

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Mutual of Omaha Companies PAC (IMPAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		169897.76
(b) Cash on Hand at Beginning of Reporting Period.....	182865.04	
(c) Total Receipts (from Line 19)	11821.66	88648.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	194686.70	258546.70
7. Total Disbursements (from Line 31).....	26900.00	90760.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	167786.70	167786.70
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Mutual of Omaha Companies PAC (IMPAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5442.67	37601.36
(ii) Unitemized	3878.99	48547.58
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9321.66	86148.94
(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)	9321.66	86148.94
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.....	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	11821.66	88648.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11821.66	88648.94

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24000.00	84500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	2900.00	6260.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	26900.00	90760.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26900.00	90760.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	9321.66	86148.94
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9321.66	86148.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. VP Claims Sheryl F Abegglen

Full Name (Last, First, Middle Initial)
Mailing Address Mutual of Omaha Plaza
08Claims

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation VP Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
09 / 10 / 2014
Transaction ID : A7BA9B6963382425B8A7

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

B. Stephen J Abels

Full Name (Last, First, Middle Initial)
Mailing Address Mutual of Omaha Plaza
07Individual Product

City Omaha State NE Zip Code 68175

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

Name of Employer Mutual of Omaha Occupation SVP Individual Financial Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
09 / 10 / 2014
Transaction ID : AE788F6D08AC1463DAFB

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

C. Carl T Adamson Jr

Full Name (Last, First, Middle Initial)
Mailing Address Mutual of Omaha Plaza
PLCorporate Support Svcs

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation VP Corporate Support Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
09 / 10 / 2014
Transaction ID : A404AA7B48A924FA9B69

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$30.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Deborah A Andahl
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
S1Materials Management

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Mgr Corporate Support Svcs**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 10 / 2014**

Transaction ID : A313AB18341BA4D87882

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$30.00/Monthly

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

Mailing Address **Mutual of Omaha Plaza**
11Market Conduct

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Regulatory Issues Analyst**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 10 / 2014**

Transaction ID : A314C1E3E6D634FE2954

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$30.00/Monthly

C. Richard C Anderl
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
03Law Operation

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **EVP & General Counsel**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **810.00**

Date of Receipt **09 / 10 / 2014**

Transaction ID : A381E976104FF4D32986

Amount of Each Receipt this Period **100.00**

Payroll Deduction: \$100.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ **160.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Timothy S Ault
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
04Benefit Solutions Admin

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **SVP Benefit Solutions**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 10 / 2014**
Transaction ID : A4CC47CEBE0154B5A866

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$30.00/Monthly

B. Barbara J Bergmeier
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
12Internal Audit Admin

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Chief Internal Auditor**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt **09 / 10 / 2014**
Transaction ID : AFD39BAFE69864BAC916

Amount of Each Receipt this Period **60.00**

Payroll Deduction: \$60.00/Monthly

C. James T Blackledge
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
12IS Operation

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **EVP Chf Inf Ofcr/Chf Risk Ofcr**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt **09 / 10 / 2014**
Transaction ID : A7E18B8210B9045038BB

Amount of Each Receipt this Period **100.00**

Payroll Deduction: \$100.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ **190.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Alan Brinkman
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
05Valuation I

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation VP and Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
MM / DD / YYYY
09 / 10 / 2014

Transaction ID : ADA79B018314A42D692F

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

B. John A Brown
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
02IS Infrastructure & Operations

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation SVP I/S Applications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
MM / DD / YYYY
09 / 10 / 2014

Transaction ID : AEC34A7556EE64E27A6B

Amount of Each Receipt this Period
75.00

Payroll Deduction: \$75.00/Monthly

C. Kathleen J Brown
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
08Claims Support Services

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Director Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
MM / DD / YYYY
09 / 10 / 2014

Transaction ID : A52157DB6AAB045DFBFE

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$30.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... **140.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Rachelle L Bruning
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
03Policyowner Services

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **VP Policyowner Services**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **09 / 10 / 2014**

