

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
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

ADDRESS (number and street) 20 F Street, NW Suite 610
Check if different than previously reported. (ACC) Washington DC 20001

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00022343
3. IS THIS REPORT NEW OR AMENDED (A)
[x] (N) [] (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Oct 20 (M10) [x], Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 09/01/2016 through 09/30/2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Riedel, Nathan M., , ,
Type or Print Name of Treasurer

Signature of Treasurer Riedel, Nathan M., , , [Electronically Filed] Date 10/20/2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="226141.83"/>	<input type="text" value="226141.83"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="25578.56"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="56919.02"/>	<input type="text" value="727805.32"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="82497.58"/>	<input type="text" value="953947.15"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="74117.42"/>	<input type="text" value="945566.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="8380.16"/>	<input type="text" value="8380.16"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	44829.02	562951.80
(ii) Unitemized	12090.00	160853.52
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	56919.02	723805.32
(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)	56919.02	723805.32
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	4000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	56919.02	727805.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	56919.02	727805.32

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1117.42	16766.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1117.42	16766.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	73000.00	928000.00
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	800.00
(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	800.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	74117.42	945566.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74117.42	945566.99

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)	56919.02	723805.32
34. Total Contribution Refunds (from Line 28(d))	0.00	800.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	56919.02	723005.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1117.42	16766.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1117.42	16766.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. McPhillips, Jen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 F Street NW Suite 610

City Washington	State DC	Zip Code 20001-6707
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Independent Insurance Agents & Brokers	Occupation (for Individual) Assistant Vice President, Government A
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 09 / 01 / 2016
Transaction ID : 14308391

Amount of Each Receipt this Period
 600.00

Memo Item

B. Wolcott, Vickie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 Monument Cir Ste 500

City Indianapolis	State IN	Zip Code 46204-5911
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) M.J. Schuetz Insurance Services, Inc	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : 14313384

Amount of Each Receipt this Period
 250.00

Memo Item

C. McClain, J. Theodore, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 S Main St

City Paris	State KY	Zip Code 40361-1706
---------------	-------------	------------------------

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

Name of Employer (for Individual) The Hopewell Company, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 09 / 07 / 2016
Transaction ID : 14313385

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Jowers, L Victor, , , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2004 W Dekalb St
 City Camden State SC Zip Code 29020-2058
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Upchurch & Jowers Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 07 / 2016
Transaction ID : 14313393
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Hawley, Spencer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 Main Ave
 City Brookings State SD Zip Code 57006-2059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hawley Insurance, Inc. dba Hawley Insu Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2016
Transaction ID : 14360528
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Manning, Justin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10091 Park Run Dr # 200
 City Las Vegas State NV Zip Code 89145-8868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Swarts Manning & Associates Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 14 / 2016
Transaction ID : 14360530
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Childers, Mitch, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6821 E Baker St
 City Tucson State AZ Zip Code 85710-2228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jones-Wilson Insurance & Investments, Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2016
Transaction ID : 14360531
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Blumberg, Barry, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 82030
 City Baton Rouge State LA Zip Code 70884-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blumberg and Associates, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 14 / 2016
Transaction ID : 14360533
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Decoste-Zaiger, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 230 Gardner St
 City Hingham State MA Zip Code 02043-3844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Walter J May Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 14 / 2016
Transaction ID : 14360534
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Cupp, Jonathan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 640
 City Paragould State AR Zip Code 72451-0640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M. F. Block Insurance, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360549
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Higginbothom, Drew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8315 Cantrell Ste 300
 City Little Rock State AR Zip Code 72227-2357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BancorpSouth Insurance Services, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360550
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Jackson, Nancy, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 N Market St
 City Benton State AR Zip Code 72015-3734
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Roberson & Associates Insurance, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360551
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Browne, Dan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7310 Madison Street
 City Forest Park State IL Zip Code 60130-1706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Forest Agency Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360552
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Anton, Michael, R., , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 S Calumet Rd
 City Chesterton State IN Zip Code 46304-2433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Anton Insurance Agency, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360553
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Michaud, Lawrence, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 High St Suite 220
 City North Andover State MA Zip Code 01845-2646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Michaud, Rowe and Ruscak Insurance Ass Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360563
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Skelly, Thomas, F., Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 Washington St
 City Wellesley Hills State MA Zip Code 02481-1928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Deland Gibson Insurance Assoc Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : 14360566
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Pearsall, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Eastowne Dr Ste 208
 City Chapel Hill State NC Zip Code 27514-2299
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Business Insurers of the Carolinas Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : 14360570
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Chastain, David, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10822 Old Mill Rd Ste 2
 City Omaha State NE Zip Code 68154-2608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chastain Insurance Agency, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : 14360571
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Laday-Davis, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1313 Cuming St Ste 200
 City Omaha State NE Zip Code 68102-4439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Davis Insurance Agency, Inc. Occupation (for Individual) Agency Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360572
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Bixby, Ronald, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 Main St
 City Ludlow State VT Zip Code 05149-1040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ludlow Insurance Agency Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360575
 Amount of Each Receipt this Period 400.00
 Memo Item

