

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

Office Use Only

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

12FE4M5

Liberty Mutual Insurance Company - PAC

ADDRESS (number and street)

175 Berkeley Street

Check if different
than previously
reported. (ACC)

Boston

MA

02116

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00171843

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Georgantas, David, , ,

Signature of Treasurer

Georgantas, David, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

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

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Liberty Mutual Insurance Company - PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2026		40324.98
(b) Cash on Hand at Beginning of Reporting Period.....	68424.24	
(c) Total Receipts (from Line 19)	31445.90	298682.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	99870.14	339007.42
7. Total Disbursements (from Line 31)	0.00	239137.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	99870.14	99870.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Liberty Mutual Insurance Company - PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	2	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	30198.98	257264.01
(ii) Unitemized	1246.92	39181.15
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	31445.90	296445.16
(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)	31445.90	296445.16
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	2237.28
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))	31445.90	298682.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	31445.90	298682.44

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	2237.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2237.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	218000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	18900.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	239137.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	239137.28

DETAILED SUMMARY PAGE
of Disbursements

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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)	31445.90	296445.16
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31445.90	296445.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	2237.28
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	2237.28

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

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

FOR LINE NUMBER: PAGE 6 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Amante, Joseph, M, ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Manager, Real Estate & WPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463138646143

Amount of Each Receipt this Period

80.00

☐ Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

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

B. Carpenter, Richard, L, ,

Mailing Address 7900 Windrose Ave

City
Plano

State
TX

Zip Code
75024-0266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Underwriting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.41

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463144546143

Amount of Each Receipt this Period

32.14

☐ Memo Item

P/R Deduction (\$16.07 Bi-Weekly)

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

C. Lovvoll, Thomas, , ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director III, Taxation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1582.28

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463144746143

Amount of Each Receipt this Period

188.30

☐ Memo Item

P/R Deduction (\$94.15 Bi-Weekly)

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

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

300.44

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Hensley, Angela, M, ,Mailing Address 12900 North Meridian Street
Ste 200City
CarmelState
INZip Code
46032-5476FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Claims Field Mgr, Property

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463147346143

Amount of Each Receipt this Period

77.30

☐ Memo Item

P/R Deduction (\$38.65 Bi-Weekly)

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

B. Kerrick, DeAnna, J, ,

Mailing Address 7900 Windrose Ave

City
PlanoState
TXZip Code
75024-0418FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Mgr, Agency Experience

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463147746143

Amount of Each Receipt this Period

71.70

☐ Memo Item

P/R Deduction (\$35.85 Bi-Weekly)

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

C. Allison, Lee, A, ,Mailing Address 1200 Corporate Dr
Ste 220City
Vestavia HlsState
ALZip Code
35242-2924FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Manager II, P/L Agency Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

716.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463149646143

Amount of Each Receipt this Period

85.46

☐ Memo Item

P/R Deduction (\$42.73 Bi-Weekly)

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

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

234.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Green, David, M, ,

Mailing Address 215 North 2nd Avenue Southwest

City
TumwaterState
WAZip Code
98512-6553FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Director, Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463149746143

Amount of Each Receipt this Period

56.26

☐ Memo Item

P/R Deduction (\$28.13 Bi-Weekly)

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

B. Garcia, Christopher, L, ,Mailing Address 1990 North California Blvd
Suite 620City
Walnut CreekState
CAZip Code
94596-3744FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Regional Surety Underwriting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.07

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463150446143

Amount of Each Receipt this Period

87.38

☐ Memo Item

P/R Deduction (\$43.69 Bi-Weekly)

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

C. Estrada, Myrna, L, ,

Mailing Address 7900 Windrose Ave

City
PlanoState
TXZip Code
75024-0266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Regional General Manager, IA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463151446143

Amount of Each Receipt this Period

109.26

☐ Memo Item

P/R Deduction (\$54.63 Bi-Weekly)

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

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

252.90

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Vizyak, Sean, J. ,Mailing Address 10800 E Geddes Ave
Ste 170City
EnglewoodState
COZip Code
80112-3893FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Senior Director I, Claims Process

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1168.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463152146143

Amount of Each Receipt this Period

139.20

☐ Memo Item

P/R Deduction (\$69.60 Bi-Weekly)

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

B. Anderson, Scott, D. ,Mailing Address 1001 4th Ave
Fls 4, 8-13, 17-18, 21-28, 31, 33,City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Actuary STP I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463152646143

Amount of Each Receipt this Period

31.76

☐ Memo Item

P/R Deduction (\$15.88 Bi-Weekly)

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

C. Rizkalla, Hani, , ,Mailing Address 1001 4th Ave
Fls 4, 8-13, 17-18, 21-28, 31, 33,City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Surety Segment President, Global Risks

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1298.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463153546143

Amount of Each Receipt this Period

154.80

☐ Memo Item

P/R Deduction (\$77.40 Bi-Weekly)

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

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

325.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Mirza, Hamid, , ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
President, US Retail Markets

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463154146143

Amount of Each Receipt this Period

500.00

☐ Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

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

B. Haza, Kimberly, A, ,

Mailing Address 1001 4th Ave

Fls 4, 8-13, 17-18, 21-28, 31, 33,

City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr. Director State Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.10

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463154246143

Amount of Each Receipt this Period

86.68

☐ Memo Item

P/R Deduction (\$43.34 Bi-Weekly)

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

C. Wilcox, John, Blake, ,

Mailing Address 1001 4th Ave

Fls 4, 8-13, 17-18, 21-28, 31, 33,

City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Claims Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

533.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463155246143

Amount of Each Receipt this Period

63.54

☐ Memo Item

P/R Deduction (\$31.77 Bi-Weekly)

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

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

650.22

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Gonsalves, Judith, M, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Internal Auditor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2892.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463157346143

Amount of Each Receipt this Period

344.24

☐ Memo Item

P/R Deduction (\$172.12 Bi-Weekly)

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

B. Asher, Tyler, C, ,

Mailing Address 1001 4th Ave

Fls 4, 8-13, 17-18, 21-28, 31, 33,

City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Distribution & Marketing Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1456.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463157446143

Amount of Each Receipt this Period

173.84

☐ Memo Item

P/R Deduction (\$86.92 Bi-Weekly)

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

C. Mikolajewski, Timothy, A, ,

Mailing Address 1001 4th Ave

Fls 4, 8-13, 17-18, 21-28, 31, 33,

City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Advisor, GRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4315.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463157846143

Amount of Each Receipt this Period

507.70

☐ Memo Item

P/R Deduction (\$253.85 Bi-Weekly)

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

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

1025.78

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Wixon, Amy, M., ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director, Head of Exposure Managemer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463158346143

Amount of Each Receipt this Period

90.04

☐ Memo Item

P/R Deduction (\$45.02 Bi-Weekly)

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

B. Kilgore, Samuel, Anderson, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463158446143

Amount of Each Receipt this Period

34.64

☐ Memo Item

P/R Deduction (\$17.32 Bi-Weekly)

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

C. Wheeler, Timothy, G., ,

Mailing Address 1001 4th Ave

Fls 4, 8-13, 17-18, 21-28, 31, 33,

City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Director I,Data Science STP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

337.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463160346143

Amount of Each Receipt this Period

40.28

☐ Memo Item

P/R Deduction (\$20.14 Bi-Weekly)

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

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

164.96

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 74
(check only one)

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

Liberty Mutual Insurance Company - PAC

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

A. Haase, Julie, M.,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463161046143

Amount of Each Receipt this Period

374.96

☐ Memo Item

P/R Deduction (\$57.65 Bi-Weekly)

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

B. Sojka, Lara, , ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

808.04

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463164546143

Amount of Each Receipt this Period

96.20

☐ Memo Item

P/R Deduction (\$48.10 Bi-Weekly)

