04/18/2005 10 : 13

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

American Council of Life Insurers PAC

ADDRESS (number and street) ▼

101 Constitution Avenue, NW

Suite 700 West

Check if different than previously reported. (ACC)

Washington | DC | 20001 | 2133

CITY ▲ STATE ▲ ZIPCODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C00147066

3. IS THIS REPORT — X NEW (N) **OR** AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
X Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12G)

Election on in the State of

(d) 30-Day **Post**-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 03 01 2005 through 03 31 2005

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

Type or Print Name of Treasurer Richard I. Klein

Signature of Treasurer Electronically Filed by Richard I. Klein Date 04 18 2005

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
American Council of Life Insurers PAC

Report Covering the Period: From: 03 01 2005 To: 03 31 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		51625.41
(b) Cash on Hand at Begining of Reporting Period	38377.31	
(c) Total Receipts (from Line 19)	33650.67	55902.57
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	72027.98	107527.98
7. Total Disbursements (from Line 31)	55000.00	90500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	17027.98	17027.98
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Council of Life Insurers PAC

Report Covering the Period: From: 03 01 2005 To: 03 31 2005

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)	6013.96	9399.44
(ii) Unitemized	3136.71	7003.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	9150.67	16402.57
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	24500.00	39500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	33650.67	55902.57
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	33650.67	55902.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	33650.67	55902.57

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	55000.00	90500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	55000.00	90500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	55000.00	90500.00

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	33650.67	55902.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33650.67	55902.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 30
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Gene Patrick Berry
Mailing Address: 2301 Brambleton Avenue
City: Roanoke State: VA Zip Code: 24015
FEC ID number of contributing federal political committee: C
Name of Employer: Shenandoah Life Insurance Company
Occupation: Senior Vice President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 03 21 2005
Transaction ID: R20195
Amount of Each Receipt this Period: 350.00
Check

B.
Full Name (Last, First, Middle Initial): Ms. Linda H. Cunningham
Mailing Address: 101 Constitution Avenue, NW Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Director, Conference Development
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 291.48
Date of Receipt: 03 15 2005
Transaction ID: R20214
Amount of Each Receipt this Period: 48.58
Payroll Deduction

C.
Full Name (Last, First, Middle Initial): Ms. Linda H. Cunningham
Mailing Address: 101 Constitution Avenue, NW Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Director, Conference Development
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 291.48
Date of Receipt: 03 31 2005
Transaction ID: R20268
Amount of Each Receipt this Period: 48.58
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ **447.16**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Ms. Joanne S. Daly
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Asst PAC Treasurer
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 03 15 2005
Transaction ID: R20215
Amount of Each Receipt this Period: 75.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ms. Joanne S. Daly
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Asst PAC Treasurer
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 03 31 2005
Transaction ID: R20269
Amount of Each Receipt this Period: 75.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ms. Kimberly Dorgan
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President, Federal Relatio
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 859.38
Date of Receipt: 03 15 2005
Transaction ID: R20220
Amount of Each Receipt this Period: 143.23
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 293.23

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Ms. Kimberly Dorgan
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President, Federal Relatio
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 859.38
Date of Receipt: 03 31 2005
Transaction ID: R20274
Amount of Each Receipt this Period: 143.23
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. Ronald G. Downing
Mailing Address PO Box 611
City: Breckenwidge State: TX Zip Code: 76424
FEC ID number of contributing federal political committee: C
Name of Employer: National Farm Life Insurance
Occupation: President & CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2250.00
Date of Receipt: 03 14 2005
Transaction ID: R20163
Amount of Each Receipt this Period: 2250.00
Check

