

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
American Insurance Association Political Action Committee

ADDRESS (number and street) 1130 Connecticut Avenue NW
Suite 1000
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00103143
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 28 2006 through 12 31 2006

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 Leigh Ann Pusey

Signature of Treasurer Electronically Filed by Leigh Ann Pusey Date 01 25 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
American Insurance Association Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		7358.44
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	25654.83									
(c) Total Receipts (from Line 19)	1401.67	117519.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27056.50	124877.52								
7. Total Disbursements (from Line 31)	7591.34	105412.36								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19465.16	19465.16								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
American Insurance Association Political Action Committee

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	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	1205.58	67844.90
(i) Itemized (use Schedule A)	192.20	3651.60
(ii) Unitemized	1397.78	71496.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	46000.00
(c) Other Political Committees (such as PACs)	1397.78	117496.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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.)	3.89	22.58
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1401.67	117519.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1401.67	117519.08

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	5.00	60.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	5.00	60.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7586.34	105352.36
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	7591.34	105412.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	7591.34	105412.36

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	1397.78	117496.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1397.78	117496.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5.00	60.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5.00	60.00

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

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

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

NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Fred Bosse		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6
Mailing Address 28224 Equestrian		Transaction ID: 20061218--21
City State Zip Code Fair Oaks Ranch TX 78015-4655	Amount of Each Receipt this Period 36.06	
FEC ID number of contributing federal political committee. C		
Name of Employer American Insurance Association	Occupation Vice President; Southwest Region	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 926.12	

Full Name (Last, First, Middle Initial) B. Fred Bosse		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 6
Mailing Address 28224 Equestrian		Transaction ID: 20061206--22
City State Zip Code Fair Oaks Ranch TX 78015-4655	Amount of Each Receipt this Period 36.06	
FEC ID number of contributing federal political committee. C		
Name of Employer American Insurance Association	Occupation Vice President; Southwest Region	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 926.12	

Full Name (Last, First, Middle Initial) C. Andrew Cantor		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 6
Mailing Address 207A Constitution Ave NE		Transaction ID: 20061218--24
City State Zip Code Washington DC 20002-7307	Amount of Each Receipt this Period 69.23	
FEC ID number of contributing federal political committee. C		
Name of Employer American Insurance Association	Occupation Vice President; Federal Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1799.98	

SUBTOTAL of Receipts This Page (optional) ▶	141.35
TOTAL This Period (last page this line number only) ▶	

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

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

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

NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

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

Mailing Address 207A Constitution Ave NE

City Washington State DC Zip Code 20002-7307

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

Name of Employer American Insurance Association Occupation Vice President; Federal Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1799.98

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--25

Amount of Each Receipt this Period
69.23

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

Mailing Address 7700 Penelope Circle

City Austin State TX Zip Code 78759-6403

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

Name of Employer American Insurance Association Occupation Assistant Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 277.68

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--22

Amount of Each Receipt this Period
10.68

C. Full Name (Last, First, Middle Initial)
John R Marlow

Mailing Address 7700 Penelope Circle

City Austin State TX Zip Code 78759-6403

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

Name of Employer American Insurance Association Occupation Assistant Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 277.68

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--23

Amount of Each Receipt this Period
10.68

SUBTOTAL of Receipts This Page (optional)	▶	90.59
TOTAL This Period (last page this line number only)	▶	

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

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

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

NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Cecil Pearce

Mailing Address PO Box 13686

City State Zip Code
Tallahassee FL 32317-3686

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

Name of Employer American Insurance Association
Occupation Vice President; SE Region

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
936.52

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--20

Amount of Each Receipt this Period
36.02

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

Mailing Address PO Box 13686

City State Zip Code
Tallahassee FL 32317-3686

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

Name of Employer American Insurance Association
Occupation Vice President; SE Region

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
936.52

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--21

Amount of Each Receipt this Period
36.02

C. Full Name (Last, First, Middle Initial)
Leigh Ann Pusey

Mailing Address 1119 Alexandria Avenue

City State Zip Code
Alexandria VA 22308-1015

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

Name of Employer American Insurance Association
Occupation Senior Vice President - Federal Affair

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4999.80

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--25

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional)	264.34
TOTAL This Period (last page this line number only)	

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

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

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

NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Leigh Ann Pusey

Mailing Address 1119 Alexandria Avenue

City State Zip Code
Alexandria VA 22308-1015

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

Name of Employer American Insurance Association
Occupation Senior Vice President - Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4999.80

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--26

Amount of Each Receipt this Period
192.30

B. Full Name (Last, First, Middle Initial)
Melissa W Shelk

Mailing Address 4845 Yorktown Boulevard

City State Zip Code
Arlington VA 22207-2737

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

Name of Employer American Insurance Association
Occupation Vice President-Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--26

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Melissa W Shelk

Mailing Address 4845 Yorktown Boulevard

City State Zip Code
Arlington VA 22207-2737

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

Name of Employer American Insurance Association
Occupation Vice President-Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--27

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	292.30
TOTAL This Period (last page this line number only)	

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

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

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

NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Margaret Simmons

Mailing Address 4743 Bradley Blvd

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer American Insurance Association
Occupation Vice President; Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--27

Amount of Each Receipt this Period
70.00

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

Mailing Address 4743 Bradley Blvd

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer American Insurance Association
Occupation Vice President; Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--28

Amount of Each Receipt this Period
70.00

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

Mailing Address 410 Lincoln Avenue

City State Zip Code
Falls Church VA 22046-2618

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

Name of Employer American Insurance Association
Occupation Assistant General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--7

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)	▶	165.00
TOTAL This Period (last page this line number only)	▶	