Transaction ID : A91FOAE7737D7456DB31

Amount of Each Receipt this Period **35.00**

Payroll Deduction: \$35.00/Monthly

B. Penny E Bryant
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
06Dist Comp-Administration

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Business Systems Consultant**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt **09 / 10 / 2014**

Transaction ID : AA400AC791B5B4AC786F

Amount of Each Receipt this Period **60.00**

Payroll Deduction: \$60.00/Monthly

C. Curtis R Caldwell
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
04Securities Sourcing & Trading

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **SVP Priv Inv Sourcing & Trdng**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **09 / 10 / 2014**

Transaction ID : AD2A597307CDC4C1195F

Amount of Each Receipt this Period **50.00**

Payroll Deduction: \$50.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... **145.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

Full Name (Last, First, Middle Initial) A. Harry L Capadano III		Date of Receipt MM / DD / YYYY 09 / 10 / 2014 Transaction ID : A220E513D8DCD4B6EB3D
Mailing Address Mutual of Omaha Plaza 03Law-Corporate Services		Amount of Each Receipt this Period 25.00
City Omaha	State NE	Zip Code 68175-0001
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$25.00/Monthly
Name of Employer Mutual of Omaha	Occupation Associate General Counsel III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Kurt S Christiansen		Date of Receipt MM / DD / YYYY 09 / 10 / 2014 Transaction ID : A2BF747B770D74306A60
Mailing Address Mutual of Omaha Plaza 05Corporate Tax		Amount of Each Receipt this Period 55.00
City Omaha	State NE	Zip Code 68175-0001
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$55.00/Monthly
Name of Employer Mutual of Omaha	Occupation SVP Corporate Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.00	

Full Name (Last, First, Middle Initial) C. John D Clark		Date of Receipt MM / DD / YYYY 09 / 10 / 2014 Transaction ID : A4813F0564DF84FE39DF
Mailing Address Mutual of Omaha Plaza OSBank-Florida Administration		Amount of Each Receipt this Period 40.00
City Omaha	State NE	Zip Code 68175-0001
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$40.00/Monthly
Name of Employer Mutual of Omaha	Occupation Area President I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Chandra J Coleman
Full Name (Last, First, Middle Initial)
Mailing Address Mutual of Omaha Plaza
05Valuation I
City Omaha State NE Zip Code 68175-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer Mutual of Omaha Occupation Financial Actuarial Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **315.00**

Date of Receipt
09 / 10 / 2014
Transaction ID : A69C420BEC80045A791C
Amount of Each Receipt this Period **35.00**
Payroll Deduction: \$35.00/Monthly

B. Kenneth R Cook
Full Name (Last, First, Middle Initial)
Mailing Address Mutual of Omaha Plaza
01ECRC
City Omaha State NE Zip Code 68175-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer Mutual of Omaha Occupation President East Campus Realty
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **495.00**

Date of Receipt
09 / 10 / 2014
Transaction ID : AA752A4B852174D63982
Amount of Each Receipt this Period **55.00**
Payroll Deduction: \$55.00/Monthly

C. Robert C Corn
Full Name (Last, First, Middle Initial)
Mailing Address Mutual of Omaha Plaza
11Corporate Compliance & Ethics
City Omaha State NE Zip Code 68175-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer Mutual of Omaha Occupation Dir Regulatory Relations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **315.00**

Date of Receipt
09 / 10 / 2014
Transaction ID : AC8D9ACC21E48494EAD3
Amount of Each Receipt this Period **35.00**
Payroll Deduction: \$35.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... **125.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 44
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. John A Corrieri
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
10RPD 401K Product Line

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **VP 401k**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A77EE5571B9654C8AB88

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

B. John R Cox
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
SPBank-Credit Admin

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Chief Credit Officer**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A061F2693AB0C4D8B9D5

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

c. Helen R Curry
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
11Policy and Advertising Filing

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Mgr Prod & Filing Compliance**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A1F628E0FF9C3448DA6A

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ **125.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. David Diamond
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
12Finance Operation

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **EVP CFO & Treasurer**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.03**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2014

