

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

Sentry Insurance Company Federal Political Action Committee

ADDRESS (number and street)

25 West Main Street

Suite 500

☐ Check if different than previously reported. (ACC)

Madison

WI

53703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00545194

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Gwidt, Paul, , ,

Signature of Treasurer

Gwidt, Paul, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Sentry Insurance Company Federal Political Action CommitteeReport Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
07		01		2026

 To:

M M	/	D D	/	Y Y Y Y Y
07		31		2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		206067.72
(b) Cash on Hand at Beginning of Reporting Period.....	197100.07	
(c) Total Receipts (from Line 19)	10552.97	118880.08
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	207653.04	324947.80
7. Total Disbursements (from Line 31)	18831.88	136126.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	188821.16	188821.16
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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Sentry Insurance Company Federal Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	2	6

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).....	8742.84	89404.56
(ii) Unitemized	1671.94	28517.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10414.78	117921.91
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10414.78	117921.91
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	138.19	958.17
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10552.97	118880.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10552.97	118880.08

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	81.88	326.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	81.88	326.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	2000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	73000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1750.00	60800.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18831.88	136126.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18831.88	136126.64

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	10414.78	117921.91
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10414.78	117921.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	81.88	326.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	81.88	326.64

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 45

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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

NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Anhalt, Peter, , ,Mailing Address 1800 Deming Way
Suite 400City
MiddletonState
WIZip Code
53562-3513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
President Personal Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111082P

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Arens, John, , ,

Mailing Address 1800 North Point Drive

City

Stevens Point

State
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Principal Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111025P

Amount of Each Receipt this Period

31.16

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Ash, Jim, , ,

Mailing Address 4400 E 53rd St

City

Davenport

State
IAZip Code
52807-3041FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
Associate Dir-Claims AMD

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111020P

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

485.76

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

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

FOR LINE NUMBER: PAGE 7 OF 45
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barthel, Tim, , ,

Mailing Address 1800 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
President - SCU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

MM / DD / YYYY
07 / 26 / 2026

Transaction ID : 3111109P

Amount of Each Receipt this Period

120.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bertagnoli, Rebecca, , ,

Mailing Address 1800 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCE

Occupation (for Individual)
Sr. Director - Commercial Lines Pricin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

MM / DD / YYYY
07 / 26 / 2026

Transaction ID : 3111085P

Amount of Each Receipt this Period

56.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Beversdorf, Brett, , ,

Mailing Address 1800 North Point Drive

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCE

Occupation (for Individual)
AVP - Aviation & Corp Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1512.00

Date of Receipt

MM / DD / YYYY
07 / 26 / 2026

Transaction ID : 3110942P

Amount of Each Receipt this Period

210.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

386.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 45
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Bittner, Susan, , ,

Mailing Address 5801 Headquarters Dr

City
PlanoState
TXZip Code
75024-6189FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Territory U/W Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111105P

Amount of Each Receipt this Period

58.48

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bunn, Jason, , ,

Mailing Address 1800 N Point Dr

City

Stevens Point

State

WI

Zip Code

54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Director Data Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111003P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Calnan, Linda, , ,

Mailing Address 1800 N Point Dr

City

Stevens Point

State

WI

Zip Code

54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
AVP-Alternative Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111047P

Amount of Each Receipt this Period

384.60

☐ Memo Item

Payroll Deduction: ()

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

483.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Carroll, Chad, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Group Director - IT Data Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110948P

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Charles, Jude, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Safety Services Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111033P

Amount of Each Receipt this Period

58.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Charney, Paul, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111077P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

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

158.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chon, Nam, , ,

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026**Transaction ID : 311071P**

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Christophel, Denise, , ,

Mailing Address 1800 N Point Dr

City

State

Zip Code

Stevens Point

WI

54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

SENTRY INSURANCE

Dir-Advanced Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026**Transaction ID : 3110974P**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Clohessy, Patrick, , ,

Mailing Address 1501 N Point Dr

City

State

Zip Code

Stevens Point

WI

54481-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Sentry Insurance

Dir-Sales-National Accts

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026**Transaction ID : 3111076P**

Amount of Each Receipt this Period

58.00

☐ Memo Item

Payroll Deduction: ()

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

208.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cloud, Michael, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Sr. Dir - Comp & Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111061P

Amount of Each Receipt this Period

160.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cole, Jamie, , ,

Mailing Address 1501 N Point Dr

City
Stevens PointState
WIZip Code
54481-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111001P