C. Dale, Robb, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 Unity St
 City Bellingham State WA Zip Code 98225-4418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUB International NW Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360577
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1150.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 13 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Hargreaves, David, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 N 2nd St
 City Yakima State WA Zip Code 98901-2379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hub International NW/Argus Insurance, Occupation (for Individual) Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360578
 Amount of Each Receipt this Period 250.00
 Memo Item

B. McEuin, Darren, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1804 W Lewis
 City Pasco State WA Zip Code 99301-4958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Conover Insurance Services LLC. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360579
 Amount of Each Receipt this Period 500.00
 Memo Item

C. McQuary, Don, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 615 5th St
 City Clarkston State WA Zip Code 99403-1970
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stonebraker McQuary Agency Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360580
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1750.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Radford, Frank, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 Kirkland Way Ste 100
 City Kirkland State WA Zip Code 98033-6021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) McDonald Insurance Group, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360581
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Stauffacher, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 802 Alta Vista Place
 City Fircrest State WA Zip Code 98466-7020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stauffacher Communications Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360582
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Taylor, Tom, G., , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3401 S 19th St Ste 200
 City Tacoma State WA Zip Code 98405-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Taylor-Thomason Insurance Brokers Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360583
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 71
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Young, Dean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 625
 City Bothell State WA Zip Code 98041-0625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUB International NW Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360584
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Rydbom, Michael, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 920 SW Center Street
 City Pullman State WA Zip Code 99163-2770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360621
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Clarkson, Robert, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 W Main St # 1500
 City Louisville State KY Zip Code 40202-2927
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R.H. Clarkson Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360626
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. McClain, Joseph, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 820 S Main St
 City Paris State KY Zip Code 40361-1706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Hopewell Company, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360629
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Rankin, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 South Third Street Suite 300
 City Louisville State KY Zip Code 40202-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sterling G. Thompson Company Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360635
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Thompson, Steve, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 South Third Street Suite 300
 City Louisville State KY Zip Code 40202-1936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sterling G. Thompson Company Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360636
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Werner, Robert, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 N Main St
 City Madisonville State KY Zip Code 42431-1552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rudd Insurance, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360637
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Hulme, George, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 Union Ave
 City Framingham State MA Zip Code 01702-8216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Fitts Insurance Agency Inc Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360641
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Tapley, Wendy, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 York St
 City York State ME Zip Code 03909-1006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tapley Insurance Agency, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360646
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Granger, Beverly, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 W Main
 City Neosho State MO Zip Code 64850-1712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Selby-Granger Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : 14360647
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Lensing, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8315 Cantrell Ste 300
 City Little Rock State AR Zip Code 72227-2357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BancorpSouth Insurance Services, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368907
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Hair, Lanny, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 E Flower St
 City Phoenix State AZ Zip Code 85012-2611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Independent Insurance Agents and Broke Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368911
 Amount of Each Receipt this Period 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	192.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. McCarron, Gillian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7728 Vance Drive
 City Arvada State CO Zip Code 80003-2140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lakeside Insurance Center Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : 14368913
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Rifkin, Michael, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 Blake Street # 2G
 City Denver State CO Zip Code 80111-3361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rifkin Insurance Assocs Inc Occupation (for Individual) Agency Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : 14368914
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Byrnes, James, J., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 cady lane
 City Woodstock State CT Zip Code 06281-1800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Byrnes Agency, Inc Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt
 09 / 15 / 2016
Transaction ID : 14368915
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Wilson, Lawrence, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 AAA Blvd Ste A
 City Newark State DE Zip Code 19713-3624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) S T Good Insurance, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368918
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Courtheyn, Doreen, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 E New York Ave
 City Deland State FL Zip Code 32724-6041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Page Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 603.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368920
 Amount of Each Receipt this Period 67.00
 Memo Item

C. Della Porta, Veronica, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7807 Baymeadows Rd East Ste 301
 City Jacksonville State FL Zip Code 32256-9667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Della Porta Group, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368921
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	292.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Martin, Lee, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3159 Shamrock South

City Tallahassee	State FL	Zip Code 32309-3337
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Florida Association of Insurance Agent	Occupation (for Individual) Director of Health & Benefits
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : 14368923

Amount of Each Receipt this Period
30.00

Memo Item

B. Coard, Andrew, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 209 S Jefferson Ave

City Eatonton	State GA	Zip Code 31024-1127
------------------	-------------	------------------------

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

Name of Employer (for Individual) The Peoples Agency, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : 14368929

Amount of Each Receipt this Period
25.00

Memo Item

C. Harbour, Stark, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4562 Lawrenceville Hwy
Suite 120

City Lilburn	State GA	Zip Code 30047-3650
-----------------	-------------	------------------------

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

Name of Employer (for Individual) William Adams & Associates, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : 14368938