Transaction ID : A6FB829351D184D7E95B

Amount of Each Receipt this Period
166.67

Payroll Deduction: \$166.67/Monthly

B. Kevin A Engelkamp
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
03IFS QA & Test Support

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Sr Quality Assurance Analyst**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2014

Transaction ID : AAC8480E0BF9D43FEA22

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

C. Kevin R Fenster
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
PLCorporate Support Svcs

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Mgr Bus Continuity&Records Mgt**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
09 / 10 / 2014

Transaction ID : AAF6DFF87A6004B76A7A

Amount of Each Receipt this Period
60.00

Payroll Deduction: \$60.00/Monthly

SUBTOTAL of Receipts This Page (optional).....▶	261.67
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Mutual of Omaha Companies PAC (IMPAC)

A. Kimberly E Fischer
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 03IFS QA & Test Support
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation QA Test Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 09 / 10 / 2014
Transaction ID : A6CD53CDFAF644E14948
 Amount of Each Receipt this Period 35.00
 Payroll Deduction: \$35.00/Monthly

B. John M Fischer
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 10RPD Inst Invest Product Line
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Ret Plan Product Line Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 09 / 10 / 2014
Transaction ID : AB53402B94CB54B8698C
 Amount of Each Receipt this Period 35.00
 Payroll Deduction: \$35.00/Monthly

C. Stephen C Fisher
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 03Litigation-Insurance Services
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Associate General Counsel III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 09 / 10 / 2014
Transaction ID : A19F715C516604858A89
 Amount of Each Receipt this Period 55.00
 Payroll Deduction: \$55.00/Monthly

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Debra K Frazier
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
08IFS BA's

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Sr Project Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
09 / 10 / 2014
Transaction ID : **A94707880D64E4138930**

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

B. Diana C Fuller
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
11Investigations & Bus. Conduct

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Compliance & Ethics Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
09 / 10 / 2014
Transaction ID : **A3186B642517F49F29C2**

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

C. Darlene R Grandia
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
02IS Enterprise Arch - Team 3

City Omaha State NE Zip Code 68175

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

Name of Employer Mutual of Omaha Occupation Sr Tech Solution Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt
09 / 10 / 2014
Transaction ID : **A2510B7EF2C6A4BA197F**

Amount of Each Receipt this Period
60.00

Payroll Deduction: \$60.00/Monthly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

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

Mailing Address Mutual of Omaha Plaza
05Group Field Compensation Admin

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Mgr Distribution Compensation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AB88861EC4AFC40EDAD9

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

B. Lance D Grigsby
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
05Corporate Actuarial

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation SVP & Corp Chief Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A2FDFA053345946558E4

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

C. Kevin C Hale
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
OSBank-Community Bank Exec Admin

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation EVP Chief Lending Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AB551EC77752D4213B3F

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... **125.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Stephen T Hannah
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
OSGrp Sales Eastern Region

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Regional Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
MM / DD / YYYY
09 / 10 / 2014

Transaction ID : A468384FE20634509946

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

B. Victor N Hanson
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
04Investment Credit Risk Mgmt

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Dir Credit Risk Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
MM / DD / YYYY
09 / 10 / 2014

Transaction ID : A6CF0F0D4C7154150802

Amount of Each Receipt this Period
25.00

Payroll Deduction: \$25.00/Monthly

C. John L Haver
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
07Individual Producer Sales

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation SVP Individual Producer Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt
MM / DD / YYYY
09 / 10 / 2014

Transaction ID : A73B6912C5C0E465BBDC

Amount of Each Receipt this Period
60.00

Payroll Deduction: \$60.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... **140.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Marjorie J Heller
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
S1Mutual of Omaha Bank Admin

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AF8C8D6995E664B04B05

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

B. Judith A Henderson
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
02IS Enterprise Solutions

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation SVP I/S Applications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A6697224309BD4553B13

Amount of Each Receipt this Period
60.00

Payroll Deduction: \$60.00/Monthly

C. Bruce W Henricks
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
06Individual Underwriting

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation VP & Medical Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A2CDB5AD8EB22429199A

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$30.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... **125.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 44
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Dee A Henry
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
05Corporate Accounting

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation SVP Corporate Accounting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **09 / 10 / 2014**