C.
Full Name (Last, First, Middle Initial)
Mr. J. Bruce Ferguson
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President, State Relations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 284.64
Date of Receipt: 03 15 2005
Transaction ID: R20222
Amount of Each Receipt this Period: 47.44
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2440.57**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Mr. J. Bruce Ferguson
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President, State Relations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 284.64
Date of Receipt: 03 31 2005
Transaction ID: R20276
Amount of Each Receipt this Period: 47.44
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. John P. Gemi
Mailing Address 101 Constitution Ave, NW
Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Legislative Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.52
Date of Receipt: 03 15 2005
Transaction ID: R20223
Amount of Each Receipt this Period: 47.92
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. John P. Gemi
Mailing Address 101 Constitution Ave, NW
Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Legislative Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 287.52
Date of Receipt: 03 31 2005
Transaction ID: R20277
Amount of Each Receipt this Period: 47.92
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ **143.28**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Mr. Morris Goff
Mailing Address: 101 Constitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Assistant Vice President, Tax
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 217.26
Date of Receipt: 03 15 2005
Transaction ID: R20225
Amount of Each Receipt this Period: 36.21
Payroll Deduction

B.
Full Name (Last, First, Middle Initial): Mr. Morris Goff
Mailing Address: 101 Constitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Assistant Vice President, Tax
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 217.26
Date of Receipt: 03 31 2005
Transaction ID: R20279
Amount of Each Receipt this Period: 36.21
Payroll Deduction

C.
Full Name (Last, First, Middle Initial): Susan Harvey
Mailing Address: 101 Constitution Ave, NW, Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Director, Outreach
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 15 2005
Transaction ID: R20227
Amount of Each Receipt this Period: 50.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ **122.42**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Susan Harvey
Mailing Address: 101 Constitution Ave, NW, Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Director, Outreach
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 31 2005
Transaction ID: R20281
Amount of Each Receipt this Period: 50.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial): Mr. Gary E. Hughes
Mailing Address: 101 Constitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President & General Counse
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 825.00
Date of Receipt: 03 15 2005
Transaction ID: R20290
Amount of Each Receipt this Period: 137.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial): Mr. Gary E. Hughes
Mailing Address: 101 Constitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President & General Counse
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 825.00
Date of Receipt: 03 31 2005
Transaction ID: R20284
Amount of Each Receipt this Period: 137.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 325.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Michael J. Hunter
Mailing Address: 101 Consitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Executive Vice President & COO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 03 15 2005
Transaction ID: R20231
Amount of Each Receipt this Period: 125.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial): Michael J. Hunter
Mailing Address: 101 Consitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Executive Vice President & COO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 03 31 2005
Transaction ID: R20285
Amount of Each Receipt this Period: 125.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial): Frank Keating
Mailing Address: 101 Consitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: President & CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 03 15 2005
Transaction ID: R20232
Amount of Each Receipt this Period: 125.00
Payroll Deduction

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) or each category of the Detailed Summary Page

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Frank Keating
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: President & CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 03 31 2005
Transaction ID: R20286
Amount of Each Receipt this Period: 125.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. Richard I. Klein
Mailing Address 101 Constitution Avenue, NW
Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Treasurer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 03 15 2005
Transaction ID: R20234
Amount of Each Receipt this Period: 40.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. Richard I. Klein
Mailing Address 101 Constitution Avenue, NW
Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Treasurer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 03 31 2005
Transaction ID: R20287
Amount of Each Receipt this Period: 40.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 205.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 30
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Mr. David M. Leifer
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 268.92

Date of Receipt: 03 15 2005
Transaction ID: R20296
Amount of Each Receipt this Period: 44.82
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. David M. Leifer
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 268.92

Date of Receipt: 03 31 2005
Transaction ID: R20312
Amount of Each Receipt this Period: 44.82
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Edward J. Machado
Mailing Address 2301 Brambleton Ave
City: Roanoke State: VA Zip Code: 24015
FEC ID number of contributing federal political committee: C
Name of Employer: Shenandoah Life Insurance Company
Occupation: Senior Vice Pesident and CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 550.00

Date of Receipt: 03 14 2005
Transaction ID: R20176
Amount of Each Receipt this Period: 550.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 639.54

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 30
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Daniel J. Mahoney
Mailing Address: 101 Constitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Sr. Vice President, Public Affairs and
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 322.50
Date of Receipt: 03 15 2005
Transaction ID: R20240
Amount of Each Receipt this Period: 53.75
Payroll Deduction

