

State of New Mexico
 Office of the Secretary of State
 Ethics Administration
 325 Don Gaspar Suite 300
 Santa Fe, New Mexico 87503
 (800) 477-3632/(505) 827-3600

SECRETARY OF STATE

Dianna J. Duran

Report of Expenditures and Contributions

Political Committee

FORM A

Jul, 2012

Political Committee's Name Property Casualty Insurers Association of America

Date Submitted: 7/3/2012 2:43:42 PM Date Run: 9/5/2012 7:52:41 AM Date Due: 7/5/2012 5:00:00 PM

1. FILING DEADLINES (Check the box that indicates the report being filled)	
4/9/2012 Before 5PM	5/31/2012 Before 5PM
5/14/2012 Before 5PM	<input checked="" type="checkbox"/> 7/5/2012 Before 5PM
5/26/2012 Before 5PM	9/10/2012 Before 5PM

	Political Committee Complete Name		
3.	Property Casualty Insurers Association of America		
	Mailing Address	City, State & Zip Code	
	2600 South River Road	Des Plaines, IL 60018	
	Phone #	Fax #	
	847.297.7800		
4.	Name of President/Chairperson, if any, or Contact Person	Phone #	Fax #
	Mailing Address	City, State, Zip Code	Fax #
5.	Full Name of Treasurer	Phone #	
	Holmes, June	847.297.7800	
	Mailing Address	City, State, Zip Code	Fax #
	2600 South River Road	Des Plaines, IL 60018	
	Name & Street Address of Financial Institution Where bank account is maintained (Bank Account Located in New Mexico)		
	US Bank. 9575 West Higgins Road, Rosemont, NM 87501		

6.	FINANCIAL SUMMARY		
a.	OPENING BALANCE for reporting period ("0" If first report, or CLOSING BALANCE FROM LAST REPORT)		\$76,802.47
b.	Total Monetary Contribution this Reporting Period (Form B1 + Form B3)		\$1,037.00
c.	Total Expenditures this Reporting Period (Form C + Form C1)		\$252.48
d.	Closing Balance this Reporting Period (6a + 6b - 6c)		\$77,586.99
e.	Total Loans To the Committee this Reporting Period (Form A1)		\$0.00
f.	Total unpaid Campaign Debt (Form A1)		\$0.00
g.	Total In-Kind Contributions this Reporting Period (Form B 2)		\$0.00
7.	Special Event Work sheet Attached	Yes X No	

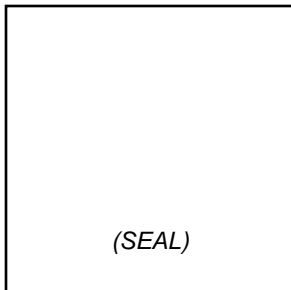
Political Committee's Name Property Casualty Insurers Association of America

Date Submitted: 7/3/2012 2:43:42 PM Date Run: 9/5/2012 7:52:41 AM Date Due: 7/5/2012 5:00:00 PM

1.	TOTAL DEBT CARRIED FORWARD	\$0.00
2.	TOTAL LOAN CONTRIBUTIONS	\$0.00
3.	TOTAL DEBT PAID	\$0.00
4.	TOTAL LOANS FORGIVEN	\$0.00
5.	TOTAL UNPAID DEBT	\$0.00

CERTIFICATION OF REPORT

I here by swear or affirm, under penalty of perjury, that all the information on this form and any attachments is true correct and complete to the best of my knowledge; and I further swear or affirm that if this is a final report the political committee named herein has been dissolved or no longer exists and that the committee bank account has been closed.



Attested this _____ day of _____,

(Signature of Treasurer)

(Printed Name)

FORM B 1
MONETARY CONTRIBUTIONS

Political Committee's Name Property Casualty Insurers Association of America

Date Submitted: 7/3/2012 2:43:42 PM Date Run: 9/5/2012 7:52:41 AM Date Due: 7/5/2012 5:00:00 PM

DATE	NAME and ADDRESS of CONTRIBUTOR	OCCUPATION (of any contributor who makes a contribution of \$250 or more in an election)	AMOUNT
6/27/2012	Lion Insurance Company - 2739 US Highway 19 North , Holiday FL 34691		\$11.00
5/30/2012	Interinsurance Exchange of the Automobile Club - 3333 Fairview Road , Costa Mesa CA 92626		\$1,026.00
TOTAL			\$1,037.00

FORM B 2
IN-KIND CONTRIBUTIONS

Political Committee's Name Property Casualty Insurers Association of America

Date Submitted: 7/3/2012 2:43:42 PM Date Run: 9/5/2012 7:52:41 AM Date Due: 7/5/2012 5:00:00 PM

DATE	NAME and ADDRESS of CONTRIBUTOR	OCCUPATION (of any contributor who makes a contribution of \$250 or more in an election)	VALUE
TOTAL			

FORM B 3
LOAN CONTRIBUTIONS

Political Committee's Name Property Casualty Insurers Association of America

Date Submitted: 7/3/2012 2:43:42 PM Date Run: 9/5/2012 7:52:41 AM Date Due: 7/5/2012 5:00:00 PM

DATE	NAME and ADDRESS of CREDITOR	AMOUNT
TOTAL		

FORM B 4
LOANS FORGIVEN

Political Committee's Name Property Casualty Insurers Association of America

Date Submitted: 7/3/2012 2:43:42 PM Date Run: 9/5/2012 7:52:41 AM Date Due: 7/5/2012 5:00:00 PM

DATE	NAME and ADDRESS of CREDITOR	AMOUNT
TOTAL		

FORM C
EXPENDITURES

Political Committee's Name Property Casualty Insurers Association of America

Date Submitted: 7/3/2012 2:43:42 PM Date Run: 9/5/2012 7:52:41 AM Date Due: 7/5/2012 5:00:00 PM

DATE	NAME and ADDRESS of PAYEE	PURPOSE	PRC Exp	AMOUNT
6/14/2012	Bank of America - 14519 Centrell Road, Little Rock AR 72223	June Bank Fees		\$52.48
6/13/2012	Friends of Senator Seward - P. O. Box 20, Oneonta NY 13820	2012 General		\$200.00
TOTAL				\$252.48

FORM C 1
LOAN REPAYMENTS

Political Committee's Name Property Casualty Insurers Association of America

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DATE	NAME of CREDITOR	AMOUNT
TOTAL		