Transaction ID : ADBCDEF58E3464485F

Amount of Each Receipt this Period **35.00**

Payroll Deduction: \$35.00/Monthly

B. Scott L Herchenbach
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
10RPD Retirement Plans

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation SVP Retirement Plans

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **09 / 10 / 2014**

Transaction ID : A4B8D4CFD2E9D40E9858

Amount of Each Receipt this Period **35.00**

Payroll Deduction: \$35.00/Monthly

C. Robert G Herrera
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
02IS Administration

City Omaha State NE Zip Code 68175

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

Name of Employer Mutual of Omaha Occupation Sr Business Systems Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 10 / 2014**

Transaction ID : A27D5D4389AB04BE2846

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$30.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... **100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. John H Hildenbiddle III
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 09Brand Management-PR
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation SVP BrandMgmt/Public Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 09 / 10 / 2014
Transaction ID : A7334B524209C404C913
 Amount of Each Receipt this Period 55.00
 Payroll Deduction: \$55.00/Monthly

B. Michael E Huss
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 03Law-Corporate Services
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Deputy General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 09 / 10 / 2014
Transaction ID : ACDDDC0267FC64C6DBAE
 Amount of Each Receipt this Period 34.00
 Payroll Deduction: \$34.00/Monthly

C. Jason T Jarzynka
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 04Grp Product Performance
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation VP and Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 09 / 10 / 2014
Transaction ID : A0CDEE3FC35874FC1B3A
 Amount of Each Receipt this Period 35.00
 Payroll Deduction: \$35.00/Monthly

SUBTOTAL of Receipts This Page (optional).....▶ 124.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Linda K Johnson
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
02IS HR Systems

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Business Systems Consultant**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AF8908AFD82EF45F282D

Amount of Each Receipt this Period
40.00

Payroll Deduction: \$40.00/Monthly

B. John J Kaspar
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
04Grp Actuarial A

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Product Performance Director**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1503.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A4DB7B6FAE9E84964AB6

Amount of Each Receipt this Period
167.00

Payroll Deduction: \$167.00/Monthly

C. Paul T Keller
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
11Financial & Oper Audit 1

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Sr Fin/Oper Auditor**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AF0D7406EE146419AB08

Amount of Each Receipt this Period
25.00

Payroll Deduction: \$25.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ **232.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Daniel J Kennelly
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
11Corporate Compliance & Ethics

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **VP Chf Compl & Ethics Officer**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AF5A8E836C4444A6B818

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

B. Kent Knudsen
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
04Securities Risk Mgmt

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **SVP Securities Risk Management**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A42008F9957744688A6A

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

C. Jay L Kruger
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
04Portfolio Strategies & Mgmt

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Dir Structd Secur Portf Mgmt**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AB1ED42236E3F4EF692C

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ **165.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 44
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Mary L Kuhn
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 07Distribution Sppt & Operations
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Dir Distribution Sppt & Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 09 / 10 / 2014
Transaction ID : A89C5D726F074FCF834
 Amount of Each Receipt this Period 45.00
 Payroll Deduction: \$45.00/Monthly

B. Stefanie J Laguzza
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 01IS Command Center-Assist Ctr
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Command Center Team Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 09 / 10 / 2014
Transaction ID : AD0D8B75F303E419B8DC
 Amount of Each Receipt this Period 35.00
 Payroll Deduction: \$35.00/Monthly

C. Jean M Lane
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 BFInbound Mail
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Supv Support Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 09 / 10 / 2014
Transaction ID : A95F4AC72C60549098AC
 Amount of Each Receipt this Period 55.00
 Payroll Deduction: \$55.00/Monthly

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Daniel A Langer
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
03Premium Services

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Dir Policyowner Operations**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AFE9F736489B9406C9F6

Amount of Each Receipt this Period
25.00

Payroll Deduction: \$25.00/Monthly

B. Michelle A Lebens
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
06IFS Business Info & Prit Mgmt

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **SVP Business Info&Project Mgmt**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A55234C0EBE1A4B568BF