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

C. Duncan, Kathleen, Gunnery, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

227.67

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463198346143

Amount of Each Receipt this Period

24.68

☐ Memo Item

P/R Deduction (\$10.97 Bi-Weekly)

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

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

495.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Mitchell, Diane, C.,Mailing Address 9050 W. Overland Road
Suite 280City
BoiseState
IDZip Code
83709-2746FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Regional General Manager, IA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463201246143

Amount of Each Receipt this Period

103.78

☐ Memo Item

P/R Deduction (\$51.89 Bi-Weekly)

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

B. Anderson, Kimberly, Borgelt, ,Mailing Address 1001 4th Ave
Fls 4, 8-13, 17-18, 21-28, 31, 33,City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Data Science Officer, USRM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

556.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463201346143

Amount of Each Receipt this Period

66.26

☐ Memo Item

P/R Deduction (\$33.13 Bi-Weekly)

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

C. Robon, Michael, Edward, ,Mailing Address 1001 4th Ave
Fls 4, 8-13, 17-18, 21-28, 31, 33,City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
General Manager, State Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1032.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463201646143

Amount of Each Receipt this Period

122.76

☐ Memo Item

P/R Deduction (\$61.38 Bi-Weekly)

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

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

292.80

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Witham, Joyce, A, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr ERM Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463212046143

Amount of Each Receipt this Period

43.48

☐ Memo Item

P/R Deduction (\$21.74 Bi-Weekly)

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

B. Johnson, Michael, J, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Corporate Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

906.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463213146143

Amount of Each Receipt this Period

107.76

☐ Memo Item

P/R Deduction (\$53.88 Bi-Weekly)

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

C. MacPhee, James, M, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Operating Officer, Liberty Mutua

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463217246143

Amount of Each Receipt this Period

750.00

☐ Memo Item

P/R Deduction (\$750.00 Bi-Weekly)

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

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

901.24

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

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

FOR LINE NUMBER: PAGE 16 OF 74
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Chizmadia, Robert, J, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
GRS Business Operations Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.08

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463236646143

Amount of Each Receipt this Period

47.88

☐ Memo Item

P/R Deduction (\$23.94 Bi-Weekly)

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

B. Melody, Susan, J, ,

Mailing Address 225 Borthwick Ave

City
Portsmouth

State
NH

Zip Code
03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Mgr, Claims-Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

739.36

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463237046143

Amount of Each Receipt this Period

88.12

☐ Memo Item

P/R Deduction (\$44.06 Bi-Weekly)

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

C. Moreland Jr, Richard, D, ,

Mailing Address 5283 Corporate Dr
Ste 302

City
Frederick

State
MD

Zip Code
21703-2880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Claims Team Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

327.93

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463243046143

Amount of Each Receipt this Period

39.00

☐ Memo Item

P/R Deduction (\$19.50 Bi-Weekly)

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

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

175.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 74
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Gorecki, Lauren, G, ,

Mailing Address 1 Executive Drive
Suite 115

City
Marlton

State
NJ

Zip Code
08053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Claims Field Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.18

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463244846143

Amount of Each Receipt this Period

37.70

☐ Memo Item

P/R Deduction (\$18.85 Bi-Weekly)

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

B. Young, Krista, A, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Dir, Consumer Affairs, PST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.33

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463247846143

Amount of Each Receipt this Period

32.30

☐ Memo Item

P/R Deduction (\$16.15 Bi-Weekly)

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

C. Gwozdz, Michael, J, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director, Underwriting Quality Practic

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

621.26

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463248446143

Amount of Each Receipt this Period

73.88

☐ Memo Item

P/R Deduction (\$36.94 Bi-Weekly)

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

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

143.88

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Anderson, Douglas, L, ,Mailing Address 2815 Forbs Ave
Ste 100City
Hoffman EstatesState
ILZip Code
60192-9700FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Mgr, Workers Comp Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463252346143

Amount of Each Receipt this Period

26.44

☐ Memo Item

P/R Deduction (\$13.22 Bi-Weekly)

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

B. Kacpura, Tracy, A, ,Mailing Address 1 N Franklin St
Ste 1700City
ChicagoState
ILZip Code
60606-3424FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Senior Executive Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463254646143

Amount of Each Receipt this Period

32.30

☐ Memo Item

P/R Deduction (\$16.15 Bi-Weekly)

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

C. Tong, Andy, , ,Mailing Address 131 Continental Dr
Ste 108 Christiana Executive CamCity
NewarkState
DEZip Code
19713-4310FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

241.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463282546143

Amount of Each Receipt this Period

28.70

☐ Memo Item

P/R Deduction (\$14.35 Bi-Weekly)

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

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

87.44

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

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

FOR LINE NUMBER: PAGE 19 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Felton, Christopher, , ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Executive Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3596.18

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463284446143

Amount of Each Receipt this Period

423.08

☐ Memo Item

P/R Deduction (\$211.54 Bi-Weekly)

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

B. McSweeney, Sean, B, ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
General Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1754.98

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463287546143

Amount of Each Receipt this Period

208.84

☐ Memo Item

P/R Deduction (\$104.42 Bi-Weekly)

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

C. Tuite, James, E, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.38

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463295646143

Amount of Each Receipt this Period

24.74

☐ Memo Item

P/R Deduction (\$12.37 Bi-Weekly)

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

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

656.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Griepsma, Shannon, M, ,

Mailing Address Blank

City
Fort MillState
SCZip Code
29707FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Regional Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.38

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463297746143

Amount of Each Receipt this Period

65.72

☐ Memo Item

P/R Deduction (\$32.86 Bi-Weekly)

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

B. Conner, W. Sean, , ,

Mailing Address 225 Borthwick Ave

City
PortsmouthState
NHZip Code
03801-4152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Director, Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463299946143

Amount of Each Receipt this Period

52.58

☐ Memo Item

P/R Deduction (\$26.29 Bi-Weekly)

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

C. Gregg, Russell, B, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Corporate Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

361.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463301046143

Amount of Each Receipt this Period

42.94

☐ Memo Item

P/R Deduction (\$21.47 Bi-Weekly)

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

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

161.24

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

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

FOR LINE NUMBER: PAGE 21 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Lochhead, Amy, C, ,

Mailing Address 5 Concourse Parkway
Suite 2725

City
Atlanta

State
GA

Zip Code
30328-6164

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Regional Distribution Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463304746143

Amount of Each Receipt this Period

27.56

☐ Memo Item

P/R Deduction (\$13.78 Bi-Weekly)

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

B. Harrington, Myron, C, ,

Mailing Address 13830 Ballantyne Corporate Place
Ste 100

City
Charlotte

State
NC

Zip Code
28277-5405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
General Mgr Underwriting, BI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1776.47

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463311146143

Amount of Each Receipt this Period

211.50

☐ Memo Item

P/R Deduction (\$105.75 Bi-Weekly)

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

C. Ffis, Demetrios, , ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1046.18

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463311446143

Amount of Each Receipt this Period

123.08

☐ Memo Item

P/R Deduction (\$61.54 Bi-Weekly)

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

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

362.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Albright, Kristen, M, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Senior Director, Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1481.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463311946143

Amount of Each Receipt this Period

176.12

☐ Memo Item

P/R Deduction (\$88.06 Bi-Weekly)

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

B. Houghton, Walter, H, ,

Mailing Address 225 Borthwick Ave

City
PortsmouthState
NHZip Code
03801-4152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director, Learning & Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

671.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463314046143

Amount of Each Receipt this Period

80.06

☐ Memo Item

P/R Deduction (\$40.03 Bi-Weekly)

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

C. Fuller, Thomas, G, ,

Mailing Address 1610 Des Peres Rd

City
Saint LouisState
MOZip Code
63131-1813FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Mgr,Risk Management Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

271.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463314346143

Amount of Each Receipt this Period

32.30

☐ Memo Item

P/R Deduction (\$16.15 Bi-Weekly)