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	455.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Monk, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 N Isabella St
 City Sylvester State GA Zip Code 31791-2158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Worth Insurance Agency, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368943
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Moore, Robert, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 Davis Rd
 City Augusta State GA Zip Code 30907-2407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blanchard & Calhoun Insurance Agency, Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368944
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Nevison, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8744 Main St Suite 301
 City Woodstock State GA Zip Code 30188-4901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mountain Lakes Insurance, LLC Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368945
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Olson, Betsy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4555 Mansell Road Suite 300
 City Alpharetta State GA Zip Code 30022-8279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Independent Insurance Agents of Georgi Occupation (for Individual) Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368946
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Smith, Ash, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 Davis Rd
 City Augusta State GA Zip Code 30907-2407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blanchard & Calhoun Insurance Agency, Occupation (for Individual) Account Executive, VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368953
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Stiles, Wilson, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 214 Andrews St
 City Rossville State GA Zip Code 30741-1603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Agency Service Group, Inc. dba Flegal Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368955
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Tapley, Gregory, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 885 Wimbish Rd
 City Macon State GA Zip Code 31210-4327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tapley & Associates Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368957
 Amount of Each Receipt this Period 41.67
 Memo Item

B. Tripp, Roslyn, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 Old National Hwy Bldg I
 City College Park State GA Zip Code 30349-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tripp Insurance Services Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368958
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Tripp, George, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 Old National Hwy Bldg I
 City College Park State GA Zip Code 30349-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tripp Insurance Services Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368959
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	241.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Tripp, Lashaune, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5526 Old National Hwy
 Bldg I
 City College Park State GA Zip Code 30349-3212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tripp Insurance Services Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368960
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Watford, Derek, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 Commerce St
 City Hawkinsville State GA Zip Code 31036-8416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Embark insurance Group, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368963
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Henricks, Todd, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 S Jackson St
 City Cerro Gordo State IL Zip Code 61818-0110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chapman-Henricks Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368966
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Schultheis, Brett, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32 N Weinbach Ave
 City Evansville State IN Zip Code 47711-6004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Schultheis Insurance Agency Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368968
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Blumberg, Andy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 82030
 City Baton Rouge State LA Zip Code 70884-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blumberg and Associates, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368969
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Case, Brenda, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2001 1st St
 City Slidell State LA Zip Code 70458-3401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lowry-Dunham, Case & Vivien Group Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368971
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Durand-McMorris, Lydia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Convention St Ste 200
 City Baton Rouge State LA Zip Code 70802-5616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regions Insurance Occupation (for Individual) Account Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1863.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368972
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Hughes, Bret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 S Purpera Ave Ste 100
 City Gonzales State LA Zip Code 70737-4379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hughes Insurance Services, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368974
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Jenkins, Richard, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1018 Main St
 City Franklinton State LA Zip Code 70438-1709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Moore & Jenkins Ins. Agcy., LLC Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368975
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Kean, Richard, G., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 Convention St Ste 200

City Baton Rouge	State LA	Zip Code 70802-5616
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Regions Insurance	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : 14368976

Amount of Each Receipt this Period
150.00

Memo Item

B. Record, Neil, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10942 Plank Rd

City Clinton	State LA	Zip Code 70722-3311
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Record Agency, Inc.	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : 14368977

Amount of Each Receipt this Period
100.00

Memo Item

C. Stiel, Donelson, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O Box 602

City Franklin	State LA	Zip Code 70538-0602
------------------	-------------	------------------------

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

Name of Employer (for Individual) David H. Stiel, Jr. Agency, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2016

Transaction ID : 14368978

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Douglas, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 Main St
 City Pepperell State MA Zip Code 01463-1527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) L F Robbins Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : 14368979
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Gaudette III, Lee, , , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address One Plummers Corner
 City Whitinsville State MA Zip Code 01588-2135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gaudette Insurance Agency, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : 14368980
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Richard, Philip, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27 Garden St # 1B
 City Danvers State MA Zip Code 01923-1430
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Phil Richard & Assoc Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2016
Transaction ID : 14368981
 Amount of Each Receipt this Period
 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Jetmore, Ronald, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9545 HG Trueman Rd
 City Lusby State MD Zip Code 20657-2876
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jetmore Insurance Group, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368982
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Walker, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8884 Commerce Rd
 City Commerce Twp State MI Zip Code 48382-4413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Insurance Advisors Inc Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368987
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Hunt, Darian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 S Lexington
 City Le Center State MN Zip Code 56057-1310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) House of Insurance Agency, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368988
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	90.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Bailey, Anna, T.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6207 Park South Dr # 201
 City Charlotte State NC Zip Code 28210-3653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Allen Tate Insurance Services, LLC. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14368992
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Hagerman, Kenneth, D.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O Box 740
 City Stratford State NJ Zip Code 08084-0740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Laurel, Coe & Associates, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369002
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Hagerman, Nancy, J.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 645 10th Ave
 City Lindenwold State NJ Zip Code 08021-3719
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Laurel, Coe & Associates, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369003
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Crowley, Thomas, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Hampton Rd Ste 1B
 City Southampton State NY Zip Code 11968-5098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cook Maran & Associates Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369004
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Sadlak, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 160 W Main St
 City Vernon Rockville State CT Zip Code 06066-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Max Sadlak Agcy Inc Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369006
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Sutton, James, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 143 E Main St Ste 1
 City East Islip State NY Zip Code 11730-2601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) James F. Sutton Agency Ltd. Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369008
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Sullivan, TJ, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1786 State St
 City Salem State OR Zip Code 97301-4341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Huggins / Bliss Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.15

