaction ID: PR2367233522926
	City State Zip Code South Elgin IL 60177-3713	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Monthly)
Name of Employer American National Property and Casualt	Occupation EVP-Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

B.	Full Name (Last, First, Middle Initial) Kevin P Kelly	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 3080 Eagandale Place	Transaction ID: PR2379663322926
	City State Zip Code Eagan MN 55121-2118	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Monthly)
Name of Employer FBL Financial Group	Occupation Insurance Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

C.	Full Name (Last, First, Middle Initial) Christopher I VanNote	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 15523 Oakwood Drive	Transaction ID: PR2379666222926
	City State Zip Code Urbandale IA 50323-1912	Amount of Each Receipt this Period 20.84
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.84 Monthly)
Name of Employer FBL Financial Group	Occupation Insurance Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.24	

SUBTOTAL of Receipts This Page (optional)	170.84
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 / 60
<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Ann Marie Conron-May		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1743 Sand Hollow Lane		Transaction ID: PR2379782522926
	City State Zip Code Palm Harbor FL 34683-4832	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
	Name of Employer Occupation Amerisure Companies Loss Control Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$10.00 Bi-Weekly)
	Aggregate Year-to-Date ▼ 240.00		

B.	Full Name (Last, First, Middle Initial) Andrea L Koehler		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 7691 East Claymore Court		Transaction ID: PR2379784322926
	City State Zip Code Canton MI 48187-1810	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
	Name of Employer Occupation Amerisure Companies Ass't Vice President-Financial Reporti	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$10.00 Bi-Weekly)
	Aggregate Year-to-Date ▼ 240.00		

C.	Full Name (Last, First, Middle Initial) Ann Langschieid		Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 218 South Ely Drive		Transaction ID: PR2379784622926
	City State Zip Code Northville MI 48167-2709	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00
	Name of Employer Occupation Amerisure Companies Claims Supervisor	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$10.00 Bi-Weekly)
	Aggregate Year-to-Date ▼ 240.00		

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)	PAGE 50 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Matthew Peterson		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 1203 Baywood Circle		Transaction ID: PR2379786022926		
	City Brighton	State MI	Zip Code 48116-6761	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)		
Name of Employer Amerisure Companies		Occupation Director of Finance			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

B.	Full Name (Last, First, Middle Initial) Elizabeth Hurst		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 22300 Lakeland		Transaction ID: PR2379787022926		
	City Saint Clair Shores	State MI	Zip Code 48081-3711	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)		
Name of Employer Amerisure Companies		Occupation Loss Control Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

C.	Full Name (Last, First, Middle Initial) Todd Harrison		Date of Receipt MM / DD / YYYY 11 / 30 / 2009		
	Mailing Address 5875 Gilbert Lake Road		Transaction ID: PR2379788522926		
	City Bloomfield Townshi	State MI	Zip Code 48301-1914	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$10.00 Bi-Weekly)		
Name of Employer Amerisure Companies		Occupation Director, Compensation & Benefits			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

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)	PAGE 51 / 60
	<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)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Timothy B VanDonge	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 1024 Oak Tree Drive	Transaction ID: PR2380080422926
	City State Zip Code Lawrence KS 66049-3871	Amount of Each Receipt this Period 54.55
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$54.55 Monthly)
Name of Employer Farm Bureau Mutual Insurance Company	Occupation Insurance Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 545.50	

B.	Full Name (Last, First, Middle Initial) Richard C Chambers	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address PO Box 66	Transaction ID: PR2386809222926
	City State Zip Code Waterville MN 56096-0066	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Monthly)
Name of Employer Farm Bureau Mutual Insurance Company	Occupation Insurance Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Paul Blume, JR	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 430 W. sheridan Place	Transaction ID: PR2400795622926
	City State Zip Code Lake Bluff IL 60044-2327	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Semi-Monthly)
Name of Employer Property Casualty Insurers Association	Occupation Sr VP State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	279.55
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 60
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Robert Gordon		Date of Receipt
	Mailing Address 1502 Woodacre Drive		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City McLean	State VA	Zip Code 22101-2537
	FEC ID number of contributing federal political committee. C		Transaction ID: PR2400795822926
	Amount of Each Receipt this Period 50.00		
Name of Employer Property Casualty Insurers Association		Occupation Sr VP Policy Development and Research	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) Richard A Murdock		Date of Receipt
	Mailing Address 2430 Tuscan Hills Lane		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Las Cruces	State NM	Zip Code 88011-4259
	FEC ID number of contributing federal political committee. C		Transaction ID: PR2403871922926
	Amount of Each Receipt this Period 285.72		
Name of Employer FBL Financial Group		Occupation Business Unit Vice President	P/R Deduction (\$285.72 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1714.32	

C.	Full Name (Last, First, Middle Initial) Mark Joe Davis		Date of Receipt
	Mailing Address 380 Sentry Parkway		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Blue Bell	State PA	Zip Code 19422-2357
	FEC ID number of contributing federal political committee. C		Transaction ID: PR2412362022926
	Amount of Each Receipt this Period 100.00		
Name of Employer PMA Insurance Group		Occupation President - Midlands	P/R Deduction (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	435.72
TOTAL This Period (last page this line number only)	30899.99