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

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

288.48

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

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

FOR LINE NUMBER: PAGE 23 OF 74
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Lynch, William, M.,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
State Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2561.75

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463326946143

Amount of Each Receipt this Period

304.24

☐ Memo Item

P/R Deduction (\$152.12 Bi-Weekly)

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

B. McLeod, Anne, T.,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
General Manager, Insights & Solutions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.07

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463329446143

Amount of Each Receipt this Period

343.42

☐ Memo Item

P/R Deduction (\$171.71 Bi-Weekly)

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

C. Winslow, Dianne, E.,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Principal eDiscovery Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

412.60

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463337846143

Amount of Each Receipt this Period

49.06

☐ Memo Item

P/R Deduction (\$24.53 Bi-Weekly)

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

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

696.72

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 74
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Killer, Clyde, C, ,

Mailing Address Blank

City
Orlando

State
FL

Zip Code
32801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Senior Staff Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.79

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463338546143

Amount of Each Receipt this Period

32.74

☐ Memo Item

P/R Deduction (\$16.37 Bi-Weekly)

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

B. Garbrecht, Lyndee, D, ,

Mailing Address 2815 Forbs Ave
Ste 100

City
Hoffman Estates

State
IL

Zip Code
60192-9700

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Claims Team Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.60

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463341346143

Amount of Each Receipt this Period

35.44

☐ Memo Item

P/R Deduction (\$17.72 Bi-Weekly)

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

C. Luft, Marianne, D, ,

Mailing Address 1001 4th Ave
Fls 4, 8-13, 17-18, 21-28, 31, 33,

City
Seattle

State
WA

Zip Code
98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Surety Home Office Underwriting Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

304.60

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463341646143

Amount of Each Receipt this Period

36.92

☐ Memo Item

P/R Deduction (\$18.46 Bi-Weekly)

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

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

105.10

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

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

FOR LINE NUMBER: PAGE 25 OF 74
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Baker, Steven, P, ,

Mailing Address 13830 Ballantyne Corporate Place
Ste 100

City
Charlotte

State
NC

Zip Code
28277-5405

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Account Consultant, RC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.85

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463346646143

Amount of Each Receipt this Period

24.96

☐ Memo Item

P/R Deduction (\$12.48 Bi-Weekly)

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

B. Weiss, Teressa, L, ,

Mailing Address 4500 N Prospect Rd
Ste 201

City

Peoria Heights

State

IL

Zip Code

61616-6582

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Claims Mgr I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.37

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463348046143

Amount of Each Receipt this Period

29.96

☐ Memo Item

P/R Deduction (\$14.98 Bi-Weekly)

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

C. Reardon, Johnathan, M, ,

Mailing Address 225 Borthwick Ave

City

Portsmouth

State

NH

Zip Code

03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
CIO, GRS NA & Surety

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1285.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463351946143

Amount of Each Receipt this Period

155.00

☐ Memo Item

P/R Deduction (\$77.50 Bi-Weekly)

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

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

209.92

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

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

FOR LINE NUMBER: PAGE 26 OF 74
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Charles, Holli, Pouncel, ,

Mailing Address 1 Executive Drive
Suite 115

City
Marlton

State
NJ

Zip Code
08053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Regional Dir, HMS Account Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.06

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463358846143

Amount of Each Receipt this Period

27.66

☐ Memo Item

P/R Deduction (\$13.83 Bi-Weekly)

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

B. Zonfrelli, Neal, R, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Exec Underwriting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.22

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463359146143

Amount of Each Receipt this Period

106.00

☐ Memo Item

P/R Deduction (\$53.00 Bi-Weekly)

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

C. Saratella, Victor, C., ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

915.45

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463367046143

Amount of Each Receipt this Period

107.70

☐ Memo Item

P/R Deduction (\$53.85 Bi-Weekly)

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

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

241.36

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Storm, Anthony, R, ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Insights & Solutions Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463367646143

Amount of Each Receipt this Period

500.00

☐ Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

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

B. Welch, Michael, J, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director, Category Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463368246143

Amount of Each Receipt this Period

34.62

☐ Memo Item

P/R Deduction (\$17.31 Bi-Weekly)

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

C. McCormack, Alison, M, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Dir, Strategy & Insights, CRE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

865.78

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463368546143

Amount of Each Receipt this Period

103.24

☐ Memo Item

P/R Deduction (\$51.62 Bi-Weekly)

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

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

637.86

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

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

FOR LINE NUMBER: PAGE 28 OF 74
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Ferrari, Daniel, G.,

Mailing Address 1001 4th Ave

Fls 4, 8-13, 17-18, 21-28, 31, 33,

City
Seattle

State
WA

Zip Code
98154-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Regional General Manager, IA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2174.09

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463372146143

Amount of Each Receipt this Period

259.58

☐ Memo Item

P/R Deduction (\$129.79 Bi-Weekly)

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

B. Levy, Brian, , ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Mgr, Claims Field Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3788.06

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463377346143

Amount of Each Receipt this Period

449.08

☐ Memo Item

P/R Deduction (\$224.54 Bi-Weekly)

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

C. Trowbridge, Perry, J., ,

Mailing Address 750 Old Hickory Boulevard

Suite 230

City
Brentwood

State
TN

Zip Code
37027-4528

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director, Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

428.85

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463381346143

Amount of Each Receipt this Period

51.12

☐ Memo Item

P/R Deduction (\$25.56 Bi-Weekly)

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

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

759.78

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Grove, Michael, , ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Mgr, State Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1043.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463382846143

Amount of Each Receipt this Period

124.44

☐ Memo Item

P/R Deduction (\$62.22 Bi-Weekly)

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

B. Baldini, Donald, F, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Public Aff Off & Sr Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463386246143

Amount of Each Receipt this Period

63.98

☐ Memo Item

P/R Deduction (\$31.99 Bi-Weekly)

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

C. Shields, Timothy, Michael, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Internal Audit Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

311.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463386446143

Amount of Each Receipt this Period

37.12

☐ Memo Item

P/R Deduction (\$18.56 Bi-Weekly)

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

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

225.54

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Connolly, Scott, J., ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463386746143

Amount of Each Receipt this Period

47.68

☐ Memo Item

P/R Deduction (\$23.84 Bi-Weekly)

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

B. Warye, Matt, L., ,Mailing Address 1876 Waycross Rd
Ste 100City
CincinnatiState
OHZip Code
45240-2825FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Regional General Manager, IA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463388946143

Amount of Each Receipt this Period

76.66

☐ Memo Item

P/R Deduction (\$38.33 Bi-Weekly)

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

C. Miarka, Adam, J., ,

Mailing Address 350 E 96th St

City
IndianapolisState
INZip Code
46240-3702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Princ Infrastructure Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463392746143

Amount of Each Receipt this Period

55.76

☐ Memo Item

P/R Deduction (\$27.88 Bi-Weekly)

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

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

180.10

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. O'Rourke, Helen, E, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Deputy General Counsel, LMI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2608.98

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463392846143

Amount of Each Receipt this Period

310.48

☐ Memo Item

P/R Deduction (\$155.24 Bi-Weekly)

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

B. Sachleben, Eric, , ,Mailing Address 3011 Sutton Gate Dr
Ste 400City
SuwaneeState
GAZip Code
30024-4476FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Division Manager, Risk Control

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.63

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463395346143

Amount of Each Receipt this Period

41.92

☐ Memo Item

P/R Deduction (\$20.96 Bi-Weekly)

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

C. Dirusso, Michael, J, ,

Mailing Address 225 Borthwick Ave

City
PortsmouthState
NHZip Code
03801-4152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Corporate Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463396246143

Amount of Each Receipt this Period

45.78

☐ Memo Item

P/R Deduction (\$22.89 Bi-Weekly)

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

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

398.18

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

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Capone, Christopher, , ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
President, Comparion

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463403946143

Amount of Each Receipt this Period

147.92

☐ Memo Item

P/R Deduction (\$73.96 Bi-Weekly)