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369011
 Amount of Each Receipt this Period 83.35
 Memo Item

B. Russell, Rick, , , II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5050 Ritter Rd
 City Mechanicsburg State PA Zip Code 17055-4879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Insurance Agents & Brokers Service Gro Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369012
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Bates, David, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 549 Hope St
 City Bristol State RI Zip Code 02809-1832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A N Nunes Agency, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369014
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	218.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Male, Mark, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2400 Post Rd
 City Warwick State RI Zip Code 02886-2208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RI Association of Insurance Agents, In Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369015
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Edwards, Kent, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1066 Asheville Hwy
 City Spartanburg State SC Zip Code 29303-2635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Correll Insurance Group, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369017
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Muller, Andrew, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 Johnnie Dodds Blvd Ste 102
 City Mount Pleasant State SC Zip Code 29464-3045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mappus Ins Agcy Inc Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369021
 Amount of Each Receipt this Period 10.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 71
	<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"/>	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Sheppard, G Frank, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 Gracern Rd
 City Columbia State SC Zip Code 29210-7693
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IIABSC Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 945.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369022
 Amount of Each Receipt this Period 85.00
 Memo Item

B. Tadlock, Terry, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Bow Circle
 City Hilton Head Island State SC Zip Code 29928-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Coastal Plains Insurance LLC Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369023
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Theodore, Andrew, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1700 Laurel Street
 City Columbia State SC Zip Code 29201-2625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Theodore & Associates Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 756.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369024
 Amount of Each Receipt this Period 84.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	269.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Wiseman, Matthew, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 Ronnie Court
 City Myrtle Beach State SC Zip Code 29579-4142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Peoples Underwriters, Inc. - Myrtle Be Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369026
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Bradshaw, Robert, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8600 Mayland Dr
 City Richmond State VA Zip Code 23294-4702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Independent Insurance Agents of Virgin Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369028
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Via, Tommy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 Hubbard St Ste A
 City Blacksburg State VA Zip Code 24060-5745
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Leonard L Brown Agency Inc Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369030
 Amount of Each Receipt this Period 25.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 71
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Knobeloch, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3109 N 29th St
 City Tacoma State WA Zip Code 98407-6534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ARM Northwest, Inc Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 728.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369031
 Amount of Each Receipt this Period 91.00
 Memo Item

B. Banaszynski, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 John Nolen Drive
 City Madison State WI Zip Code 53713-1421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Independent Insurance Agents of Wiscon Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369032
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Helbach, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 888 State Highway 153
 City Mosinee State WI Zip Code 54455-9601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ansay & Associates LLC Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369033
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	216.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Gulley, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 4J Ct Unit A
 City Gillette State WY Zip Code 82716-4110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HUB International-Gillette Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369035
 Amount of Each Receipt this Period 25.00
 Memo Item

B. O'Connor, Joseph, A, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2450 Severn Ave Suite 208
 City Metairie State LA Zip Code 70001-1972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) O'Connor Insurance Group, LLC Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 15 / 2016
Transaction ID : 14369038
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Tubertini, Ronald, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 795 Woodlands Parkway # 101
 City Ridgeland State MS Zip Code 39157-5217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SouthGroup Insurance and Financial Ser Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : 14371673
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 71
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Wade, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 N Main St
 City Springboro State OH Zip Code 45066-9553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ralph E. Wade Insurance Agency, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : 14371676
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Nilsson, Brett, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2225 Washington Blvd
 Ensign Plaza South Bldg # 210
 City Ogden State UT Zip Code 84401-6886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Buckner Company Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : 14371741
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Buelow, Steven, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 910 S Main
 City Hope State AR Zip Code 71801-6525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Anderson-Frazier Insurance Agency of H Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : 14371743
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Cooke, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 Harrison St Ste 201
 City Batesville State AR Zip Code 72501-6900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) White River Insurance Agency, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2016
Transaction ID : 14371745
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Soto, Alex, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8764 Southwest 61st Place
 City Miami State FL Zip Code 33143-8134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 27 / 2016
Transaction ID : 14371769
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Dawson, Thomas, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 721 1st Avenue North
 City Fargo State ND Zip Code 58102-4903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dawson Insurance Agency, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2016
Transaction ID : 14371780
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Symington, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 F Street NW Suite 610
 City Washington State DC Zip Code 20001-6707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Independent Insurance Agents & Brokers Occupation (for Individual) Senior Vice President, External & Gove
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14371818
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Brassard, Christopher, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1924 Western Ave Ste 1
 City Albany State NY Zip Code 12203-5077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ten Eyck Group Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372502
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Bishop, William, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 63 Commerce Park Dr
 City Westerville State OH Zip Code 43082-8348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Associated Insurance Agencies Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372671
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Malloy, Kevin, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 Village Square
 City Smyrna State DE Zip Code 19977-1852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Pratt Insurance, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : 14372708
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Lorber, Paul, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 W Main
 City New London State IA Zip Code 52645-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lorber Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : 14372709
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Keefe, Jack, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 287 Linden Street
 City Wellesley State MA Zip Code 02482-5910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corcoran & Havlin Insurance Group Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 09 / 28 / 2016
Transaction ID : 14372722
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	875.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 43 OF 71
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Minick, Dick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 541 Paisano St NE Ste A
 City Albuquerque State NM Zip Code 87123-1513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Minick & Company, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372761
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Juffer, Gerrit, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 S Main Ave
 City Wagner State SD Zip Code 57380-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Juffer, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372763
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Luttrell, Mike, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6800 Isaacs Orchard Rd
 City Springdale State AR Zip Code 72762-6096
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Walker Brothers Insurance, Inc. Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372784
 Amount of Each Receipt this Period 275.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1275.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. LaRue, Alex, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 Lincoln Square
 City Hodgenville State KY Zip Code 42748-1551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LaRue Insurance Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372786
 Amount of Each Receipt this Period 500.00
 Memo Item

