01/27/2005 12 : 35

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 — NEW (N) **OR** X AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

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

Termination Report (TER)

(b) Monthly Report Due On:

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

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

Election on in the State of

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

Election on 11 02 2004 in the State of DC

5. Covering Period 10 14 2004 through 11 22 2004

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 01 27 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: 10 14 2004 To: 11 22 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		30780.03
(b) Cash on Hand at Begining of Reporting Period	46142.63	
(c) Total Receipts (from Line 19)	4811.74	310085.71
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	50954.37	340865.74
7. Total Disbursements (from Line 31)	12403.39	302314.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38550.98	38550.98
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: 10 14 2004 To: 11 22 2004

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)	3599.44	
(ii) Unitemized	712.30	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	4311.74	123460.94
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	500.00	176200.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ▶	4811.74	299660.94
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	10424.77
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))	4811.74	310085.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4811.74	310085.71

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	161.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	161.50
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	9903.39	282093.26
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	1065.00
(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	1065.00
29. Other Disbursements	2500.00	18995.00
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))	12403.39	302314.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	12403.39	302314.76

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	4811.74	299660.94
34. Total Contribution Refunds (from Line 28(d))	0.00	1065.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4811.74	298595.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	161.50
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	161.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 22
(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)
Mr. Michael J. Bartholomew
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: 500.00
Date of Receipt: 10 29 2004
Transaction ID: R19692
Amount of Each Receipt this Period: 50.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. Allen R. Cooke
Mailing Address 1001 Pennsylvania Avenue, NW
City: Washington State: DC Zip Code: 20004-2599
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: 500.00
Date of Receipt: 10 29 2004
Transaction ID: R19695
Amount of Each Receipt this Period: 50.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Renee Clyburn
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: Finance Manager
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.05
Date of Receipt: 10 29 2004
Transaction ID: R19696
Amount of Each Receipt this Period: 33.34
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 133.34

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A.
Full Name (Last, First, Middle Initial): Mr. C. Bryan Cox
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 Legislative Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 469.60
Date of Receipt: 10 29 2004
Transaction ID: R19699
Amount of Each Receipt this Period: 46.96
Payroll Deduction

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: 823.18
Date of Receipt: 10 29 2004
Transaction ID: R19700
Amount of Each Receipt this Period: 95.34
Payroll Deduction

C.
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: 1500.00
Date of Receipt: 10 29 2004
Transaction ID: R19701
Amount of Each Receipt this Period: 150.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 292.30

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): Nancy S. Davenport
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: Sr. Counsel & Director, NE Region
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 29 2004
Transaction ID: R19702
Amount of Each Receipt this Period: 50.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial): Scott M. Davis
Mailing Address: 4 Magnolia Way
City: Winchester State: MA Zip Code: 01890
FEC ID number of contributing federal political committee: C
Name of Employer: Sun Life Assurance Company of Canada (
Occupation: Attorney
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 11 09 2004
Transaction ID: R19748
Amount of Each Receipt this Period: 250.00
Check

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: 2656.20
Date of Receipt: 10 29 2004
Transaction ID: R19705
Amount of Each Receipt this Period: 265.62
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 565.62

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

SCHEDULE A (FEC Form 3X)
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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: 689.12
Date of Receipt: 10 29 2004
Transaction ID: R19707
Amount of Each Receipt this Period: 91.66
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: 916.60
Date of Receipt: 10 29 2004
Transaction ID: R19708
Amount of Each Receipt this Period: 91.66
Payroll Deduction

C.
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: 689.12
Date of Receipt: 10 29 2004
Transaction ID: R19710
Amount of Each Receipt this Period: 69.66
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 252.98

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Mr. James D. Hall
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: 10 29 2004
Transaction ID: R19711
Amount of Each Receipt this Period: 30.00
Payroll Deduction

B.
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: 700.00

Date of Receipt: 10 29 2004
Transaction ID: R19712
Amount of Each Receipt this Period: 100.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ms. Shawn Hausman
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: Vice President, Public Affairs
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 310.40

Date of Receipt: 10 29 2004
Transaction ID: R19713
Amount of Each Receipt this Period: 31.04
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 161.04

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. 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: 2658.40