B.
Full Name (Last, First, Middle Initial): Daniel J. Mahoney
Mailing Address: 101 Constitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Sr. Vice President, Public Affairs and
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 322.50
Date of Receipt: 03 31 2005
Transaction ID: R20294
Amount of Each Receipt this Period: 53.75
Payroll Deduction

C.
Full Name (Last, First, Middle Initial): Brenda Nelson
Mailing Address: 101 Constitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 15 2005
Transaction ID: R20245
Amount of Each Receipt this Period: 50.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ **157.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 30
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Brenda Nation
Mailing Address: 101 Constitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 31 2005
Transaction ID: R20296
Amount of Each Receipt this Period: 50.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial): Mary Ann Pellier
Mailing Address: 2301 Brambleton Avenue
City: Roanoke State: VA Zip Code: 24019
FEC ID number of contributing federal political committee: C
Name of Employer: Shenandoah Life Insurance Company
Occupation: Senior Vice President and Chief Actuar
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 21 2005
Transaction ID: R20191
Amount of Each Receipt this Period: 300.00
Check

C.
Full Name (Last, First, Middle Initial): Mr. Donald G. Preston
Mailing Address: 101 Constitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Managing Director, Reinsurance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 345.18
Date of Receipt: 03 15 2005
Transaction ID: R20248
Amount of Each Receipt this Period: 57.53
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 407.53

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 30
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Mr. Donald G. Preston
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Managing Director, Reinsurance
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 345.18
Date of Receipt: 03 31 2005
Transaction ID: R20301
Amount of Each Receipt this Period: 57.53
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Kenneth Shields
Mailing Address 8 Columbia Avenue
City: Takoma Park State: MD Zip Code: 20912
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Vice President, Publishing
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 10 2005
Transaction ID: R20160
Amount of Each Receipt this Period: 300.00
Check

C.
Full Name (Last, First, Middle Initial)
Debra K. West
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel & Director, Southern Re
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 15 2005
Transaction ID: R20257
Amount of Each Receipt this Period: 50.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 407.53

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

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

Mailing Address 101 Constitution Avenue, NW
Suite 700 West

City: Washington
State: DC
Zip Code: 20001

FEC ID number of contributing federal political committee: C

Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel & Director, Southern Re

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date: 300.00

Date of Receipt: 03 31 2005

Transaction ID: R20310

Amount of Each Receipt this Period: 50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) 50.00

TOTAL This Period (last page this line number only) 6013.96

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 30
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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
AEGON USA Inc. Political Action Committee
Mailing Address 1111 North Charles Street
City: Baltimore State: MD Zip Code: 21201
FEC ID number of contributing federal political committee. C C00236414
Name of Employer
Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt 03 16 2005
Transaction ID: R20181
Amount of Each Receipt this Period 5000.00
Check

B.
Full Name (Last, First, Middle Initial)
AXA Equitable PAC
Mailing Address c/o AXA Equitable Life Assurance S
1290 Avenue of the Americas
City: New York State: NY Zip Code: 10104
FEC ID number of contributing federal political committee. C C00161B01
Name of Employer
Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt 03 10 2005
Transaction ID: R20161
Amount of Each Receipt this Period 5000.00
Check

C.
Full Name (Last, First, Middle Initial)
Ameritas Financial PAC
Mailing Address P.O. Box 81889
City: Lincoln State: NE Zip Code: 68501
FEC ID number of contributing federal political committee. C C00187138
Name of Employer
Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt 03 21 2005
Transaction ID: R20183
Amount of Each Receipt this Period 5000.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 15000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Jefferson-Pilot Good Govt Committee
Mailing Address P.O. Box 21008
City: Greensboro State: NC Zip Code: 27420
FEC ID number of contributing federal political committee: C C00146528
Name of Employer
Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 03 07 2005
Transaction ID: R20156
Amount of Each Receipt this Period: 2500.00
Check