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

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

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

NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

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

Mailing Address 410 Lincoln Avenue

City Falls Church State VA Zip Code 22046-2618

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

Name of Employer American Insurance Association Occupation Assistant General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--8

Amount of Each Receipt this Period
 25.00

B. Full Name (Last, First, Middle Initial)
Allan J Stein

Mailing Address 5513 Roosevelt Street

City Bethesda State MD Zip Code 20817-3781

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

Name of Employer American Insurance Association Occupation Assistant General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--8

Amount of Each Receipt this Period
 25.00

C. Full Name (Last, First, Middle Initial)
Allan J Stein

Mailing Address 5513 Roosevelt Street

City Bethesda State MD Zip Code 20817-3781

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

Name of Employer American Insurance Association Occupation Assistant General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--9

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

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

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

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

NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

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

Mailing Address 12421 Madeley Lane

City State Zip Code
Bowie MD 20715-2904

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

Name of Employer American Insurance Association
Occupation Senior Research Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--3

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
David L Unnewehr

Mailing Address 12421 Madeley Lane

City State Zip Code
Bowie MD 20715-2904

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

Name of Employer American Insurance Association
Occupation Senior Research Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--4

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Lisa Van Varick

Mailing Address 3812 9th Road South

City State Zip Code
Arlington VA 22204

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

Name of Employer American Insurance Association
Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1456.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--28

Amount of Each Receipt this Period
56.00

SUBTOTAL of Receipts This Page (optional)	76.00
TOTAL This Period (last page this line number only)	

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

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

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

NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Lisa Van Varick

Mailing Address 3812 9th Road South

City State Zip Code
Arlington VA 22204

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

Name of Employer American Insurance Association
Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1456.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--29

Amount of Each Receipt this Period
56.00

B. Full Name (Last, First, Middle Initial)
Pamela A Young

Mailing Address 14544 Cutstone Way

City State Zip Code
Silver Spring MD 20905-7430

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

Name of Employer American Insurance Association
Occupation Assistant General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 2 / 2 0 0 6

Transaction ID: 20061218--11

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Pamela A Young

Mailing Address 14544 Cutstone Way

City State Zip Code
Silver Spring MD 20905-7430

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

Name of Employer American Insurance Association
Occupation Assistant General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 8 / 2 0 0 6

Transaction ID: 20061206--12

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)	76.00
TOTAL This Period (last page this line number only)	

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

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

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

NAME OF COMMITTEE (In Full)
American Insurance Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
J. Stephen Zielezienski

Mailing Address 10514 James Wren Way

City State Zip Code
Fairfax VA 22030-8119

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

Name of Employer American Insurance Association
Occupation Sr. Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

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

Transaction ID: 20061218--12

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)	▶	25.00
TOTAL This Period (last page this line number only)	▶	1205.58

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 17

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

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)
American Insurance Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Bob Corker for Senate		Transaction ID: 14926-5793725848197 Date of Disbursement 11 / 30 / 2006
Mailing Address 518 Georgia Avenue 2nd Floor		Amount of Each Disbursement this Period 500.00
City Chatanooga State TN Zip Code 37403	Category/ Type	
Purpose of Disbursement 2006 General Debt Retirement		
Candidate Name Corker Bob		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Four Seasons Hotel		Transaction ID: V44138-9670373797416 Date of Disbursement 12 / 05 / 2006
Mailing Address 2800 Pennsylvania Ave, NW		Amount of Each Disbursement this Period 1286.34
City Washington State DC Zip Code 20007	Category/ Type	
Purpose of Disbursement Catering		
Candidate Name Sununu John		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Chris Dodd		Transaction ID: 14967-6365625262260 Date of Disbursement 12 / 01 / 2006
Mailing Address PO Box 270701		Amount of Each Disbursement this Period 2500.00
City West Hartford State CT Zip Code 06127	Category/ Type	
Purpose of Disbursement 2010 Primary		
Candidate Name Dodd Christopher		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4286.34
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 17

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

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)
American Insurance Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Friends of Chris Dodd		Transaction ID: 26420-5647241473197 Date of Disbursement 12 / 13 / 2006
Mailing Address PO Box 270701		Amount of Each Disbursement this Period 500.00
City West Hartford State CT Zip Code 06127	Category/ Type	
Purpose of Disbursement 2010 Primary		
Candidate Name Dodd Christopher		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) B. Karen Carter for Congress		Transaction ID: 14926-4480096697807 Date of Disbursement 11 / 30 / 2006
Mailing Address 1215 Prytania Street Suite 364A		Amount of Each Disbursement this Period 1000.00
City New Orleans State LA Zip Code 70130	Category/ Type	
Purpose of Disbursement 2006 Run-Off		
Candidate Name Carter Karen		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) C. Melissa Bean for Congress		Transaction ID: 67797-4609796404838 Date of Disbursement 12 / 13 / 2006
Mailing Address Post Office Box 3068		Amount of Each Disbursement this Period 1000.00
City Barrington State IL Zip Code 60010	Category/ Type	
Purpose of Disbursement 2006 General Debt Retirement		
Candidate Name Bean Melissa		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 17

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

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)

American Insurance Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Team Sununu

Mailing Address PO Box 500

City Rye State NH Zip Code 03870

Purpose of Disbursement
2008 Primary

Candidate Name
Sununu John

Office Sought: House
 Senate
 President

State: NH District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: 67797-7622033953666

Date of Disbursement

12 / 13 / 2006

Amount of Each Disbursement this Period

800.00

SUBTOTAL of Disbursements This Page (optional)

800.00

TOTAL This Period (last page this line number only)

7586.34