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Cole, Jeff, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
AVP - National Accounts

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111008P

Amount of Each Receipt this Period

110.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

370.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coulthurst, David, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Corporate Historian/Archivist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110968P

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cronin, John, , ,Mailing Address 25 W Main St
Ste 500City
MadisonState
WIZip Code
53703-3329FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
Associate Director Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111026P

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Deming, Jefferson, , ,Mailing Address 2602 W 24th Ave
Unit 12City
DenverState
COZip Code
80211-4833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Government Affairs Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

497.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111010P

Amount of Each Receipt this Period

66.34

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

201.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Dieffenbach, Keith, , ,Mailing Address 1800 Deming Way
Ste 400City
MiddletonState
WIZip Code
53562-3513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Agency Sales Manager Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111038P

Amount of Each Receipt this Period

28.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dietry, Mike, , ,Mailing Address 1800 Deming Way
Ste 400City
MiddletonState
WIZip Code
53562-3513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
PL National Sales Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111066P

Amount of Each Receipt this Period

61.54

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Duellman, Jason, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-Financial Analysis&Control

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111004P

Amount of Each Receipt this Period

62.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

151.54

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 45

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Feldman, Jean, , ,

Mailing Address 5540 Greyston St

City
Palm HarborState
FLZip Code
34685-1136FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111007P

Amount of Each Receipt this Period

44.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fischl, John, , ,

Mailing Address 1501 N Point Dr

City
Stevens PointState
WIZip Code
54481-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111027P

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Frank, Jim, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Chief Claims and Information Technolog

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111021P

Amount of Each Receipt this Period

384.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

478.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Frasch, Jason, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Software Engineer Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111005P

Amount of Each Receipt this Period

32.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Garza, Tamie, , ,

Mailing Address 2056 Grovetown Dr

City
BartlettState
ILZip Code
60103-1370FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
REGION MANAGER-DIRECT WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111107P

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Giese, Cody, , ,

Mailing Address 2231 Lepak Dr

City
PloverState
WIZip Code
54467-3009FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Finance Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110958P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

172.00

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

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

FOR LINE NUMBER: PAGE 16 OF 45
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Gladem, Jenny, , ,

Mailing Address 1800 Deming Way

City
Middleton

State
WI

Zip Code
53562-3512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Dir - PL Proj Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

MM / DD / YYYY
07 / 26 / 2026

Transaction ID : 3111017P

Amount of Each Receipt this Period

82.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gorski, Kyle, , ,

Mailing Address 5448 Flicker Ln

City
Stevens Point

State
WI

Zip Code
54482-9708

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Actuarial Asst Sr-P&C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

MM / DD / YYYY
07 / 26 / 2026

Transaction ID : 3111042P

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gwidt, Paul, , ,

Mailing Address 1800 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCE

Occupation (for Individual)
Dir-Fin Reporting & Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

726.90

Date of Receipt

MM / DD / YYYY
07 / 26 / 2026

Transaction ID : 3111078P

Amount of Each Receipt this Period

96.92

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

248.92

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

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

FOR LINE NUMBER: PAGE 17 OF 45
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
			☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Heare, Gerald, , ,

Mailing Address 1800 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3110990P

Amount of Each Receipt this Period

74.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Henderson, Dustin, , ,

Mailing Address 10260 SW Greenburg Rd
Ste 1050

City
Portland

State
OR

Zip Code
97223-5520

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Division Manager - Direct Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3110976P

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Herman, Beth, , ,

Mailing Address 1800 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Transportation Services Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

276.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3110935P

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

162.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hermanson, Leah, , ,Mailing Address 1800 Deming Way
Ste 400City
MiddletonState
WIZip Code
53562-3513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Director - PL Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111046P

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hernandez, Nic, , ,Mailing Address 19100 Von Karman Ave
Ste 1000City
IrvineState
CAZip Code
92612-6584FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-U/W-CL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111072P

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hoopingarner, Brett, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-UW - Direct Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1065.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110943P

Amount of Each Receipt this Period

160.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

290.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hopper, Timothy, , ,

Mailing Address 1501 N Point Dr

City
Stevens PointState
WIZip Code
54481-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
SIU Major Case Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026**Transaction ID : 3111112P**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hoyord, Charlie, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
AVP - Commercial Lines IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026**Transaction ID : 3110950P**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hyland, John, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
President Direct Writer & L&A