B.
Full Name (Last, First, Middle Initial)
Penn Mutual PAC
Mailing Address Independence Square R2G
City: Philadelphia State: PA Zip Code: 19172-0001
FEC ID number of contributing federal political committee: C C00142372
Name of Employer
Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 03 14 2005
Transaction ID: R20164
Amount of Each Receipt this Period: 5000.00
Check

C.
Full Name (Last, First, Middle Initial)
Union Central Life PAC
Mailing Address 1876 Waycross Road
City: Cincinnati State: OH Zip Code: 45240
FEC ID number of contributing federal political committee: C C00179010
Name of Employer
Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 14 2005
Transaction ID: R20162
Amount of Each Receipt this Period: 2000.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 9500.00

TOTAL This Period (last page this line number only) ..... ▶ 24500.00

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)

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Barney Frank for Congress

Mailing Address 38 Ivy Street, SE

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement
Contr.

Candidate Name
Barney Frank

Category/Type

Office Sought: X House / Senate / President
State: MA District: 04

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: D9869
Date of Disbursement: 03 / 15 / 2005

Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial)
Ben Nelson for US Senate

Mailing Address 426 C Street, NE

City: Washington | State: DC | Zip Code: 20002

Purpose of Disbursement
Contr.

Candidate Name
Ben Nelson

Category/Type

Office Sought: House / X Senate / President
State: NE District:

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: D9872
Date of Disbursement: 03 / 15 / 2005

Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Blue Dog PAC

Mailing Address 227 Massachusetts Ave, NE
Suite 101

City: Washington | State: DC | Zip Code: 20002

Purpose of Disbursement
Contr. Blue Dog PAC (-D)

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9884
Date of Disbursement: 03 / 30 / 2005

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Carper for Senate
Mailing Address 426 C Street, NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr.
Candidate Name: Thomas R. Carper
Category/Type
Office Sought: House / X Senate / President
State: DE District:
Disbursement For: 2006 X Primary General Other (specify)
Transaction ID: D9873
Date of Disbursement: 03 / 15 / 2005
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial)
Castle Campaign Fund
Mailing Address P.O Box 133
City: Wilmington State: DE Zip Code: 19899
Purpose of Disbursement: Contr.
Candidate Name: Michael N. Castle
Category/Type
Office Sought: X House / Senate / President
State: DE District: 01
Disbursement For: 2006 X Primary General Other (specify)
Transaction ID: D9854
Date of Disbursement: 03 / 09 / 2005
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Chocola for Congress Inc
Mailing Address PO Box 6728
City: South Bend State: IN Zip Code: 46660
Purpose of Disbursement: Contr.
Candidate Name: Chris Chocola
Category/Type
Office Sought: X House / Senate / President
State: IN District: 02
Disbursement For: 2006 X Primary General Other (specify)
Transaction ID: D9863
Date of Disbursement: 03 / 15 / 2005
Amount of Each Disbursement this Period: 1000.00

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: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Crane for Congress Committee
Mailing Address: P.O. Box 8534
City: Rolling Meadows State: IL Zip Code: 60008
Purpose of Disbursement: Returned Check #6328 dated 10/29/2004
Candidate Name: Philip M. Crane
Category/Type
Office Sought: X House / Senate / President
State: IL District: 08
Disbursement For: 2004 Primary X General / Other (specify)
Transaction ID: D9861
Date of Disbursement: 03/24/2005
Amount of Each Disbursement this Period: -2000.00
for Philip M. Crane (IL-8-R).

B.
Full Name (Last, First, Middle Initial): DSCC
Mailing Address: 120 Maryland Avenue, NE
City: Washington State: DC Zip Code: 20006
Purpose of Disbursement: Contr. DSCC (-D)
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District
Disbursement For: Primary General / Other (specify)
Transaction ID: D9857
Date of Disbursement: 03/09/2005
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): Dreier for Congress Committee
Mailing Address: P.O. Box 505
City: Upland State: CA Zip Code: 91785
Purpose of Disbursement: Contr.
Candidate Name: David Dreier
Category/Type
Office Sought: X House / Senate / President
State: CA District: 26
Disbursement For: 2006 X Primary General / Other (specify)
Transaction ID: D9879
Date of Disbursement: 03/15/2005
Amount of Each Disbursement this Period: 1500.00