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

B. Fucentese, Aldo, , ,

Mailing Address 6633 Midnight Pass Road

City
SarasotaState
FLZip Code
34242-2508FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
CUO, Specialty Line

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463405446143

Amount of Each Receipt this Period

54.22

☐ Memo Item

P/R Deduction (\$27.11 Bi-Weekly)

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

C. Stoker, Allen, A, ,

Mailing Address 225 Borthwick Ave

City
PortsmouthState
NHZip Code
03801-4152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Platform Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

241.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463411246143

Amount of Each Receipt this Period

28.86

☐ Memo Item

P/R Deduction (\$14.43 Bi-Weekly)

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

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

231.00

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

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

FOR LINE NUMBER: PAGE 33 OF 74
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. DeMoss, Toni, M., ,

Mailing Address 1415 W Diehl Road
Suite 205

City
Naperville

State
IL

Zip Code
60563-2349

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Senior Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.15

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463414246143

Amount of Each Receipt this Period

32.64

☐ Memo Item

P/R Deduction (\$16.32 Bi-Weekly)

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

B. Anaya, Marilyn, , ,

Mailing Address Blank

City
Orlando

State
FL

Zip Code
32801

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director, Business Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

928.48

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463423446143

Amount of Each Receipt this Period

110.46

☐ Memo Item

P/R Deduction (\$55.23 Bi-Weekly)

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

C. Kenealy, Edmund, C., ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Deputy General Counsel, Enterprise Leg

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

4002.84

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463423646143

Amount of Each Receipt this Period

476.30

☐ Memo Item

P/R Deduction (\$238.15 Bi-Weekly)

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

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

619.40

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Khanna, Amit, , ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Claims Officer, USRM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1534.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463426346143

Amount of Each Receipt this Period

183.08

☐ Memo Item

P/R Deduction (\$91.54 Bi-Weekly)

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

B. Whitney, Kimberly, , ,

Mailing Address 225 Borthwick Ave

City
PortsmouthState
NHZip Code
03801-4152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Scrum Master II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463426646143

Amount of Each Receipt this Period

34.74

☐ Memo Item

P/R Deduction (\$17.37 Bi-Weekly)

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

C. Howard, Robert, A, ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1144.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463428646143

Amount of Each Receipt this Period

134.62

☐ Memo Item

P/R Deduction (\$67.31 Bi-Weekly)

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

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

352.44

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

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

FOR LINE NUMBER: PAGE 35 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Goodrich, Kristen, M., ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.42

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463429746143

Amount of Each Receipt this Period

27.64

☐ Memo Item

P/R Deduction (\$13.82 Bi-Weekly)

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

B. Yang, Daniel, , ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director, ERM Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.19

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463432046143

Amount of Each Receipt this Period

77.38

☐ Memo Item

P/R Deduction (\$38.69 Bi-Weekly)

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

C. DuPont, Stephen, J., ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.96

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463432546143

Amount of Each Receipt this Period

167.66

☐ Memo Item

P/R Deduction (\$83.83 Bi-Weekly)

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

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

272.68

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Cressey, Mark, W, ,

Mailing Address 225 Borthwick Ave

City
PortsmouthState
NHZip Code
03801-4152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
General Mgr, Global Digital Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3510.06

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463433946143

Amount of Each Receipt this Period

417.70

☐ Memo Item

P/R Deduction (\$208.85 Bi-Weekly)

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

B. Hyatt, Francis, John, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Community Inv & Sustainability C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4362.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463434046143

Amount of Each Receipt this Period

519.62

☐ Memo Item

P/R Deduction (\$259.81 Bi-Weekly)

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

C. Blessing, David, P, ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr. Director Mobility

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1124.19

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463436146143

Amount of Each Receipt this Period

134.16

☐ Memo Item

P/R Deduction (\$67.08 Bi-Weekly)

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

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

1071.48

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Trent, Diana, M, ,Mailing Address 2815 Forbs Ave
Ste 100

City Hoffman Estates

State IL

Zip Code 60192-9700

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director I IC, Prod Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.49

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463440146143

Amount of Each Receipt this Period

26.16

☐ Memo Item

P/R Deduction (\$13.08 Bi-Weekly)

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

B. Heenan, Pamela, S, ,

Mailing Address 175 Berkeley St

City Boston

State MA

Zip Code 02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1559.17

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463443546143

Amount of Each Receipt this Period

185.96

☐ Memo Item

P/R Deduction (\$92.98 Bi-Weekly)

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

C. Mulvay, Shawn, M, ,Mailing Address 7000 Stonewood Dr
Ste 100

City Wexford

State PA

Zip Code 15090-7376

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Senior Director I, Claims Process

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

626.97

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463445346143

Amount of Each Receipt this Period

74.56

☐ Memo Item

P/R Deduction (\$37.28 Bi-Weekly)

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

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

286.68

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

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

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Hack, Joanna, , ,

Mailing Address Union Station

2100 Stewart Ave., Ste 235

City

Wausau

State

WI

Zip Code

54401-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LIBERTY MUTUAL

Occupation (for Individual)

Director I, Prod Research

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.72

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463446046143

Amount of Each Receipt this Period

29.96

☐ Memo Item

P/R Deduction (\$14.98 Bi-Weekly)

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

B. Dwartz, David, R, ,

Mailing Address 157 Berkeley St

City

Boston

State

MA

Zip Code

02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LIBERTY MUTUAL

Occupation (for Individual)

President, Helmsman

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.67

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463446646143

Amount of Each Receipt this Period

79.30

☐ Memo Item

P/R Deduction (\$39.65 Bi-Weekly)

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

C. Potter, Steven, , ,

Mailing Address 225 Borthwick Ave

City

Portsmouth

State

NH

Zip Code

03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LIBERTY MUTUAL

Occupation (for Individual)

Product Owner II

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

213.15

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463449346143

Amount of Each Receipt this Period

25.34

☐ Memo Item

P/R Deduction (\$12.67 Bi-Weekly)

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

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

134.60

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)

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☐ 17			

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. DiMarino, Verlinda, Cotton, ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Manager-Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.17

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463451046143

Amount of Each Receipt this Period

33.86

☐ Memo Item

P/R Deduction (\$16.93 Bi-Weekly)

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

B. Murphy, John, Stephen, ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Dir, Design & Construction

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.39

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463453046143

Amount of Each Receipt this Period

78.38

☐ Memo Item

P/R Deduction (\$39.19 Bi-Weekly)

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

C. Edem, Janelle, Maria Brown, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Global Relationship Manager, Asurion

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

468.76

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463453946143

Amount of Each Receipt this Period

55.84

☐ Memo Item

P/R Deduction (\$27.92 Bi-Weekly)

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

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

168.08

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

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

FOR LINE NUMBER: PAGE 40 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Cole, Regan, Wade, ,

Mailing Address Blank

City
Oklahoma City

State
OK

Zip Code
73134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Staff Counsel II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.56

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463460446143

Amount of Each Receipt this Period

24.22

☐ Memo Item

P/R Deduction (\$12.11 Bi-Weekly)

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

B. Hylka, Stephen, D, ,

Mailing Address 1415 W Diehl Road
Suite 205

City
Naperville

State
IL

Zip Code
60563-2349

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Mgr, State Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.96

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463461346143

Amount of Each Receipt this Period

87.42

☐ Memo Item

P/R Deduction (\$43.71 Bi-Weekly)

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

C. Greenberg, Glenn, A, ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director II, Business Communications P

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

202.29

Date of Receipt

08 / 31 / 2026

Transaction ID : PR463462246143

Amount of Each Receipt this Period

24.12

☐ Memo Item

P/R Deduction (\$12.06 Bi-Weekly)

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

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

135.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 41 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Raffensperger, Elena, , ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Tax Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1039.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463466446143

Amount of Each Receipt this Period

123.70

☐ Memo Item

P/R Deduction (\$61.85 Bi-Weekly)