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2880.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026**Transaction ID : 3111028P**

Amount of Each Receipt this Period

384.00

☐ Memo Item

Payroll Deduction: ()

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

494.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. James, Mike, , ,

Mailing Address 601 Michigan Ave N

City
Stevens PointState
WIZip Code
54481-1266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
GM-SentryWorld

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111067P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Johnson, Greg, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Captain-Corp Aviation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110992P

Amount of Each Receipt this Period

48.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Kalter, John, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111029P

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

188.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kleifgen, Jeremy, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-IT Claims Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026**Transaction ID : 3111018P**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Krauter, Matt, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
VP of Lending - SCU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026**Transaction ID : 3111057P**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lagunas, Jessica, , ,Mailing Address 19100 Von Karman Ave
Ste 1000City
IrvineState
CAZip Code
92612-6584FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Claims Technical Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026**Transaction ID : 3111019P**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

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

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lamp, Kalin, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-Employee Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111034P

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lange, Susan, , ,

Mailing Address 4400 E 53rd St

City
DavenportState
IAZip Code
52807-3041FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Claims Representative II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111106P

Amount of Each Receipt this Period

34.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Larson, Greg, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
AVP-WC Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110993P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

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

124.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Leonelli, Daniel, , ,Mailing Address 100 Northfield Dr
Ste 300City
WindsorState
CTZip Code
06095-4730FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110965P

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Livermore, Mike, , ,

Mailing Address 1501 N Point Dr

City

Stevens Point

State

WI

Zip Code

54481-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
AVP-PL Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111068P

Amount of Each Receipt this Period

160.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lockery, Chris, , ,

Mailing Address 1800 N Point Dr

City

Stevens Point

State

WI

Zip Code

54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

222.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110952P

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

270.00

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

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

FOR LINE NUMBER: PAGE 24 OF 45
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lyons, Kelly, , ,

Mailing Address 1800 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Project Manager - PL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3111039P

Amount of Each Receipt this Period

32.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Marlow, Dawn, , ,

Mailing Address PO Box 428

City
Edwardsville

State
IL

Zip Code
62025-0428

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCE

Occupation (for Individual)
Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3110971P

Amount of Each Receipt this Period

90.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. McDonald, Jim, , ,

Mailing Address 1800 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCE

Occupation (for Individual)
VP-Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3111022P

Amount of Each Receipt this Period

240.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

362.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Meikle, Rob, , ,Mailing Address 26 Century Blvd
Ste 100City
NashvilleState
TNZip Code
37214-3698FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
AVP-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111088P

Amount of Each Receipt this Period

100.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Messar, Alison, , ,

Mailing Address 1800 N Point Dr

City

Stevens Point

State

WI

Zip Code

54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-IT Web & Digital Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110928P

Amount of Each Receipt this Period

44.50

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Miller, Scott, , ,

Mailing Address 1800 N Point Dr

City

Stevens Point

State

WI

Zip Code

54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
VP Segment Executive NA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1011.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111094P

Amount of Each Receipt this Period

130.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ▶

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

274.50

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

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

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(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Mitchell, Sally, , ,

Mailing Address 2 Technology Park Dr

City
Westford

State
MA

Zip Code
01886-3163

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Claims Services Specialist-NA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
07 / 26 / 2026

Transaction ID : 3111093P

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mleczko, Chris, , ,

Mailing Address 25 W Main St
Ste 500

City
Madison

State
WI

Zip Code
53703-3329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Senior Political Engagement Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

MM / DD / YYYY
07 / 26 / 2026

Transaction ID : 3110953P

Amount of Each Receipt this Period

36.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mrdutt, Jen, , ,

Mailing Address 1800 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Assoc Dir-HR Bus Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.00

Date of Receipt

MM / DD / YYYY
07 / 26 / 2026

Transaction ID : 3111012P

Amount of Each Receipt this Period

44.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 45
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nelson, Matthew, , ,

Mailing Address 1044 Bellevaux Pl

City
Saint CharlesState
MOZip Code
63301-1398FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Region Manager - Direct Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111058P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Netzing, Jeff, , ,

Mailing Address 4790 Still Meadow Ln

City
PloverState
WIZip Code
54467-4213FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111009P

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Newport, Brent, , ,

Mailing Address 5591 Cabernet Ct

City
Stevens PointState
WIZip Code
54482-8859FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
PL State Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110941P