B. McBride, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3290 West Big Beaver Rd Suite 503
 City Troy State MI Zip Code 48084-2917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mason-McBride, Inc. Occupation (for Individual) Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372794
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Hall, John, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O Box 39
 City Spruce Pine State NC Zip Code 28777-0039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Fortner Insurance Agency, Inc. Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372795
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Haney, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4000 Park Rd
 City Charlotte State NC Zip Code 28209-2388
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ECM Solutions Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372796
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Lipstone, Joshua, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 New Edition Court
 City Cary State NC Zip Code 27511-4451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lipstone Insurance Group Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372798
 Amount of Each Receipt this Period 75.00
 Memo Item

C. Tedder, Ray, , , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5925 Carnegie Blvd Ste 400
 City Charlotte State NC Zip Code 28209-4659
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BB&T - McPhail Bray Insurance Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 28 / 2016
Transaction ID : 14372804
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 71
	<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)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Mintz, Josh, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2890 Pinon Frontage Rd
 City Farmington State NM Zip Code 87402-5033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AVI Risk Management - Insurance Broker Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 28 / 2016**
Transaction ID : 14372807
 Amount of Each Receipt this Period **250.00**
 Memo Item

B. McClain, Claudia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10410 19th Ave SE # 100
 City Everett State WA Zip Code 98208-4278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) McClain Insurance Services, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **09 / 28 / 2016**
Transaction ID : 14372810
 Amount of Each Receipt this Period **500.00**
 Memo Item

C. Otter, Patrick, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20102 Cedar Valley Rd Ste 101
 City Lynnwood State WA Zip Code 98036-6333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Otter Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **09 / 28 / 2016**
Transaction ID : 14372811
 Amount of Each Receipt this Period **250.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Jeney, Jay, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 495 Main St
 City Metuchen State NJ Zip Code 08840-1454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Schenck Agency, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : 14372843
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Wyrsh, Dan, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12800 Long Beach Blvd
 City Long Beach Township State NJ Zip Code 08008-2839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Van Dyk Group Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : 14372848
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Statland, Julie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8811 Colesville Rd Ste 2
 City Silver Spring State MD Zip Code 20910-4350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Statland & Katz, LTD Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 29 / 2016
Transaction ID : 14373063
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Rhodes, Martin, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 Center St Ste 1400

City Little Rock	State AR	Zip Code 72201-4416
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Stephens Insurance, LLC	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : 14373853

Amount of Each Receipt this Period
250.00

Memo Item

B. Rue, William, M., , Sr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3812 Quakerbridge Road

City Hamilton	State NJ	Zip Code 08619-1004
------------------	-------------	------------------------

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

Name of Employer (for Individual) Rue Insurance	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : 14373856

Amount of Each Receipt this Period
1000.00

Memo Item

C. Graham, Michael, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 E Florida Ave
Suite 400

City Denver	State CO	Zip Code 80210-2543
----------------	-------------	------------------------

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

Name of Employer (for Individual) Automotive Risk Consultants, Inc	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