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

B. Mileski, John, A, ,

Mailing Address 1001 4th Ave

Fls 4, 8-13, 17-18, 21-28, 31, 33,

City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Zone General Manager, IA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

694.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR463466946143

Amount of Each Receipt this Period

82.66

☐ Memo Item

P/R Deduction (\$41.33 Bi-Weekly)

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

C. Abbatine, Teodora, R, ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director I IC, Prod Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

448.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR464484946143

Amount of Each Receipt this Period

27.44

☐ Memo Item

P/R Deduction (\$11.44 Bi-Weekly)

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

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

233.80

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Finch, Cameron, , ,Mailing Address 450 Artisan Way
Suite 220City
SomervilleState
MAZip Code
02145-1262FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Division General Manager, Comparion

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1677.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR464592746143

Amount of Each Receipt this Period

204.16

☐ Memo Item

P/R Deduction (\$104.62 Bi-Weekly)

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

B. Bouso, Hector, D, ,Mailing Address 2815 Forbs Ave
Ste 100City
Hoffman EstatesState
ILZip Code
60192-9700FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Regional Surety Underwriting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.84

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR464646446143

Amount of Each Receipt this Period

68.60

☐ Memo Item

P/R Deduction (\$34.30 Bi-Weekly)

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

C. Neyenhouse, Stephanie, , ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

398.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR464665346143

Amount of Each Receipt this Period

47.48

☐ Memo Item

P/R Deduction (\$23.74 Bi-Weekly)

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

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

320.24

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Bello, Jessica, , ,

Mailing Address 7900 Windrose Ave

City
PlanoState
TXZip Code
75024-0266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Asst Dir, Senior Equity and Inclusion

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR464668946143

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

B. Douglas, Tamara, M, ,

Mailing Address 7900 Windrose Ave

City
PlanoState
TXZip Code
75024-0266FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Project Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR465106346143

Amount of Each Receipt this Period

23.84

☐ Memo Item

P/R Deduction (\$11.92 Bi-Weekly)

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

C. Jackson, Ronke, B, ,Mailing Address 1876 Waycross Rd
Ste 100City
CincinnatiState
OHZip Code
45240-2825FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director, Distribution

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR465204146143

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

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

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

103.84

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

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

FOR LINE NUMBER:
(check only one)

PAGE 44 OF 74

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Urciuoli, Patrizio M., , ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Co-President, LMI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2095.24

Date of Receipt

08 / 31 / 2026

Transaction ID : PR465404646143

Amount of Each Receipt this Period

269.24

☐ Memo Item

P/R Deduction (\$134.62 Bi-Weekly)

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

B. Finn, Christopher, , ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

784.55

Date of Receipt

08 / 31 / 2026

Transaction ID : PR465404846143

Amount of Each Receipt this Period

92.30

☐ Memo Item

P/R Deduction (\$46.15 Bi-Weekly)

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

C. Bailey, Caury, , ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Director, Inv Treasury Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1397.02

Date of Receipt

08 / 31 / 2026

Transaction ID : PR465405946143

Amount of Each Receipt this Period

166.76

☐ Memo Item

P/R Deduction (\$83.38 Bi-Weekly)

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

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

528.30

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 45 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Davis, Chad, , ,

Mailing Address 7900 Windrose Ave

City
PlanoState
TXZip Code
75024-0418FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Manager, Risk Analytics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1657.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR465563746143

Amount of Each Receipt this Period

197.30

☐ Memo Item

P/R Deduction (\$98.65 Bi-Weekly)

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

B. Deegan, James, , ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director, Reinsurance Accounting & Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.29

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR465763546143

Amount of Each Receipt this Period

131.58

☐ Memo Item

P/R Deduction (\$65.79 Bi-Weekly)

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

C. Zangerle, Nathan, J, ,Mailing Address 401 Plymouth Rd
Ste 450City
Plymouth MeetingState
PAZip Code
19462-1636FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
President, Global Surety

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

897.66

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR465796046143

Amount of Each Receipt this Period

107.06

☐ Memo Item

P/R Deduction (\$53.53 Bi-Weekly)

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

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

435.94

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

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

FOR LINE NUMBER: PAGE 46 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Poepelmeier, Rusty, D, ,

Mailing Address 8044 Montgomery Rd
Ste 150 Bank One Towers

City
Cincinnati

State
OH

Zip Code
45236-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Surety Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1255.37

Date of Receipt

08 / 31 / 2026

Transaction ID : PR465856246143

Amount of Each Receipt this Period

149.84

☐ Memo Item

P/R Deduction (\$74.92 Bi-Weekly)

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

B. Bills, Lucas, J, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
President, Independent Agent Distribut

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3481.76

Date of Receipt

08 / 31 / 2026

Transaction ID : PR465862846143

Amount of Each Receipt this Period

415.54

☐ Memo Item

P/R Deduction (\$207.77 Bi-Weekly)

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

C. Wigfall, Jessamine, R., ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Dir, Real Estate Delivery

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1330.82

Date of Receipt

08 / 31 / 2026

Transaction ID : PR466362846143

Amount of Each Receipt this Period

158.84

☐ Memo Item

P/R Deduction (\$79.42 Bi-Weekly)

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

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

724.22

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Orloff, Marc, B, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
President, GRS North America

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2418.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR466378546143

Amount of Each Receipt this Period

288.46

☐ Memo Item

P/R Deduction (\$144.23 Bi-Weekly)

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

B. Bolles, Andrew, , ,

Mailing Address 7900 Windrose Ave

City
PlanoState
TXZip Code
75024-0418FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Manager II, P/L Agency Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR466631346143

Amount of Each Receipt this Period

30.66

☐ Memo Item

P/R Deduction (\$15.33 Bi-Weekly)

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

C. Aberle, Craig, A, ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Exec Underwriting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

836.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR466707746143

Amount of Each Receipt this Period

99.78

☐ Memo Item

P/R Deduction (\$49.89 Bi-Weekly)

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

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

418.90

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

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

FOR LINE NUMBER: PAGE 48 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Hughes, Tracy, Michelle, ,

Mailing Address 1876 Waycross Rd
Ste 100

City
Cincinnati

State
OH

Zip Code
45240-2825

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Territory Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR466732546143

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

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

B. Amundsen, John, E, ,

Mailing Address 10155 Westmoor Dr.
Suite 175

City
Westminster

State
CO

Zip Code
80021-2627

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Actuary STP I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.36

Date of Receipt

08 / 31 / 2026

Transaction ID : PR466773546143

Amount of Each Receipt this Period

79.36

☐ Memo Item

P/R Deduction (\$39.68 Bi-Weekly)

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

C. Lumaye, Troy, R, ,

Mailing Address 1975 Research Pkw
Ste 200

City
Colorado Springs

State
CO

Zip Code
80920-1026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Claims Field Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

283.01

Date of Receipt

08 / 31 / 2026

Transaction ID : PR466781546143

Amount of Each Receipt this Period

33.74

☐ Memo Item

P/R Deduction (\$16.87 Bi-Weekly)

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

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

153.10

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Whitmire, Richard, D, ,Mailing Address 3011 Sutton Gate Dr
Suite 500City
SuwaneeState
GAZip Code
30024-4459FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Surety Home Office Underwriting Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.81

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR466801346143

Amount of Each Receipt this Period

66.18

☐ Memo Item

P/R Deduction (\$33.09 Bi-Weekly)

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

B. Lyons, Emily, , ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Enterprise Data & Data Science (

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1323.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467114046143

Amount of Each Receipt this Period

157.40

☐ Memo Item

P/R Deduction (\$78.70 Bi-Weekly)

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

C. Gomez, Joann, C, ,Mailing Address One Embarcadero Center
Suite 1320City
San FranciscoState
CAZip Code
94111-3708FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Executive Underwriting Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467116446143