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

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Friends of Joe Lieberman
Mailing Address: P.O. Box 4322, State House Square
City: Hamden | State: CT | Zip Code: 06514
Purpose of Disbursement: Contr.
Candidate Name: Joseph I. Lieberman
Category/Type
Office Sought: House / X Senate / President / State: CT District
Disbursement For: 2006 / X Primary / General / Other (specify)
Transaction ID: D9852
Date of Disbursement: 03 / 09 / 2005
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Friends of Kent Conrad
Mailing Address: 122 Maryland Ave, NE, Third Floor
City: Washington | State: DC | Zip Code: 20002
Purpose of Disbursement: Contr.
Candidate Name: Kent Conrad
Category/Type
Office Sought: House / X Senate / President / State: ND District
Disbursement For: 2006 / X Primary / General / Other (specify)
Transaction ID: D9853
Date of Disbursement: 03 / 09 / 2005
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Friends of Kent Conrad
Mailing Address: 122 Maryland Ave, NE, Third Floor
City: Washington | State: DC | Zip Code: 20002
Purpose of Disbursement: Contr.
Candidate Name: Kent Conrad
Category/Type
Office Sought: House / X Senate / President / State: ND District
Disbursement For: 2006 / X Primary / General / Other (specify)
Transaction ID: D9867
Date of Disbursement: 03 / 15 / 2005
Amount of Each Disbursement this Period: 1500.00

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

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☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Hagel for Senate Committee
Mailing Address: PO Box 241497
City: Omaha State: NE Zip Code: 68124
Purpose of Disbursement: Contr.
Candidate Name: Chuck Hagel
Category/Type
Office Sought: House / X Senate / President / State: NE District
Disbursement For: 2008 / X Primary / General / Other (specify)
Transaction ID: D9861
Date of Disbursement: 03 / 14 / 2005
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Impact America
Mailing Address: 228 South Washington Street, Suite 115
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: Contr. Impact America (OR-R)
Candidate Name
Category/Type
Office Sought: House / Senate / President / State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D9894
Date of Disbursement: 03 / 30 / 2005
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): Jim Ramstad Volunteer Committee
Mailing Address: 1809 Plymouth Road South #310B
City: Minnetonka State: MN Zip Code: 55305
Purpose of Disbursement: Contr.
Candidate Name: Jim M. Ramstad
Category/Type
Office Sought: X House / Senate / President / State: MN District: 03
Disbursement For: 2006 / X Primary / General / Other (specify)
Transaction ID: D9870
Date of Disbursement: 03 / 15 / 2005
Amount of Each Disbursement this Period: 1000.00

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

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Keep Our Majority PAC
Mailing Address 104 Hume Ave
City: Alexandria State: VA Zip Code: 22301
Purpose of Disbursement: Contr. KOMPAC (-R)
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D9866
Date of Disbursement: 03 / 30 / 2005
Amount of Each Disbursement this Period: 5000.00

B.
Full Name (Last, First, Middle Initial)
Larson for Congress
Mailing Address 29 Ruff Circle
City: Glastonbury State: CT Zip Code: 06033
Purpose of Disbursement: Contr.
Candidate Name: John B. Larson
Category/Type
Office Sought: X House / Senate / President
State: CT District: 01
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: D9868
Date of Disbursement: 03 / 15 / 2005
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial)
Leadership PAC 2006
Mailing Address 675 North Washington Street Suite 410
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: Contr. Leadership PAC 2006 (VA-R)
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D9893
Date of Disbursement: 03 / 30 / 2005
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **11000.00**

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

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☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
McConnell Senate Committee

Mailing Address 400 N. Capitol Street
Suite 585

City Washington | State DC | Zip Code 20001

Purpose of Disbursement
Contr.