Amount of Each Receipt this Period

52.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

142.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 45
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nimm, Sean, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
VP-Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1635.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111096P

Amount of Each Receipt this Period

230.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Noble, Tim, , ,

Mailing Address PO Box 428

City
EdwardsvilleState
ILZip Code
62025-0428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
AVP - Hortica

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1005.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111110P

Amount of Each Receipt this Period

140.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Noll, Doug, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Region Manager-Direct Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110975P

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: ()

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

420.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 45
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Nordin, Abigail, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Assoc Director-Employment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110924P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Page, Jennifer, , ,

Mailing Address 1909 Center St

City
Stevens PointState
WIZip Code
54481-3741FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111014P

Amount of Each Receipt this Period

35.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Peck, William, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Senior Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111119P

Amount of Each Receipt this Period

28.00

☐ Memo Item

Payroll Deduction: ()

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

103.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Pempek, Kalynn, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Sentry Ins Foundation Exec

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111035P

Amount of Each Receipt this Period

72.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Pfiffner, Josef, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-Software Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111031P

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Powell, David, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Captain Sr.- Corp Aviation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110969P

Amount of Each Receipt this Period

30.06

☐ Memo Item

Payroll Deduction: ()

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

152.06

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Powers, Lisa, , ,

Mailing Address 4400 E 53rd St

City
DavenportState
IAZip Code
52807-3041FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Reinspector

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111049P

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rectanus, Joe, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Claims Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111023P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Reimer, Becky, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-Financial Analysis&Control

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

203.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110934P

Amount of Each Receipt this Period

27.10

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

97.10

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Saeger, Nick, , ,

Mailing Address 1501 N Point Dr

City
Stevens PointState
WIZip Code
54481-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
AVP-Trans Products & Pricing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111075P

Amount of Each Receipt this Period

130.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schauer, Eric, , ,

Mailing Address 1800 Deming Way

City
MiddletonState
WIZip Code
53562-3512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir - PL Product Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110980P

Amount of Each Receipt this Period

44.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schemenauer, Ryan, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
CL Rate System Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111092P

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

204.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Schimke, Mike, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
AVP - Corporate Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111069P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Schmidt, Kevin, , ,

Mailing Address 135 Potomac Pl

City
OregonState
WIZip Code
53575-1046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Dir-IT-Personal Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111040P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Schroeder, Todd, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Chief Administrative Officer & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1902.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111113P

Amount of Each Receipt this Period

256.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

336.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scott, David, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Account Manager-Direct Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 31 / 2026

Transaction ID : 3111121P

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Simonson, Craig, , ,Mailing Address 10260 SW Greenburg Rd
Ste 1050City
PortlandState
ORZip Code
97223-5520FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110959P

Amount of Each Receipt this Period

70.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smith, Stephanie, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
VP-Marketing & Brand Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1395.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111102P

Amount of Each Receipt this Period

186.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

306.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Thayer, Dawn, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Actuary - Reserving - P & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110972P

Amount of Each Receipt this Period

72.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Trenzeluk, Tony, , ,Mailing Address 25 W Main St
Ste 500City
MadisonState
WIZip Code
53703-3329FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
Managing Director - Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111115P

Amount of Each Receipt this Period

92.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Vaade, Ethan, , ,Mailing Address 1800 Deming Way
Ste 400City
MiddletonState
WIZip Code
53562-3513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Sr. Director - Auto Franchise

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110983P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

204.00

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

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

FOR LINE NUMBER: PAGE 36 OF 45
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VonRueden, Cassie, , ,

Mailing Address 1501 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Assoc Actuary-P&C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3110947P

Amount of Each Receipt this Period

30.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wavrunek, Amy, , ,

Mailing Address 1501 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Director - Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3110930P

Amount of Each Receipt this Period

38.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Weis, Shelly, , ,

Mailing Address 1800 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1253

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Software Development Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

403.80

Date of Receipt

07 / 26 / 2026

Transaction ID : 3111099P

Amount of Each Receipt this Period

53.84

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

121.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 45

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Williams, Adam, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
AVP - Chief Security Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110925P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Williams, Elisha, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
VP-Strategic & Fin Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110977P

Amount of Each Receipt this Period

120.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Williams, Ranee, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Actuarial Asst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

576.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111084P

Amount of Each Receipt this Period

76.92

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

236.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wittmann, Michael, , ,

Mailing Address 1501 N Point Dr

City
Stevens PointState
WIZip Code
54481-1132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Assoc Actuary-P&C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111065P