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

C. Michael A Lechtenberger
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
02IS SBU Solutions

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **SVP I/S Applications**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A85098CE9BDDD4D23BD3

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... **115.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Ronald J Lee
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 07Advanced Markets
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Director Advanced Markets
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 09 / 10 / 2014
Transaction ID : A33DFD7D2FA624F0FA14
 Amount of Each Receipt this Period 35.00
 Payroll Deduction: \$35.00/Monthly

B. Mark A Lyons
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 07Brokerage Sales Life
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 09 / 10 / 2014
Transaction ID : AA0686FD9226E47E4BAD
 Amount of Each Receipt this Period 60.00
 Payroll Deduction: \$60.00/Monthly

C. Sandra L Maass Thelen
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 03Law-Corporate Services
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Associate General Counsel III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt
 09 / 10 / 2014
Transaction ID : A9893939A55DA41459B6
 Amount of Each Receipt this Period 55.00
 Payroll Deduction: \$55.00/Monthly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 44
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Lisa W Marshall
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
PLIS Privacy & Security Complan

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Info Services Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
09 / 10 / 2014
Transaction ID : A82A2CFD90F8840F7A76

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$30.00/Monthly

B. Daniel P Martin
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
12Group Benefit Services

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation EVP Group Benefit Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1530.00**

Date of Receipt
09 / 10 / 2014
Transaction ID : AE666E3897EB641BEAFF

Amount of Each Receipt this Period
170.00

Payroll Deduction: \$170.00/Monthly

C. Elizabeth A Mazzotta
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
PLHuman Resources

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt
09 / 10 / 2014
Transaction ID : A727C7EF9FAEC4143B8B

Amount of Each Receipt this Period
60.00

Payroll Deduction: \$60.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... **260.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

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

Mailing Address Mutual of Omaha Plaza
04BSD Training & Support

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Mgr Training Svcs and Progs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.00

Date of Receipt
09 / 10 / 2014
Transaction ID : **A578E2CBAD4D847F2992**

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

B. Kathryn L Mellor
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
06IFS Prod Proc & Proj Mgmt

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation VP Process & Project Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
09 / 10 / 2014
Transaction ID : **A20E842EE592F4A85A35**

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

C. James R Milhiser
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
OSBank-Inland Empire Market

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Comm Real Estate Bnkr III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
09 / 10 / 2014
Transaction ID : **AA3796D039100488BBFB**

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Patrick M Miner
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 04Portfolio Strategies & Mgmt
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation SVP Inv Prtfllo Strtges & Mgmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **495.00**

Date of Receipt **09 / 10 / 2014**
Transaction ID : AAAAF7CD079934A08981
 Amount of Each Receipt this Period **55.00**
 Payroll Deduction: \$55.00/Monthly

B. Julie M Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 04Group Officers - Support
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Dir GBS Planning & Opers
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **324.00**

Date of Receipt **09 / 10 / 2014**
Transaction ID : A9A3BC4E7322442DE86A
 Amount of Each Receipt this Period **36.00**
 Payroll Deduction: \$36.00/Monthly

C. Daniel P Neary
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 12Chairman Of The Board And CEO
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Chrnm Of The Board&CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3753.00**

Date of Receipt **09 / 10 / 2014**
Transaction ID : A9AB6847C3E3B498AAD1
 Amount of Each Receipt this Period **417.00**
 Payroll Deduction: \$417.00/Monthly

SUBTOTAL of Receipts This Page (optional).....	508.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Kathleen P Olson
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 09Communications & PR
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation VP Comm & Public Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 09 / 10 / 2014
Transaction ID : AE3D19ED6665E434DAF6
 Amount of Each Receipt this Period 35.00
 Payroll Deduction: \$35.00/Monthly

B. John R OMalley
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 07Partnership Marketing
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Dir Nat'l Ptnrshp Sls&Mktg Svc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 09 / 10 / 2014
Transaction ID : A83219B4E7B694AC3A46
 Amount of Each Receipt this Period 35.00
 Payroll Deduction: \$35.00/Monthly