Transaction ID : 14373859

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Clein, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 NW 150 Ave Ste 101
 City State Zip Code
 Pembroke Pines FL 33028-2872
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 C & C Insurance, Inc. President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : 14373872
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Brown, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3731 S Tuttle Ave
 City State Zip Code
 Sarasota FL 34239-6410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Ben Brown Insurance Agency, Inc. Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : 14373874
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Traeger, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3350 S Dixie Highway
 City State Zip Code
 Miami FL 33133-3610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Kahn-Carlin and Company, Inc VP of Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 09 / 29 / 2016
Transaction ID : 14373878
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Allen, Brooks, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 Solana Rd
 Ste 2A
 City Ponte Vedra Beach State FL Zip Code 32082-5230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) St. Johns Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : 14373880
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Pennington, Donald Ray, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 Jere Ford Memorial Hwy
 City Dyersburg State TN Zip Code 38024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tigrett & Pennington, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : 14373882
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Parker, Eric, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4880 Newberry Rd Ste 100
 City Gainesville State FL Zip Code 32607-5214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Willis of Florida, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : 14373884
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. McIntire, Bob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O Box 1336
 City Cleveland State TN Zip Code 37364-1336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) McIntire & Assoc Insurance Real Estate Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : 14373894
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Zabo, Neil, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 Cedar Bluff Rd Ste 108
 City Knoxville State TN Zip Code 37930-2545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Insurance Group, L.L.C. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : 14373900
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Fletcher, Cynthia, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2433 Gulf to Bay Blvd
 City Clearwater State FL Zip Code 33765-4300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alley Rehbaum & Capes Assurance, Inc. Occupation (for Individual) Chief Operating Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016
Transaction ID : 14373904
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Shobe, Jerry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 401 N 4th St Ste 201
 City Bismarck State ND Zip Code 58501-4023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Insurance, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : 14373910
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. Laurie, John, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 8th Ave W
 City Bradenton State FL Zip Code 34205-7711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BB&T Insurance Services Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : 14373913
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Brown, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3500 Ridge Top Court
 City Louisville State KY Zip Code 40299-6338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Garrett-Stotz Company Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : 14373915
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 71
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Randolph, Tabb, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 622 Main St
 City Woodland State CA Zip Code 95695-3405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Wraith Scarlett & Randolph Insurance S Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : 14373917
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. Hill, Bruce Wm, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 Essex St
 City Millburn State NJ Zip Code 07041-1315
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 R. Bruce Hill Agency, Ltd. Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : 14373923
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Strate, Thomas, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1750 West Andrew Johnson Hwy
 City Morristown State TN Zip Code 37814-3737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Strate Insurance Group Inc Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : 14373934
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 54 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Turner, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 908 Lily Creek Rd Suite 201
 City Louisville State KY Zip Code 40243-2807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Heritage Insurance Service, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2016
Transaction ID : 14373941
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Ford, Neel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 Frederica St
 City Owensboro State KY Zip Code 42301-4822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) E. M. Ford & Company, LLC Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2016
Transaction ID : 14373944
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Oubre, Kelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 Texas St
 City Lutcher State LA Zip Code 70071-5333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lanoix Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : 14373973
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Barber, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 E Center
 City Spanish Fork State UT Zip Code 84660-2172
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Western States Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 29 / 2016
Transaction ID : 14373976
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Schexnayder, Danielle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 Texas St
 City Lutcher State LA Zip Code 70071-5333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lanoix Insurance Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : 14374007
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Eggleston, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7807 Baymeadows Rd East Ste 301
 City Jacksonville State FL Zip Code 32256-9667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Della Porta Group, Inc. Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2016
Transaction ID : 14374058
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 71
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

A. Lanoix, Nell, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 504 Iberville St
 City Donaldsonville State LA Zip Code 70346-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Bourg Insurance Agency, Inc. Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : 14378642
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Lanoix, Bryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 Texas St
 City Lutcher State LA Zip Code 70071-5333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Lanoix Insurance Agency Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : 14378643
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Lanoix, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 Texas St
 City Lutcher State LA Zip Code 70071-5333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Lanoix Insurance Agency Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 09 / 30 / 2016
Transaction ID : 14378644
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	44829.02

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Paypal Inc.

Mailing Address 1840 Embarcadero Rd

City Palo Alto State CA Zip Code 94303

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

Transaction ID : 14408575
Amount of Each Disbursement this Period

 Memo Item CREDIT CARD PROCESSING CHARGE

Full Name (Last, First, Middle Initial)

B. Suntrust Merchant Services

Mailing Address P.O. Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
09 / 13 / 2016

FEC Identification Number

Transaction ID : 14408576
Amount of Each Disbursement this Period

 Memo Item CREDIT CARD PROCESSING CHARGE

Full Name (Last, First, Middle Initial)

C. Suntrust Merchant Services

Mailing Address P.O. Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
09 / 13 / 2016

FEC Identification Number

Transaction ID : 14408577
Amount of Each Disbursement this Period

 Memo Item CREDIT CARD PROCESSING CHARGE

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Suntrust Merchant Services

Mailing Address P.O. Box 6600

City
Hagerstown

State
MD

Zip Code
21741

Purpose of Disbursement
CREDIT CARD PROCESSING CHARGE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	6

FEC Identification Number

C []

Transaction ID : 14408578

Amount of Each Disbursement this Period

[] 880.01

Memo Item CREDIT CARD PROCESSING CHARGE

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

[] 880.01

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

[] 1117.42

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Heartland Values PAC

Mailing Address PO Box 505

City
Sioux Falls

State
SD

Zip Code
57101

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : 14312610

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CHERPAC

Mailing Address 1050 17th Street, NW Suite 590

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : 14312611

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HECK PAC

Mailing Address 233 Pennsylvania Avenue, SE 2nd Fl

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C [REDACTED]

Transaction ID : 14312612

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

10000.00

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. DEREK PAC

Mailing Address 119 1st Ave S, Suite 320

City
Seattle

State
WA

Zip Code
98104

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C []