Amount of Each Receipt this Period

80.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Worzalla, Karen, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Manager - PL Direct Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111037P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Wunrow, Gary, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
Director-PMO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110988P

Amount of Each Receipt this Period

30.78

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

150.78

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 45
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Yeiser, Rob, , ,Mailing Address 1800 Deming Way
Ste 400City
MiddletonState
WIZip Code
53562-3513FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
AVP-PL Customer & Brand Developme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111089P

Amount of Each Receipt this Period

200.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Yerington, Christina, , ,

Mailing Address 4400 E 53rd St

City
DavenportState
IAZip Code
52807-3041FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry InsuranceOccupation (for Individual)
Claims Technical Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3110955P

Amount of Each Receipt this Period

50.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Zanow, Raina, , ,

Mailing Address 1800 N Point Dr

City
Stevens PointState
WIZip Code
54481-1253FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SENTRY INSURANCEOccupation (for Individual)
ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

741.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2026

Transaction ID : 3111083P

Amount of Each Receipt this Period

140.00

☐ Memo Item

Payroll Deduction: ()

SUBTOTAL of Receipts This Page (optional)..... ►

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

390.00

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

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

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐	☐	☐	☐ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Zernicke, Geoff, , ,

Mailing Address 1501 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
Chief Commercial Lines Claims Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3110989P

Amount of Each Receipt this Period

92.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ziemanski, Bob, , ,

Mailing Address 1501 N Point Dr

City
Stevens Point

State
WI

Zip Code
54481-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Sentry Insurance

Occupation (for Individual)
SIU Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 26 / 2026

Transaction ID : 3110939P

Amount of Each Receipt this Period

40.00

☐ Memo Item

Payroll Deduction: ()

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

132.00

8742.84

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BMO HARRIS BANK NA

Mailing Address PO Box 755

City
Chicago

State
IL

Zip Code
60690-0755

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

958.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2026

Transaction ID : 3110923

Amount of Each Receipt this Period

138.19

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

138.19

138.19

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. BMO HARRIS BANK NA

Mailing Address PO Box 755

City
ChicagoState
ILZip Code
60690-0755

Purpose of Disbursement

BMO HARRIS BANK FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	1			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500077090

Amount of Each Disbursement this Period

81.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

81.88

81.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Property & Casualty Insurance Association PACMailing Address 8700 W Bryn Mawr Ave
Ste 1200SCity
ChicagoState
ILZip Code
60631-3512

Purpose of Disbursement

PAC to PAC Contribution

Candidate Name

American Property & Casualty Insurance Association PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	2	6		

FEC Identification Number

C C00066472**Transaction ID : 500077092**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INSURING MISSOURI'S FUTURE PAC

Mailing Address PO Box 1121

City
Jefferson CityState
MOZip Code
65102-1121

Purpose of Disbursement

PAC to PAC Contribution

Candidate Name

INSURING MISSOURI'S FUTURE PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	0			2	0	2	6		

FEC Identification Number

C C00955120**Transaction ID : 500077096**

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOE NEGUSE FOR CONGRESSMailing Address 660 Pennsylvania Ave SE
Ste 202City
WashingtonState
DCZip Code
20003-4357

Purpose of Disbursement

Federal Contribution

Candidate Name

NEGUSE, JOSEPH, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: CO

District: 02

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	2	6		

FEC Identification Number

C C00648253**Transaction ID : 500077095**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. SOCIETY OF AMERICAN FLORISTS POLITICAL ACTION COMMITTEEMailing Address 800 Maine Ave SW
FI 7City
WashingtonState
DCZip Code
20024-2805

Purpose of Disbursement

PAC to PAC Contribution

Candidate Name

SOCIETY OF AMERICAN FLORISTS POLITICAL ACTION COMMITTEE

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			3	0			2	0	2	6		

FEC Identification Number

C C00111302

Transaction ID : 500077091

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

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

500.00

17000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Sentry Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. Binsfeld for Senate

Mailing Address W1648 Santana Dr

City
SheboyganState
WIZip Code
53083-5547

Purpose of Disbursement

Non-Federal Contribution

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500077093

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Jennifer Winkler

Mailing Address 133 Harbor Dr S

City
VeniceState
FLZip Code
34285-2214

Purpose of Disbursement

Non-Federal Contribution

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : 500077094

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

1750.00

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

1750.00