C. Patrick S Osborne
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 09Graphic Design
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Lead Graphic Designer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 10 / 2014
Transaction ID : A99891F249F75484D957
 Amount of Each Receipt this Period 30.00
 Payroll Deduction: \$30.00/Monthly

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 OF 44
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

Full Name (Last, First, Middle Initial) A. Gregory S Peterson		Date of Receipt MM / DD / YYYY 09 / 10 / 2014 Transaction ID : A0F26919C3F3C465CA07
Mailing Address Mutual of Omaha Plaza OSBank-CA Administration		Amount of Each Receipt this Period 35.00 Payroll Deduction: \$35.00/Monthly
City Omaha	State NE	Zip Code 68175-0001
FEC ID number of contributing federal political committee. C		
Name of Employer Mutual of Omaha	Occupation Area President I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) B. Amber L Rinehart		Date of Receipt MM / DD / YYYY 09 / 10 / 2014 Transaction ID : AD6952FA49FBF49618E0
Mailing Address Mutual of Omaha Plaza 06Med Supp Product Performance		Amount of Each Receipt this Period 35.00 Payroll Deduction: \$35.00/Monthly
City Omaha	State NE	Zip Code 68175
FEC ID number of contributing federal political committee. C		
Name of Employer Mutual of Omaha	Occupation VP and Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) C. Ernest L Rongish		Date of Receipt MM / DD / YYYY 09 / 10 / 2014 Transaction ID : A3FDA4826197949E7912
Mailing Address Mutual of Omaha Plaza 06L & A Product Performance		Amount of Each Receipt this Period 35.00 Payroll Deduction: \$35.00/Monthly
City Omaha	State NE	Zip Code 68175
FEC ID number of contributing federal political committee. C		
Name of Employer Mutual of Omaha	Occupation VP and Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts This Page (optional).....▶	105.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Andrew B Rouillard
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
09Brand Mgmt Admin

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **VP Brand Mgmt & Advertising**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A6DBACB48DA834843B07

Amount of Each Receipt this Period
40.00

Payroll Deduction: \$40.00/Monthly

B. Richard C Rychly Jr
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
05IFS Rptg & Analysis

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **Financial Analyst III**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AFC7F8DF4C0AD4035BF8

Amount of Each Receipt this Period
40.00

Payroll Deduction: \$40.00/Monthly

C. Stacy A Scholtz
Full Name (Last, First, Middle Initial)

Mailing Address **Mutual of Omaha Plaza**
12Corporate Operations

City **Omaha** State **NE** Zip Code **68175-0001**

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

Name of Employer **Mutual of Omaha** Occupation **EVP Corporate Operations**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1800.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : ADFEF8C29DD1B4074A60

Amount of Each Receipt this Period
200.00

Payroll Deduction: \$200.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ **280.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Kris A Scoone
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
OSBank-Treasury Svcs Florida

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Sr Treasury Svcs Sls Conslnt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 10 / 2014
Transaction ID : A9956A86D828E4B7BB31

Amount of Each Receipt this Period
25.00

Payroll Deduction: \$25.00/Monthly

B. Dwayne W Sieck
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
S1Mutual of Omaha Bank Admin

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Chief Risk Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
09 / 10 / 2014
Transaction ID : A0EE9D70943614FA492E

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

C. Daniel N Smith III
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
OSRPD Institutional Sales

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Natl Sales Dir-Inst Products

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
09 / 10 / 2014
Transaction ID : A95D8E34F0C7B4444942

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Roger C Snyder
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
02IS Desktop Systems Engineering

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Assoc Systems Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A1D12809BD8CE4545896

Amount of Each Receipt this Period
35.00

Payroll Deduction: \$35.00/Monthly

B. Ann C Tanis
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
07SSC Mgmt & Suppt

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Dir Sales & Solution Center

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : AAA526750668E4267B2B

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$30.00/Monthly

C. Melissa S Taylor
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
OSWashington DC Office - Mgr

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation VP Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **915.00**