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

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

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

273.58

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 OF 74
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Morrison, Brian, , ,

Mailing Address 225 Borthwick Ave

City
Portsmouth

State
NH

Zip Code
03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director, HO eDiscovery

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.76

Date of Receipt

08 / 31 / 2026

Transaction ID : PR467135446143

Amount of Each Receipt this Period

27.88

☐ Memo Item

P/R Deduction (\$13.94 Bi-Weekly)

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

B. Guidara, Nicole, Dadaian, ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Chief Brand & Communications Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1728.64

Date of Receipt

08 / 31 / 2026

Transaction ID : PR467141946143

Amount of Each Receipt this Period

206.54

☐ Memo Item

P/R Deduction (\$103.27 Bi-Weekly)

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

C. Czapl, James, , ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2809.28

Date of Receipt

08 / 31 / 2026

Transaction ID : PR467186646143

Amount of Each Receipt this Period

334.30

☐ Memo Item

P/R Deduction (\$167.15 Bi-Weekly)

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

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

568.72

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

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Stevenson, Catherine, E., ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LIBERTY MUTUAL

Occupation (for Individual)

Manager, Transformation, Intelligence

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1662.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467294846143

Amount of Each Receipt this Period

198.08

☐ Memo Item

P/R Deduction (\$99.04 Bi-Weekly)

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

B. Hyatt, Wesley, Therese, ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LIBERTY MUTUAL

Occupation (for Individual)

President, NA Dist & Global Client Eng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

877.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467388146143

Amount of Each Receipt this Period

110.76

☐ Memo Item

P/R Deduction (\$55.38 Bi-Weekly)

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

C. Arangio, Nicole, M, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

LIBERTY MUTUAL

Occupation (for Individual)

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467420946143

Amount of Each Receipt this Period

200.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

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

508.84

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

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Jenkins, Katie, C, ,

Mailing Address 225 Borthwick Ave

City
PortsmouthState
NHZip Code
03801-4152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Info Security Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467584446143

Amount of Each Receipt this Period

200.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. Tracy, Jennifer, A, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Counsel, HO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467626046143

Amount of Each Receipt this Period

28.92

☐ Memo Item

P/R Deduction (\$14.46 Bi-Weekly)

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

C. Waterhouse, James, C, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Finance Transformation & Solutions Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2942.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467674746143

Amount of Each Receipt this Period

350.00

☐ Memo Item

P/R Deduction (\$175.00 Bi-Weekly)

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

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

578.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Palmer, Andrew, C., ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
CIO, USRM Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3198.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467683146143

Amount of Each Receipt this Period

380.80

☐ Memo Item

P/R Deduction (\$190.40 Bi-Weekly)

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

B. Augusta, Valencia, R., ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Talent Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

772.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467724846143

Amount of Each Receipt this Period

92.20

☐ Memo Item

P/R Deduction (\$46.10 Bi-Weekly)

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

C. Hansberry, Kevin, , ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Financial Officer, GRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3653.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467727446143

Amount of Each Receipt this Period

434.62

☐ Memo Item

P/R Deduction (\$217.31 Bi-Weekly)

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

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

907.62

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

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

FOR LINE NUMBER: PAGE 54 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Antosiewicz, Jesse, A, ,

Mailing Address 225 Borthwick Ave

City
Portsmouth

State
NH

Zip Code
03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Director, Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

928.13

Date of Receipt

08 / 31 / 2026

Transaction ID : PR467832646143

Amount of Each Receipt this Period

110.46

☐ Memo Item

P/R Deduction (\$55.23 Bi-Weekly)

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

B. Mann, Scott, Eliot, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director II, Product Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

554.48

Date of Receipt

08 / 31 / 2026

Transaction ID : PR467855746143

Amount of Each Receipt this Period

66.18

☐ Memo Item

P/R Deduction (\$33.09 Bi-Weekly)

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

C. Cioffi, Sarah, A, ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Financial Officer, GRS NA

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1858.43

Date of Receipt

08 / 31 / 2026

Transaction ID : PR467893446143

Amount of Each Receipt this Period

220.92

☐ Memo Item

P/R Deduction (\$110.46 Bi-Weekly)

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

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

397.56

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Ungureanu, Irina, , ,

Mailing Address 1001 4th Ave

Fls 4, 8-13, 17-18, 21-28, 31, 33,

City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director I, Taxation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1112.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467900246143

Amount of Each Receipt this Period

132.92

☐ Memo Item

P/R Deduction (\$66.46 Bi-Weekly)

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

B. Keeler, Alexander, R, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Cybersecurity & Technology Audit M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1510.16

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR467912746143

Amount of Each Receipt this Period

179.70

☐ Memo Item

P/R Deduction (\$89.85 Bi-Weekly)

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

C. Chevalier, Michele, , ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Product Officer, Personal Proper

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR468098946143

Amount of Each Receipt this Period

360.00

☐ Memo Item

P/R Deduction (\$180.00 Bi-Weekly)

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

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

672.62

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

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

FOR LINE NUMBER: PAGE 56 OF 74
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Kikama, Tomisi, B, ,

Mailing Address 5 Concourse Parkway
Suite 2735

City
Atlanta

State
GA

Zip Code
30328-5350

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Manager, Training & Knowledge Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.81

Date of Receipt

08 / 31 / 2026

Transaction ID : PR468441346143

Amount of Each Receipt this Period

31.44

☐ Memo Item

P/R Deduction (\$15.72 Bi-Weekly)

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

B. Kievet, Thomas, L, ,

Mailing Address 500 Buford Hwy
Ste 105

City
Suwanee

State
GA

Zip Code
30024-7808

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Claims Field Mgr, SC Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.35

Date of Receipt

08 / 31 / 2026

Transaction ID : PR468567946143

Amount of Each Receipt this Period

119.16

☐ Memo Item

P/R Deduction (\$59.58 Bi-Weekly)

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

C. Taylor, Douglas, M, ,

Mailing Address 2815 Forbs Ave
Ste 100

City
Hoffman Estates

State
IL

Zip Code
60192-9700

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Regional Mgr, WC Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

680.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR468714046143

Amount of Each Receipt this Period

80.00

☐ Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

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

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

230.60

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Danielson, Amy, , ,

Mailing Address 7900 Windrose Ave

City
Plano

State
TX

Zip Code
75024-0266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Claims Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1036.61

Date of Receipt

08 / 31 / 2026

Transaction ID : PR469095446143

Amount of Each Receipt this Period

123.56

☐ Memo Item

P/R Deduction (\$61.78 Bi-Weekly)

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

B. Marsden, James, A, ,

Mailing Address 225 Borthwick Ave

City
Portsmouth

State
NH

Zip Code
03801-4152

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr. Director, Cybersecurity

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.05

Date of Receipt

08 / 31 / 2026

Transaction ID : PR471471846143

Amount of Each Receipt this Period

71.50

☐ Memo Item

P/R Deduction (\$35.75 Bi-Weekly)

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

C. Edwards, Michaela, Alyce, ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director III, Taxation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1366.94

Date of Receipt

08 / 31 / 2026

Transaction ID : PR492835946143

Amount of Each Receipt this Period

162.90

☐ Memo Item

P/R Deduction (\$81.45 Bi-Weekly)

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

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

357.96

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 58 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Dickson, Michelle, Evett, ,

Mailing Address 7900 Windrose Ave

City
PlanoState
TXZip Code
75024-0418FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director, Strategy & Alignment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.09

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR523984946143

Amount of Each Receipt this Period

29.76

☐ Memo Item

P/R Deduction (\$14.88 Bi-Weekly)

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

B. Mehler, Monica, , ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director III, Taxation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1463.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR523985446143

Amount of Each Receipt this Period

174.40

☐ Memo Item

P/R Deduction (\$87.20 Bi-Weekly)

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

C. Afful, Otuko, Akiti, ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Senior Project Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