Transaction ID : 14312613

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Tom Reed For Congress

Mailing Address PO Box 10847

City
Rochester

State
NY

Zip Code
14610

Purpose of Disbursement

011

Category/
Type

Candidate Name

Reed, Thomas, , , II

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify)

State: NY

District: 29

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C C00464032

Transaction ID : 14312614

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Brian Fitzpatrick For Congress

Mailing Address PO Box 939

City
Langhorne

State
PA

Zip Code
19047

Purpose of Disbursement

011

Category/
Type

Candidate Name

Fitzpatrick, Brian, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: PA

District: 08

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C C00607416

Transaction ID : 14312618

Amount of Each Disbursement this Period

5000.00

Memo Item

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

10500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Lobo PAC

Mailing Address PO Box 492

City
Albuquerque

State
NM

Zip Code
87103

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C []

Transaction ID : 14312619

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. People For Ben

Mailing Address PO Box 31129

City
Santa Fe

State
NM

Zip Code
87594

Purpose of Disbursement

011

Category/
Type

Candidate Name

Lujan, Ben, Ray, Rep., Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: NM District: 03

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

FEC Identification Number

C C00443689

Transaction ID : 14312620

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mica For Congress

Mailing Address P. O. Box 181546

City
Casselberry

State
FL

Zip Code
32718

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mica, John, L., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 07

Date of Disbursement

MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number

C C00283051

Transaction ID : 14360519

Amount of Each Disbursement this Period

2500.00

Memo Item

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

7500.00

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Royce Campaign Committee

Mailing Address PO Box 3249

City Fullerton State CA Zip Code 92834

Purpose of Disbursement

Category/Type

Candidate Name
Royce, Ed, R., Rep.,

Office Sought: House Senate President
State: CA District: 39

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2016

FEC Identification Number
C C00200865
Transaction ID : 14360520
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RIGHTNOW WOMEN PAC

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General Other (specify)

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number
C
Transaction ID : 14369042
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Yoder For Congress, Inc

Mailing Address PO Box 26742

City Overland Park State KS Zip Code 66225

Purpose of Disbursement

Category/Type

Candidate Name
Yoder, Kevin, , ,

Office Sought: House Senate President
State: KS District: 03

Disbursement For: 2016
 Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number
C C00472365
Transaction ID : 14369043
Amount of Each Disbursement this Period
2000.00

Memo Item

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

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

9500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Joe Wilson For Congress

Mailing Address PO Box 2145

City
West Columbia

State
SC

Zip Code
29171

Purpose of Disbursement

011

Category/
Type

Candidate Name

Wilson, Joe, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SC District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C C00368522

Transaction ID : 14369044

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Lou Barletta For Congress

Mailing Address P.O. Box 128

City
Hazleton

State
PA

Zip Code
18201

Purpose of Disbursement

011

Category/
Type

Candidate Name

Barletta, Lou, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: PA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C C00445122

Transaction ID : 14369045

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Beatty For Congress

Mailing Address 222 East Town Street
Suite 2w

City
Columbus

State
OH

Zip Code
43215

Purpose of Disbursement

011

Category/
Type

Candidate Name

Beatty, Joyce, B., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C C00507368

Transaction ID : 14369046

Amount of Each Disbursement this Period

2500.00

Memo Item

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

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Cheri Bustos

Mailing Address 1050 17th St Nw Ste 590

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement

011

Category/
Type

Candidate Name

Bustos, Cheri, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: IL District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2016

FEC Identification Number

C C00498568

Transaction ID : 14369047

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mooney For Congress

Mailing Address P.O. Box 1863

City
Martinsburg

State
WV

Zip Code
25402

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mooney, Alex, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: WV District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2016

FEC Identification Number

C C00506774

Transaction ID : 14369048

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Rodney For Congress

Mailing Address PO Box 344

City
Taylorville

State
IL

Zip Code
62568

Purpose of Disbursement

011

Category/
Type

Candidate Name

Davis, Rodney, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2016

FEC Identification Number

C C00521948

Transaction ID : 14369079

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Jenkins For Congress

Mailing Address PO Box 727

City
Huntington

State
WV

Zip Code
25711

Purpose of Disbursement

011

Category/
Type

Candidate Name

Jenkins, Evan, Hollins, Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: WV

District: 03

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C00548271

Transaction ID : 14369080

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Kyrsten Sinema For Congress

Mailing Address PO Box 25879

City
Tempe

State
AZ

Zip Code
85285

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sinema, Kyrsten, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify)

State: AZ

District: 09

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C00508804

Transaction ID : 14369081

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Graves For Congress

Mailing Address 2345 Grand Blvd
Ste 2400

City
Kansas City

State
MO

Zip Code
64108

Purpose of Disbursement

011

Category/
Type

Candidate Name

Graves, Samuel, B., Rep., Jr.