Date of Receipt: 10 29 2004
Transaction ID: R19715
Amount of Each Receipt this Period: 265.84
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: 2500.00

Date of Receipt: 10 29 2004
Transaction ID: R19716
Amount of Each Receipt this Period: 250.00
Payroll Deduction

C.
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: 2500.00

Date of Receipt: 10 29 2004
Transaction ID: R19718
Amount of Each Receipt this Period: 250.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 765.84

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. 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: 800.00
Date of Receipt: 10 29 2004
Transaction ID: R19719
Amount of Each Receipt this Period: 80.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ms. Linda L. Lanam
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: Vice President, Annuities
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 10 29 2004
Transaction ID: R19721
Amount of Each Receipt this Period: 60.00
Payroll Deduction

C.
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: 841.60
Date of Receipt: 10 29 2004
Transaction ID: R19722
Amount of Each Receipt this Period: 84.16
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 224.16

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

FOR LINE NUMBER: PAGE 13 / 22
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[X] 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): 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: 1791.60
Date of Receipt: 10 29 2004
Transaction ID: R19726
Amount of Each Receipt this Period: 179.16
Payroll Deduction

B.
Full Name (Last, First, Middle Initial): Mr. John W. Mangan, CEBS
Mailing Address: 2650 SW Montgomery Drive
City: Portland State: OR Zip Code: 97201
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Director, Pacific Region
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 10 29 2004
Transaction ID: R19727
Amount of Each Receipt this Period: 50.00
Payroll Deduction

C.
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: 1000.00
Date of Receipt: 10 29 2004
Transaction ID: R19729
Amount of Each Receipt this Period: 100.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 329.16

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

FOR LINE NUMBER: PAGE 14 / 22
(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. Paul E. Petry
Mailing Address P.O. Box 738
City: Osterville State: MA Zip Code: 02655
FEC ID number of contributing federal political committee: C
Name of Employer: Boston Mutual Life Insurance Company
Occupation: Chairman, President & CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 11 17 2004
Transaction ID: R19751
Amount of Each Receipt this Period: 500.00
Check

B.
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: 1050.00
Date of Receipt: 10 29 2004
Transaction ID: R19732
Amount of Each Receipt this Period: 105.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ms. Barbara A. Price
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, Legislative & Regulatory Inf
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 10 29 2004
Transaction ID: R19733
Amount of Each Receipt this Period: 40.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 645.00

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 15 / 22
(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. Juan Carlos Scott
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: Vice President, Federal Relations
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 10 29 2004
Transaction ID: R19736
Amount of Each Receipt this Period: 40.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Nancy Smith
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: Executive Assistant
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 10 29 2004
Transaction ID: R19740
Amount of Each Receipt this Period: 30.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. David R. Wentworth
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: Vice President, Research
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 10 29 2004
Transaction ID: R19743
Amount of Each Receipt this Period: 60.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ **130.00**

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 16 / 22
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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)
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: 1000.00

Date of Receipt: 10 29 2004

Transaction ID: R19744

Amount of Each Receipt this Period: 100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 100.00

TOTAL This Period (last page this line number only) ..... ▶ 3599.44

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 22
(check only one)
☐ 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)
Government Personnel Mutual Life Ins Co PAC

Mailing Address P.O. Box 65967

City: San Antonio
State: TX
Zip Code: 78265-9567

FEC ID number of contributing federal political committee. C C00236568

Name of Employer

Occupation

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 29 2004

Transaction ID: R19689

Amount of Each Receipt this Period
500.00

Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 500.00

TOTAL This Period (last page this line number only) ..... ▶ 500.00

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)

☐ 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)
Congressional Majority Committee

Mailing Address 555 13th Street, NW

City: Washington | State: DC | Zip Code: 20004

Purpose of Disbursement
Returned Check #6233 dated 5/25/2004 for

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9774
Date of Disbursement: 10 / 27 / 2004

Amount of Each Disbursement this Period: -2000.00

Congressional Majority Co (DC-R).