245.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR539755646143

Amount of Each Receipt this Period

29.16

☐ Memo Item

P/R Deduction (\$14.58 Bi-Weekly)

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

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

233.32

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 59 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Rangaswami, Viji, , ,Mailing Address 444 N Capitol St
Ste 740City
WashingtonState
DCZip Code
20001-1512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2822.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR632003846143

Amount of Each Receipt this Period

335.66

☐ Memo Item

P/R Deduction (\$167.83 Bi-Weekly)

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

B. Marantz, Nora, Leigh, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Asst General Counsel-Enterprise Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1808.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR645375346143

Amount of Each Receipt this Period

215.84

☐ Memo Item

P/R Deduction (\$107.92 Bi-Weekly)

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

C. O'Connor, Charles, , ,

Mailing Address 225 Borthwick Ave

City
PortsmouthState
NHZip Code
03801-4152FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Director, Cybersecurity

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

287.77

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR676274446143

Amount of Each Receipt this Period

34.30

☐ Memo Item

P/R Deduction (\$17.15 Bi-Weekly)

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

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

585.80

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

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

FOR LINE NUMBER: PAGE 60 OF 74
(check only one)

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

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Hart, Damon, Paul, ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
EVP, Chief Legal Officer & Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4250.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR727316646143

Amount of Each Receipt this Period

500.00

☐ Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

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

B. Miller, Lauren, Johanna, ,

Mailing Address 102 Vanderbilt Motor Pkwy
Ste 220

City
Hauppauge

State
NY

Zip Code
11788-5178

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Project Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR735227046143

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

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

C. Richartz, Paul, J, ,

Mailing Address 7900 Windrose Ave

City
Plano

State
TX

Zip Code
75024-0266

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Manager, Claims Service Centers

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1293.63

Date of Receipt

08 / 31 / 2026

Transaction ID : PR740006946143

Amount of Each Receipt this Period

154.16

☐ Memo Item

P/R Deduction (\$77.08 Bi-Weekly)

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

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

694.16

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 61 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Russell, Christopher, , ,Mailing Address 444 N Capitol St
Ste 740City
WashingtonState
DCZip Code
20001-1512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Senior Public Affairs Officer & Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1493.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR792052046143

Amount of Each Receipt this Period

178.50

☐ Memo Item

P/R Deduction (\$89.25 Bi-Weekly)

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

B. Stanberry, Ann, Tansamrit, ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Strategy Officer, Liberty Mutual

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4076.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR793487646143

Amount of Each Receipt this Period

492.30

☐ Memo Item

P/R Deduction (\$246.15 Bi-Weekly)

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

C. Autry, Cecil, Jay, ,Mailing Address 1201 K St
Ste 950City
SacramentoState
CAZip Code
95814-3991FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Public Aff Off & Sr Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

373.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR890102546143

Amount of Each Receipt this Period

44.44

☐ Memo Item

P/R Deduction (\$22.22 Bi-Weekly)

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

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

715.24

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 62 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Trute, Julie, L., ,Mailing Address 444 N Capitol St
Ste 740City
WashingtonState
DCZip Code
20001-1512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Political Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR892214546143

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

B. Winn, Adam, , ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Co-President, LMI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3729.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR898217546143

Amount of Each Receipt this Period

538.46

☐ Memo Item

P/R Deduction (\$269.23 Bi-Weekly)

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

C. Sweten, Maria, Theresa, ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1129.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR907388346143

Amount of Each Receipt this Period

135.38

☐ Memo Item

P/R Deduction (\$67.69 Bi-Weekly)

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

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

773.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 63 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Bhattacharya, Kalyan, , ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Solutions Eng, Configuration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1059.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR910107646143

Amount of Each Receipt this Period

126.50

☐ Memo Item

P/R Deduction (\$63.25 Bi-Weekly)

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

B. Kim, John, Jiyong, ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2615.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR916558746143

Amount of Each Receipt this Period

307.70

☐ Memo Item

P/R Deduction (\$153.85 Bi-Weekly)

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

C. Willock, Michael, , ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
LMI Chief Technology Officer & Corp Fu

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3404.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR919770846143

Amount of Each Receipt this Period

405.62

☐ Memo Item

P/R Deduction (\$202.81 Bi-Weekly)

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

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

839.82

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 64 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Caldas, Monica, , ,

Mailing Address 175 Berkeley St

City
BostonState
MAZip Code
02116-5066FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR920275746143

Amount of Each Receipt this Period

500.00

☐ Memo Item

P/R Deduction (\$250.00 Bi-Weekly)

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

B. Stenner, Mark, , ,Mailing Address 1 N Franklin St
Ste 2100City
ChicagoState
ILZip Code
60606-3494FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Claims Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR923730646143

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

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

C. THURLOW, MELANIE, J, ,Mailing Address 1001 4th Ave
Fls 4, 8-13, 17-18, 21-28, 31, 33,City
SeattleState
WAZip Code
98154-1119FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Senior Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1429.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR923855046143

Amount of Each Receipt this Period

170.04

☐ Memo Item

P/R Deduction (\$85.02 Bi-Weekly)

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

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

720.04

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 OF 74
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Murphy, Stephen, , ,

Mailing Address 5283 Corporate Dr
Ste 302

City
Frederick

State
MD

Zip Code
21703-2880

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
CUO, Specialty Line

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1945.99

Date of Receipt

08 / 31 / 2026

Transaction ID : PR924092646143

Amount of Each Receipt this Period

232.16

☐ Memo Item

P/R Deduction (\$116.08 Bi-Weekly)

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

B. Mazman, Edward, , ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
CUO, Specialty Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1184.64

Date of Receipt

08 / 31 / 2026

Transaction ID : PR924094746143

Amount of Each Receipt this Period

74.04

☐ Memo Item

P/R Deduction (\$74.04 Bi-Weekly)

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

C. McMahon, Kristin, , ,

Mailing Address 175 Powder Forest Dr
2nd Flr

City
Weatogue

State
CT

Zip Code
06089-7902

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Manager, Specialty Lines Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1062.50

Date of Receipt

08 / 31 / 2026

Transaction ID : PR924098746143

Amount of Each Receipt this Period

125.00

☐ Memo Item

P/R Deduction (\$62.50 Bi-Weekly)

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

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

431.20

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

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

FOR LINE NUMBER: PAGE 66 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Akinbosede, Olukunle, , ,

Mailing Address 44244 W 12 Mile Road
Building A, Suite 150

City
Novi

State
MI

Zip Code
48377-2616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Dir, Global Tech Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.31

Date of Receipt

08 / 31 / 2026

Transaction ID : PR929935246143

Amount of Each Receipt this Period

256.14

☐ Memo Item

P/R Deduction (\$128.07 Bi-Weekly)

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

B. Anderson, Gina, , ,

Mailing Address 50 Hudson Yards
65th floor

City

New York

State
NY

Zip Code
10001-2180

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Mgr, Public & Media Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.24

Date of Receipt

08 / 31 / 2026

Transaction ID : PR930015946143

Amount of Each Receipt this Period

120.64

☐ Memo Item

P/R Deduction (\$60.32 Bi-Weekly)

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

C. Young, Daniel, , ,

Mailing Address 14050 N 83rd Ave
Ste 100

City

Peoria

State
AZ

Zip Code
85381-5638

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
CUO, Surety Plus

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

765.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR931100246143

Amount of Each Receipt this Period

90.00

☐ Memo Item

P/R Deduction (\$45.00 Bi-Weekly)

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

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

466.78

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

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

FOR LINE NUMBER: PAGE 67 OF 74
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Colbert, Anthony, , ,

Mailing Address 157 Berkeley St

City
Boston

State
MA

Zip Code
02116-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
CUO, Specialty Line

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2504.85

Date of Receipt

08 / 31 / 2026

Transaction ID : PR931166746143

Amount of Each Receipt this Period

295.42

☐ Memo Item

P/R Deduction (\$147.71 Bi-Weekly)