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: MO

District: 06

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number

C00359034

Transaction ID : 14369082

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Dennis Ross

Mailing Address Post Office Box 7310

City
Lakeland

State
FL

Zip Code
33807

Purpose of Disbursement

011

Category/
Type

Candidate Name

Ross, Dennis, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C C00459461

Transaction ID : 14369083

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Smucker For Congress

Mailing Address 548 Steel Way
PO Box 7066

City
Lancaster

State
PA

Zip Code
17604

Purpose of Disbursement

011

Category/
Type

Candidate Name

Smucker, Lloyd, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: PA District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

C C00599464

Transaction ID : 14369084

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Carlos Curbelo Congress

Mailing Address 8724 Sw 72nd St

City
Miami

State
FL

Zip Code
33173

Purpose of Disbursement

011

Category/
Type

Candidate Name

Curbelo, Carlos, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2016

FEC Identification Number

C C00546846

Transaction ID : 14371752

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Emmer For Congress

Mailing Address PO Box 998

City
Anoka

State
MN

Zip Code
55303

Purpose of Disbursement

011

Category/
Type

Candidate Name

Emmer, Tom, Earl, Rep., Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MN District: 06

Date of Disbursement

MM / DD / YYYY
09 / 28 / 2016

FEC Identification Number

C C00545749

Transaction ID : 14372528

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Hall For Congress

Mailing Address 249 E. Ocean Blvd. Suite 685

City
Long Beach

State
CA

Zip Code
90802

Purpose of Disbursement

011

Category/
Type

Candidate Name

Hall, Isadore, , , III

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: CA District: 44

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00497859

Transaction ID : 14373977

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Jason Smith For Congress

Mailing Address PO Box 1324

City
Cape Girardeau

State
MO

Zip Code
63702

Purpose of Disbursement

011

Category/
Type

Candidate Name

Smith, Jason, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District: 08

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00541862

Transaction ID : 14373982

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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FOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Schatz For Senate

Mailing Address PO Box 3828

City Honolulu

State HI

Zip Code 96812

Purpose of Disbursement

011

Category/Type

Candidate Name

Schatz, Brian, E., Sen.,

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: HI

District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00540732

Transaction ID : 14373985

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TIM PAC

Mailing Address 499 South Capitol Street, SW Suite

City Washington

State DC

Zip Code 20003

Purpose of Disbursement

011

Category/Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C

Transaction ID : 14373992

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Walberg For Congress

Mailing Address PO Box 1362

City Jackson

State MI

Zip Code 49204

Purpose of Disbursement

011

Category/Type

Candidate Name

Walberg, Tim, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2016

Primary General
 Other (specify) ▼

State: MI

District: 07

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00390724

Transaction ID : 14373993

Amount of Each Disbursement this Period

2000.00

Memo Item

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

4500.00

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Loudermilk For Congress

Mailing Address PO Box 447

City
Cassville

State
GA

Zip Code
30123

Purpose of Disbursement

011

Category/
Type

Candidate Name

Loudermilk, Barry, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 11

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00543892

Transaction ID : 14373994

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Lobiondo For Congress

Mailing Address P. O. Box 550

City
Vineland

State
NJ

Zip Code
08362

Purpose of Disbursement

011

Category/
Type

Candidate Name

LoBiondo, Frank, A., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: NJ District: 02

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00269340

Transaction ID : 14373997

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Jeb Hensarling

Mailing Address PO Box 820504

City
Dallas

State
TX

Zip Code
75382

Purpose of Disbursement

011

Category/
Type

Candidate Name

Hensarling, Jeb, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 05

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00370650

Transaction ID : 14373999

Amount of Each Disbursement this Period

1500.00

Memo Item

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

4000.00

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. Trott For Congress, Inc.

Mailing Address P.O. Box 217

City Troy State MI Zip Code 48099

Purpose of Disbursement

Category/Type

Candidate Name
Trott, David, , ,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: MI District: 11

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C C00548941
Transaction ID : 14374002
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Tiberi For Congress

Mailing Address 2931 E Dublin Granville Road Suite 190

City Columbus State OH Zip Code 43231

Purpose of Disbursement

Category/Type

Candidate Name
Tiberi, Pat, J., Rep.,

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: OH District: 12

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C C00347492
Transaction ID : 14374010
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Battleground PAC

Mailing Address 1001 Pennsylvania Ave, NW Suite 1300 N.

City Washington State DC Zip Code 20004

Purpose of Disbursement

Category/Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number
C
Transaction ID : 14374015
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

4500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Independent Insurance Agents & Brokers of America, Inc. Political Action Committee (InsurPAC)

Full Name (Last, First, Middle Initial)

A. AMERIPAC

Mailing Address 499 S Capitol St SW Ste 406

City
Washington

State
DC

Zip Code
20003-4009

Purpose of Disbursement

011

Category/
Type

Candidate Name
AMERIPAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00271338

Transaction ID : 14374018

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Randy Hultgren For Congress

Mailing Address PO Box 717

City
St Charles

State
IL

Zip Code
60174

Purpose of Disbursement

011

Category/
Type

Candidate Name
Hultgren, Randy, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: IL District: 14

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C C00467522

Transaction ID : 14374022

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

3000.00

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

73000.00