B.
Full Name (Last, First, Middle Initial)
Congressional Majority Committee

Mailing Address P.O. Box 746

City: Bakersfield | State: CA | Zip Code: 93302

Purpose of Disbursement
Contr. Congressional Majority Co (DC-R)

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9776
Date of Disbursement: 10 / 27 / 2004

Amount of Each Disbursement this Period: 2000.00

C.
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
Contr.

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: D9781
Date of Disbursement: 10 / 29 / 2004

Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

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)

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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 Jeb Hensarling

Mailing Address PO Box 820504

City Dallas | State TX | Zip Code 75382

Purpose of Disbursement
Contr.

Candidate Name
Jeb Hensarling

Category/Type

Office Sought: X House / Senate / President

State: TX District: 05

Disbursement For: 2004 Primary X General Other (specify)

Transaction ID: D9783
Date of Disbursement 10 / 29 / 2004

Amount of Each Disbursement this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Glacier PAC

Mailing Address 818 Connecticut Ave, NW
Suite 1100

City Washington | State DC | Zip Code 20006

Purpose of Disbursement
Contr. Glacier PAC

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary General Other (specify)

Transaction ID: D9756
Date of Disbursement 10 / 15 / 2004

Amount of Each Disbursement this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Catering By Windows

Mailing Address 1125 North Royal Street

City Alexandria | State VA | Zip Code 22314

Purpose of Disbursement
In-Kind to the Good Government for

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary General Other (specify)

Transaction ID: D9772
Date of Disbursement 10 / 27 / 2004

Amount of Each Disbursement this Period
3903.39

America PAC (VA-R)

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 5903.39

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)

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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)
Mike Crapo for US Senate

Mailing Address PO Box 1948

City Boise | State ID | Zip Code 83701

Purpose of Disbursement
Contr.

Candidate Name
Michael D. Crapo

Category/Type

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

Disbursement For: 2004
Primary / X General
Other (specify)

Transaction ID: D9764
Date of Disbursement
10 / 15 / 2004

Amount of Each Disbursement this Period
1000.00

B.
Full Name (Last, First, Middle Initial)
People for English

Mailing Address P.O. Box 1940

City Erie | State PA | Zip Code 16507

Purpose of Disbursement
Contr.

Candidate Name
Phil English

Category/Type

Office Sought: X House / Senate / President
State: PA District 03

Disbursement For: 2004
Primary / X General
Other (specify)

Transaction ID: D9757
Date of Disbursement
10 / 15 / 2004

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	2000.00
TOTAL This Period (last page this line number only) ..... ▶	9903.39

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)
Ann Cummings Campaign Committee

Mailing Address 24 Colonial Drive

City: Montpelier | State: VT | Zip Code: 05602

Purpose of Disbursement
Non-Federal Ann E. Cummings (VT-WAS-D)

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9767
Date of Disbursement: 10 / 21 / 2004

Amount of Each Disbursement this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Benjamin for Supreme Court

Mailing Address 229 1/2 Capitol Street

City: Charleston | State: WV | Zip Code: 25301

Purpose of Disbursement
Non-Federal Benjamin for Supreme Cour

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9773
Date of Disbursement: 10 / 27 / 2004

Amount of Each Disbursement this Period: 1000.00

(WV-R)

C.
Full Name (Last, First, Middle Initial)
Republican Leaders of Vermont

Mailing Address PO Box 121

City: Danby | State: VT | Zip Code: 05739

Purpose of Disbursement
Contr. Republican Leaders of Ver (VT-R)

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9770
Date of Disbursement: 10 / 21 / 2004

Amount of Each Disbursement this Period: 750.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

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)

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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)
Richard Sears Campaign Committee

Mailing Address RR #1, Box 133

City: North Bennington
State: VT
Zip Code: 05257

Purpose of Disbursement
Non-Federal Dick W. Sears, Jr.

Candidate Name

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Category/Type (VT-BEN-D)

Transaction ID: D976B
Date of Disbursement: 10 / 21 / 2004

Amount of Each Disbursement this Period: 250.00

B.
Full Name (Last, First, Middle Initial)
Vermont Senate Victory

Mailing Address PO Box 461

City: Burlington
State: VT
Zip Code: 05402-0461

Purpose of Disbursement
Contr. Vermont Senate Victory

Candidate Name

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Category/Type

Transaction ID: D9769
Date of Disbursement: 10 / 21 / 2004

Amount of Each Disbursement this Period: 250.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	500.00
TOTAL This Period (last page this line number only) ..... ▶	2500.00