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

B. Junkas, Jeffrey, L., ,

Mailing Address 1415 W Diehl Road
Suite 205

City
Naperville

State
IL

Zip Code
60563-2349

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Senior Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR937289546143

Amount of Each Receipt this Period

500.00

☐ Memo Item

P/R Deduction (\$500.00 Bi-Weekly)

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

C. McKinnon, Maura, Sullivan, ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Chief Accounting and Tax Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2161.55

Date of Receipt

08 / 31 / 2026

Transaction ID : PR940883746143

Amount of Each Receipt this Period

384.62

☐ Memo Item

P/R Deduction (\$192.31 Bi-Weekly)

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

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

1180.04

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

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

FOR LINE NUMBER: PAGE 68 OF 74
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Feged, Carlos, R., ,

Mailing Address 95 Glastonbury Blvd

City
Glastonbury

State
CT

Zip Code
06033-4438

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Chief Capital Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.96

Date of Receipt

08 / 31 / 2026

Transaction ID : PR940960546143

Amount of Each Receipt this Period

83.66

☐ Memo Item

P/R Deduction (\$41.83 Bi-Weekly)

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

B. Prati, Carissa, , ,

Mailing Address 215 North 2nd Avenue Southwest

City
Tumwater

State
WA

Zip Code
98512-6553

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Scrum Master

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.81

Date of Receipt

08 / 31 / 2026

Transaction ID : PR941676446143

Amount of Each Receipt this Period

24.92

☐ Memo Item

P/R Deduction (\$12.46 Bi-Weekly)

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

C. Coutreyer, Cortney, , ,

Mailing Address 444 N Capitol St
Ste 740

City
Washington

State
DC

Zip Code
20001-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

765.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR943026046143

Amount of Each Receipt this Period

90.00

☐ Memo Item

P/R Deduction (\$45.00 Bi-Weekly)

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

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

198.58

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

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

FOR LINE NUMBER: PAGE 69 OF 74
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Shingle, Mary, Lynne, ,

Mailing Address 3 Summit Park Drive
Ste 125

City
Independence

State
OH

Zip Code
44131-2598

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Underwriting Manager, CI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR943880346143

Amount of Each Receipt this Period

24.00

☐ Memo Item

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

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

B. Holmes, Kimberly, , ,

Mailing Address 175 Berkeley St

City
Boston

State
MA

Zip Code
02116-5066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Chief Actuary, GRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR944651246143

Amount of Each Receipt this Period

400.00

☐ Memo Item

P/R Deduction (\$200.00 Bi-Weekly)

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

C. Claman, Kimberley, , ,

Mailing Address 444 N Capitol St
Ste 740

City
Washington

State
DC

Zip Code
20001-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Intl Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1763.06

Date of Receipt

08 / 31 / 2026

Transaction ID : PR947660846143

Amount of Each Receipt this Period

209.70

☐ Memo Item

P/R Deduction (\$104.85 Bi-Weekly)

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

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

633.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 70 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Huff, Andrew, , ,Mailing Address 444 N Capitol St
Ste 740City
WashingtonState
DCZip Code
20001-1512FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Senior Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1285.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR947673646143

Amount of Each Receipt this Period

152.90

☐ Memo Item

P/R Deduction (\$76.45 Bi-Weekly)

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

B. Ottaviano, Crystal, , ,Mailing Address 1 Landmark Sq 22nd Flr
Ste 2250City
StamfordState
CTZip Code
06901-2630FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Chief Risk Officer, Enterprise

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2975.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR948718346143

Amount of Each Receipt this Period

350.00

☐ Memo Item

P/R Deduction (\$175.00 Bi-Weekly)

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

C. Boye, Ernest, L, ,

Mailing Address 7900 Windrose Ave

City
PlanoState
TXZip Code
75024-0418FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Sr Director, Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR948952946143

Amount of Each Receipt this Period

274.66

☐ Memo Item

P/R Deduction (\$137.33 Bi-Weekly)

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

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

777.56

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

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☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Wilson, Jeffrey, , ,

Mailing Address 350 E 96th St

City
IndianapolisState
INZip Code
46240-3702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Manager, SC Field Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR950477546143

Amount of Each Receipt this Period

200.00

☐ Memo Item

P/R Deduction (\$100.00 Bi-Weekly)

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

B. Iler, Keith, , ,

Mailing Address 350 E 96th St

City
IndianapolisState
INZip Code
46240-3702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Regional General Manager, IA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR950484046143

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

C. Berner, Wayne, , ,

Mailing Address 518 E. Broad Street

City
ColumbusState
OHZip Code
43215-3901FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
SC State Product Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1407.88

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR950557646143

Amount of Each Receipt this Period

167.28

☐ Memo Item

P/R Deduction (\$83.64 Bi-Weekly)

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

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

467.28

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

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

FOR LINE NUMBER: PAGE 72 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Klosterman, Elise, Delanglade, ,

Mailing Address 518 E. Broad Street

City
Columbus

State
OH

Zip Code
43215-3901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Sr Public Aff Off& Dir-Strategic Polic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1462.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR950593146143

Amount of Each Receipt this Period

172.00

☐ Memo Item

P/R Deduction (\$86.00 Bi-Weekly)

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

B. Schloemer, Mark, , ,

Mailing Address 518 E. Broad Street

City
Columbus

State
OH

Zip Code
43215-3901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Senior Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 31 / 2026

Transaction ID : PR950647146143

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

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

C. Becker, John, , ,

Mailing Address 518 E. Broad Street

City
Columbus

State
OH

Zip Code
43215-3901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Underwriting Manager, CI

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

230.12

Date of Receipt

08 / 31 / 2026

Transaction ID : PR950651046143

Amount of Each Receipt this Period

27.56

☐ Memo Item

P/R Deduction (\$13.78 Bi-Weekly)

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

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

249.56

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 73 OF 74
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Larson, Paul, , ,Mailing Address 1 N Franklin St
Ste 1700City
ChicagoState
ILZip Code
60606-3424FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
General Manager, Financial Lines

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR951098546143

Amount of Each Receipt this Period

150.00

☐ Memo Item

P/R Deduction (\$75.00 Bi-Weekly)

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

B. Kurland, Mark, , ,Mailing Address 1415 W Diehl Road
Suite 205City
NapervilleState
ILZip Code
60563-2349FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Exec Underwriting Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR952818446143

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

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

C. Piela, Amy, , ,

Mailing Address 157 Berkeley St

City
BostonState
MAZip Code
02116-5108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUALOccupation (for Individual)
Managing Director, LMI Operational Str

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1240.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2026

Transaction ID : PR953459146143

Amount of Each Receipt this Period

153.84

☐ Memo Item

P/R Deduction (\$76.92 Bi-Weekly)

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

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

403.84

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

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

FOR LINE NUMBER: PAGE 74 OF 74
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Liberty Mutual Insurance Company - PAC

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

A. Peterson, Corey, , ,

Mailing Address 425 Town Plaza Avenue
Suite 217

City
Ponte Vedra

State
FL

Zip Code
32081-5164

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Senior Public Affairs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.90

Date of Receipt

08 / 31 / 2026

Transaction ID : PR958412746143

Amount of Each Receipt this Period

86.78

☐ Memo Item

P/R Deduction (\$43.39 Bi-Weekly)

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

B. Zimet, Patrick, Daniel, ,

Mailing Address 444 N Capitol St
Ste 740

City
Washington

State
DC

Zip Code
20001-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LIBERTY MUTUAL

Occupation (for Individual)
Director, International Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.42

Date of Receipt

08 / 31 / 2026

Transaction ID : PR964436446143

Amount of Each Receipt this Period

80.76

☐ Memo Item

P/R Deduction (\$40.38 Bi-Weekly)

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

/ /

Amount of Each Receipt this Period

☐ Memo Item

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

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

167.54

30198.98