Candidate Name
Mitch McConnell

Category/Type

Office Sought: House / X Senate / President
State: KY District

Disbursement For: 2008
X Primary / General
Other (specify) ▼

Transaction ID: D9864
Date of Disbursement
03 / 15 / 2005

Amount of Each Disbursement this Period
2500.00

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

Mailing Address 425 Second Street, NE

City Washington | State DC | Zip Code 20002

Purpose of Disbursement
Contr. NRSC (-R)

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General
Other (specify) ▼

Transaction ID: D9856
Date of Disbursement
03 / 09 / 2005

Amount of Each Disbursement this Period
5000.00

C.
Full Name (Last, First, Middle Initial)
PAC to the Future

Mailing Address Attn: Daniele Baierlein
430 South Capitol Street, SE, 1st

City Washington | State DC | Zip Code 20003

Purpose of Disbursement
Contr.

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General
Other (specify) ▼

Transaction ID: D9862
Date of Disbursement
03 / 15 / 2005

Amount of Each Disbursement this Period
2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **10000.00**

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A. Full Name (Last, First, Middle Initial)
PAC to the Future

Mailing Address 430 South Capitol Street, SE, 1st

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement
Contr.

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9863
Date of Disbursement: 03/30/2005

Amount of Each Disbursement this Period: 2500.00

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

Mailing Address 1155 21st Street, NW
Suite 330

City: Washington | State: DC | Zip Code: 20036

Purpose of Disbursement
Contr. Pryce Project (OH-R)

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9862
Date of Disbursement: 03/30/2005

Amount of Each Disbursement this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Pomeroy for Congress

Mailing Address Post Office Box 75214

City: Washington | State: DC | Zip Code: 20013

Purpose of Disbursement
Contr.

Candidate Name
Earl Pomeroy

Category/Type

Office Sought: X House / Senate / President
State: ND District: 01

Disbursement For: 2006
X Primary / General / Other (specify)

Transaction ID: D9851
Date of Disbursement: 03/09/2005

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6000.00**

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A. Full Name (Last, First, Middle Initial)
Rely on Your Beliefs Fund

Mailing Address: Attn: Keri Ann Hayes, 209 Pennsylvania Ave, SE

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Contr. Rely on Your Beliefs Fund (MO-R)

Candidate Name:

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9850
Date of Disbursement: 03/09/2005
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial)
Richard E. Neal for Congress Committee

Mailing Address: P.O. Box 15906

City: Chevy Chase | State: MD | Zip Code: 20825

Purpose of Disbursement: Contr.

Candidate Name: Richard E. Neal

Category/Type

Office Sought: X House / Senate / President

State: MA District: 02

Disbursement For: 2006 X Primary / General / Other (specify)

Transaction ID: D9866
Date of Disbursement: 03/15/2005
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Santorum 2006

Mailing Address: PO Box 10495

City: Pittsburgh | State: PA | Zip Code: 15234

Purpose of Disbursement: Contr.

Candidate Name: Rick Santorum

Category/Type

Office Sought: House / X Senate / President

State: PA District:

Disbursement For: 2006 X Primary / General / Other (specify)

Transaction ID: D9880
Date of Disbursement: 03/15/2005
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6000.00**

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Sherman for Congress
Mailing Address: P.O. Box 75214
City: Washington | State: DC | Zip Code: 20013
Purpose of Disbursement: Contr.
Candidate Name: Brad Sherman
Office Sought: X House / Senate / President
State: CA District: 27
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: D9855
Date of Disbursement: 03/09/2005
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Snowe for Senate
Mailing Address: P.O. Box 2006
City: Portland | State: ME | Zip Code: 04104
Purpose of Disbursement: Contr.
Candidate Name: Olympia J. Snowe
Office Sought: House / X Senate / President
State: ME District:
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: D9860
Date of Disbursement: 03/10/2005
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Steve Israel for Congress Committee
Mailing Address: PO Box 777
City: Deer Park | State: NY | Zip Code: 11729
Purpose of Disbursement: Contr.
Candidate Name: Steve J. Israel
Office Sought: X House / Senate / President
State: NY District: 02
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: D9865
Date of Disbursement: 03/15/2005
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	3000.00
TOTAL This Period (last page this line number only) ..... ▶	55000.00