**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)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) The Blue Dog PAC	Transaction ID: 30785818 Date of Disbursement 11 / 02 / 2009
	Mailing Address 236 Massachusetts Ave, NE Suite 508	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name The Blue Dog PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kendrick Meek For Florida	Transaction ID: 30785833 Date of Disbursement 11 / 02 / 2009
	Mailing Address 111 Nw 183rd Street Suite 325	Amount of Each Disbursement this Period 1000.00
	City Miami State FL Zip Code 33169	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Kendrick Meek	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) David Scott For Congress	Transaction ID: 30785835 Date of Disbursement 11 / 02 / 2009
	Mailing Address 162 Hurt Street NE	Amount of Each Disbursement this Period 1000.00
	City Atlanta State GA Zip Code 30307	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. David Scott	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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

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NAME OF COMMITTEE (In Full)
Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Shelby for U.S. Senate	Transaction ID: 30785837 Date of Disbursement 11 / 02 / 2009
	Mailing Address P.O. Box 1091	Amount of Each Disbursement this Period 3000.00
	City Tuscaloosa State AL Zip Code 35403	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sena Richard Shelby	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District:	

B.	Full Name (Last, First, Middle Initial) Shelby for U.S. Senate	Transaction ID: 30785838 Date of Disbursement 11 / 02 / 2009
	Mailing Address P.O. Box 1091	Amount of Each Disbursement this Period 1000.00
	City Tuscaloosa State AL Zip Code 35403	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sena Richard Shelby	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District:	

C.	Full Name (Last, First, Middle Initial) Carper for Senate	Transaction ID: 30785839 Date of Disbursement 11 / 02 / 2009
	Mailing Address 426 C Street NE	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sena Thomas Carper	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District:	

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)

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

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial) Friends Of Charlie Wilson <hr/> Mailing Address P.O. Box 61 <hr/> City State Zip Code St. Clairsville OH 43950 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Charles Wilson <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30785840 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends of Chris Dodd <hr/> Mailing Address P.O. Box 331133 <hr/> City State Zip Code West Hartford CT 61133 <hr/> Purpose of Disbursement <hr/> Candidate Name Sena Christopher Dodd <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30785841 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Friends Of Mark Warner <hr/> Mailing Address 201 North Union Suite 350 <hr/> City State Zip Code Alexandria VA 22314 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Mark Warner <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30785862 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.	Full Name (Last, First, Middle Initial) Friends of John Tanner <hr/> Mailing Address Post Office Box 1994 <hr/> City State Zip Code Union City TN 38281 <hr/> Purpose of Disbursement <hr/> Candidate Name Repr John Tanner <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30785865 Date of Disbursement 11 / 02 / 2009 <hr/> Amount of Each Disbursement this Period 1500.00
B.	Full Name (Last, First, Middle Initial) Senate Majority Fund. <hr/> Mailing Address 507 Capitol Court, NE Suite 100 <hr/> City State Zip Code Washington DC 20002 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30785869 Date of Disbursement 11 / 02 / 2009 <hr/> Amount of Each Disbursement this Period 4000.00
C.	Full Name (Last, First, Middle Initial) Hodes For Senate <hr/> Mailing Address 379 Elm Street <hr/> City State Zip Code Manchester NH 03103 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Paul Hodes <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30785870 Date of Disbursement 11 / 02 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00

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)

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

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial) Kendrick Meek For Florida <hr/> Mailing Address 111 Nw 183rd Street Suite 325 <hr/> City Miami State FL Zip Code 33169 <hr/> Purpose of Disbursement <hr/> Candidate Name Kendrick Meek <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30812181 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Full Name (Last, First, Middle Initial) Perlmutter For Congress <hr/> Mailing Address 3440 Youngfield St #264 <hr/> City Wheat Ridge State CO Zip Code 80033 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Edwin Perlmutter <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Amount of Each Disbursement this Period 1000.00	
011 Category/ Type	Transaction ID: 30884983 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 9
Amount of Each Disbursement this Period 1500.00	011 Category/ Type
Full Name (Last, First, Middle Initial) Friends of Jim Clyburn <hr/> Mailing Address 2725 Devine Street <hr/> City Columbia State SC Zip Code 29205 <hr/> Purpose of Disbursement <hr/> Candidate Name Repr James Clyburn <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 30884983 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 0 / 2 0 0 9
Amount of Each Disbursement this Period 1500.00	011 Category/ Type

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)

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

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Boyd for Congress

Mailing Address PO Box 15703

City Tallahassee State FL Zip Code 32317

Purpose of Disbursement

011
Category/
Type

Candidate Name
Repr Allen Boyd

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 02

Transaction ID: 30884989

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

The Goodwin Committee

Mailing Address P. O. Box 27841

City Raleigh State NC Zip Code 27611

Purpose of Disbursement
Void - The Goodwin Committee

Candidate Name
Wayne Goodwin

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: 30884553

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Void - The Goodwin Committee

SUBTOTAL of Disbursements This Page (optional) ►

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