Date of Receipt
09 / 10 / 2014

Transaction ID : A905212EC298D47B0BB0

Amount of Each Receipt this Period
115.00

Payroll Deduction: \$115.00/Monthly

SUBTOTAL of Receipts This Page (optional).....	180.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Galen F Ullstrom
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 03State Government Relations
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation SVP State Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 09 / 10 / 2014
Transaction ID : AF682D580787D40E09F6
 Amount of Each Receipt this Period 60.00
 Payroll Deduction: \$60.00/Monthly

B. Leslie J VanderVeen
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 04Portfolio Strategies & Mgmt
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Dir Public Bond Portfolio Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 10 / 2014
Transaction ID : A724F7A1B99F14A4BAE2
 Amount of Each Receipt this Period 25.00
 Payroll Deduction: \$25.00/Monthly

C. Michael C Weekly
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 12Individual Financial Services
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation EVP Individual Financial Svcs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1503.00

Date of Receipt 09 / 10 / 2014
Transaction ID : A073733CDA5BB4E4ABFB
 Amount of Each Receipt this Period 167.00
 Payroll Deduction: \$167.00/Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ 252.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 44
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Gary L Wehenkel
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 05IS Finance & Corporate Apps
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Info Services Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **495.00**

Date of Receipt
 09 / 10 / 2014
Transaction ID : AAD1AB469FAC4428EB2A
 Amount of Each Receipt this Period **55.00**
 Payroll Deduction: \$55.00/Monthly

B. Thomas R Whalen
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 PLIS Security Control
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation Info Services Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **495.00**

Date of Receipt
 09 / 10 / 2014
Transaction ID : A8AF5B8A0C512421ABE7
 Amount of Each Receipt this Period **55.00**
 Payroll Deduction: \$55.00/Monthly

C. Michael D Wilkins
 Full Name (Last, First, Middle Initial)
 Mailing Address Mutual of Omaha Plaza
 06Individual Underwriting
 City Omaha State NE Zip Code 68175-0001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mutual of Omaha Occupation VP & Medical Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **301.00**

Date of Receipt
 09 / 10 / 2014
Transaction ID : AD9052F8BD6AB4E5EA8C
 Amount of Each Receipt this Period **35.00**
 Payroll Deduction: \$35.00/Monthly

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Richard A Witt
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
04Investment Management

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation EVP Chief Investment Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2025.00

Date of Receipt
09 / 10 / 2014
Transaction ID : ADA96A680022440AE8F7

Amount of Each Receipt this Period
225.00

Payroll Deduction: \$225.00/Monthly

B. Martha K Zajicek
Full Name (Last, First, Middle Initial)

Mailing Address Mutual of Omaha Plaza
03Law-Corporate Services

City Omaha State NE Zip Code 68175-0001

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

Name of Employer Mutual of Omaha Occupation Associate General Counsel II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
09 / 10 / 2014
Transaction ID : A3ACADB31114C45EC898

Amount of Each Receipt this Period
55.00

Payroll Deduction: \$55.00/Monthly

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	5442.67

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

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

FOR LINE NUMBER: PAGE 38 OF 44
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

A. Full Name (Last, First, Middle Initial)
ERISA INDUSTRY COMMITTEE POLITICAL ACTION COMMITTEE; THE (ERIC PAC)

Mailing Address 1400 L STREET NW SUITE 350

City Washington State DC Zip Code 20005-3597

FEC ID number of contributing federal political committee. **C** C00415505

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : AC8C8AD12DC1E4FB0B1/

Amount of Each Receipt this Period
 2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	2500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Mutual of Omaha Companies PAC (IMPAC)

Full Name (Last, First, Middle Initial)

A. AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	4

Mailing Address 101 CONSTITUTION AVE., NW
SUITE 700

Transaction ID : B1BE9AEBB6FE042B683B

City WASHINGTON State DC Zip Code 20001

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Other2014

State: District:

Full Name (Last, First, Middle Initial)

B. CAPITO FOR WEST VIRGINIA

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	4

Mailing Address PO BOX 11519

Transaction ID : BA547D28518784617B6D

City CHARLESTON State WV Zip Code 25339

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Purpose of Disbursement

Category/ Type

Candidate Name

Shelley Moore Capito

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District:

Full Name (Last, First, Middle Initial)

C. CORY GARDNER FOR SENATE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	4

Mailing Address 9227 E. LINCOLN AVE., #200-234

Transaction ID : B8E965AFF638C43829DE

City LONE TREE State CO Zip Code 80124

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Purpose of Disbursement

Category/ Type

Candidate Name

Cory Gardner

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District:

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

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MARK WARNER

Mailing Address 201 NORTH UNION STREET SUITE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name
Sen. Mark R. Warner

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: VA District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : B38A5F295B088428994D

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JONI ERNST FOR SENATE INC

Mailing Address PO BOX 93441

City DES MOINES State IA Zip Code 50393

Purpose of Disbursement

Candidate Name
Joni K Ernst

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: IA District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : B651B283FD2274DC1BF9

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. MCFADDEN FOR SENATE

Mailing Address PO BOX 4039

City SAINT PAUL State MN Zip Code 55104

Purpose of Disbursement

Candidate Name
Michael Mcfadden

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MN District:

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : BAE115D6DD4064ED69C9

Amount of Each Disbursement this Period

2000.00

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

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

5500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

Full Name (Last, First, Middle Initial)

A. PAT ROBERTS FOR US SENATE INC

Mailing Address PO BOX 433

City State Zip Code
Great Bend KS 67530-0433

Purpose of Disbursement

Candidate Name
Sen. Pat Roberts

Office Sought: House
 Senate
 President
State: KS District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 / 08 / 2014

Transaction ID : **BE942D6DFDD7B465582A**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ROUNDS FOR SENATE

Mailing Address PO BOX 250

City State Zip Code
PIERRE SD 57501

Purpose of Disbursement

Candidate Name
Marion Michael Rounds

Office Sought: House
 Senate
 President
State: SD District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 / 04 / 2014

Transaction ID : **B2134BBB797E54724BF6**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. STEVE DAINES FOR MONTANA

Mailing Address PO BOX 1598

City State Zip Code
HELENA MT 59624

Purpose of Disbursement

Candidate Name
Rep. Steve Daines

Office Sought: House
 Senate
 President
State: MT District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
09 / 04 / 2014

Transaction ID : **BE5BB701FAD114E38852**

Amount of Each Disbursement this Period

2500.00

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

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

6000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

Full Name (Last, First, Middle Initial)

A. TEXANS FOR SENATOR JOHN CORNYN INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2014

Mailing Address PO BOX 13026

Transaction ID : B59AD74FEF7E8402CB98

City AUSTIN State TX Zip Code 78711

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement

Category/ Type

Candidate Name

Sen. John Cornyn III

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: TX District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

2500.00

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

24000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

Full Name (Last, First, Middle Initial)

A. Bob Krist for Legislature

Mailing Address 2335 North 102nd Street

City Omaha State NE Zip Code 68134-5527

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2014

Transaction ID : BE727F9999824424F97E

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. Doug Peterson for Attorney General

Mailing Address 11205 Wright Circle
Suite 220

City Omaha State NE Zip Code 68144-4719

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Transaction ID : BC41C41A10F4247FFA0C

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. John McCollister for Legislature

Mailing Address 8010 Hicory Street

City Omaha State NE Zip Code 68124-1431

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2014

Transaction ID : B47E456D236444DD0872

Amount of Each Disbursement this Period

500.00

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

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

1200.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Mutual of Omaha Companies PAC (IMPAC)

Full Name (Last, First, Middle Initial)

A. Joni Craighead for Legislature

Mailing Address 11421 Davenport

City Omaha State NE Zip Code 68154-2526

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : B96CDD856A45F4081AC3

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Matt Williams for Legislature

Mailing Address 900 Lake Avenue
P.O. Box 81

City Gothenburg State NE Zip Code 69138-1944

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : BFE75746B3014404999C

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Merc Riepe for Legislature

Mailing Address 6232 South 79th Circle

City Ralston State NE Zip Code 68127-4270

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 08 / 2014

Transaction ID : B37D89BDA7E2C40B28DE

Amount of Each Disbursement this Period

500.00

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

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

1500.00

2700.00