

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

ADDRESS (number and street) **11921 FREEDOM DRIVE**  
**SUITE 1100**  
 Check if different than previously reported. (ACC) **RESTON VA 20190-5634**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00447565** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End 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 (12S)  
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  /  /  through  /  /

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

Signature of Treasurer ROBINSON, ARMSTRONG, M., , [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value=""/>	<input type="text" value="301729.47"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="293224.44"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="17370.96"/>	<input type="text" value="148380.66"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="310595.40"/>	<input type="text" value="450110.13"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="329.30"/>	<input type="text" value="139844.03"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="310266.10"/>	<input type="text" value="310266.10"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16916.66	137616.62
(ii) Unitemized .....	125.00	4880.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	17041.66	142496.62
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	17041.66	142496.62
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.).....	329.30	5884.04
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	17370.96	148380.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17370.96	148380.66

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	329.30	5844.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	329.30	5844.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	134000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	329.30	139844.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	329.30	139844.03

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	17041.66	142496.62
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17041.66	142496.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	329.30	5844.03
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	329.30	5844.03

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. BACQUE, ODON, L., , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 RUE BEAUREGARD  
 SUITE J  
 City LAFAYETTE State LA Zip Code 70508-8511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : AF7DA2206FBCB478BBAL**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

**B. BARRADAS, RYAN, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2398 E CAMELBACK ROAD  
 SUITE 320  
 City PHOENIX State AZ Zip Code 85016-9006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WEALTHPOINT Occupation (for Individual) FINANCIAL ADVISER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 01 / 2020  
**Transaction ID : A58A7877F01A14D2187D**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

**C. BENOWITZ, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 52 FOREST AVE  
 City PARAMUS State NJ Zip Code 07652-5200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CERTIFIED FINANCIAL SERVICES Occupation (for Individual) FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2916.62

Date of Receipt 07 / 14 / 2020  
**Transaction ID : AB10DD73FCEDE40B7890**  
 Amount of Each Receipt this Period 416.66  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	666.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. BREE, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 117 WOODRIDGE DRIVE  
 City KENNETT SQUARE State PA Zip Code 19348-2677  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PILLAR WEALTH ADVISORS LLC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt **07 / 16 / 2020**  
**Transaction ID : A1FF6C80C1F5942D99C4**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

**B. BROADBENT, STEVEN, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5805 STATE BRIDGE ROAD  
 City JOHNS CREEK State GA Zip Code 30097-8220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FULCRUM PARTNERS LLC Occupation (for Individual) EXECUTIVE BENEFITS CONSULTAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 14 / 2020**  
**Transaction ID : AAE130206D6404867A9F**  
 Amount of Each Receipt this Period 375.00  
 Memo Item  
 CONTRIBUTION

**C. BROADBENT, STEVEN, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5805 STATE BRIDGE ROAD  
 City JOHNS CREEK State GA Zip Code 30097-8220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FULCRUM PARTNERS LLC Occupation (for Individual) EXECUTIVE BENEFITS CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt **07 / 15 / 2020**  
**Transaction ID : A69B0B467903645359DD**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. BURSON, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1300 N. WALKER AVE.  
 SUITE 200  
 City OKLAHOMA CITY State OK Zip Code 73103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MASS MUTUAL Occupation (for Individual) FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 22 / 2020  
**Transaction ID : ACC10E88564A6494CB19**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

**B. BYRNE, MICHAEL, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 600 MONTGOMERY ST  
 SUITE 1600  
 City SAN FRANCISCO State CA Zip Code 94111-2718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 13 / 2020  
**Transaction ID : A0B18434D966242419AC**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**C. CHIAPPY, LUIS, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 880 JERONIMO DR  
 City CORAL GABLES State FL Zip Code 33146  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AXA ADVISORS Occupation (for Individual) EXECUTIVE VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A62C793A214D44E00BF6**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 1875.00  
**TOTAL** This Period (last page this line number only).....



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. CUNNINGHAM, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 N FRANKLIN STREET  
 City CHICAGO State IL Zip Code 60606-4425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LENOX ADVISORS Occupation (for Individual) MANAGING DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : AB30AAA6C84BC47D1BB**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

**B. D'ADDONA, VINCENT, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 341 HARBOR DRIVE  
 City LIDO BEACH State NY Zip Code 11561-4906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STRATEGIES FOR WEALTH Occupation (for Individual) LIFE INSURANCE SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 07 / 01 / 2020  
**Transaction ID : A98322EFB6565429B8E8**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. DOLLARHIDE, JEFFREY, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9646 E LAUREL LANE  
 City SCOTTSDALE State AZ Zip Code 85260-5956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MASSMUTUAL - ARIZONA Occupation (for Individual) CEO AND MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 07 / 17 / 2020  
**Transaction ID : A23F302E29F0A425EA26**  
 Amount of Each Receipt this Period 375.00  
 Memo Item CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 10 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. DUCATO, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35 E MAIN STREET  
 City WESTFIELD State NY Zip Code 14787-1319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEW YORK LIFE INSURANCE CO. Occupation (for Individual) REGIONAL REPRESENTATIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : AC97D40416D814EE5B98**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

**B. ERHARD, KEITH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1245 JORDAN CREEK PKWY  
 City WEST DES MOINES State IA Zip Code 50266-2342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 07 / 26 / 2020  
**Transaction ID : A82DB31C5AF2A487C8B1**  
 Amount of Each Receipt this Period 375.00  
 Memo Item CONTRIBUTION

**C. FRITZ, R. DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 626 E WISCONSIN AVENUE SUITE 1000  
 City MILWAUKEE State WI Zip Code 53202-4616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) FINANCIAL REPRESENTATIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : A1E7A0C9626724AE8AE5**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

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

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

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

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. GARDNER, LOUIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 203 TRAFALGAR LANE  
 City SAN CLEMENTE State CA Zip Code 92672-5482  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GARDNER BROWN ASSOCIATES Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 12 / 2020  
**Transaction ID : A5AC55FAADDC34636A38**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

**B. GELBMAN, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6701 WESTOWN PKWY. SUITE 200  
 City WEST DES MOINES State IA Zip Code 50266  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PRINCIPAL FINANCIAL GROUP Occupation (for Individual) AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : A744D8DDD839449BAA11**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

**C. GIER, GRANT, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 106 S WYNSTONE PARK DRIVE SUITE 103A  
 City NORTH BARRINGTON State IL Zip Code 60010-6965  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 13 / 2020  
**Transaction ID : A5D0C8B60C95349679A9**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

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

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

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

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. HALL, CARRIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5628 E MONTEROSA STREET  
 City PHOENIX State AZ Zip Code 85018-4646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CARRIE HALL AND ASSOCIATES Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt **07 / 28 / 2020**  
**Transaction ID : A75E09B892A0F4E95A50**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

**B. HEMMER, JERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12899 STONE TOWER LOOP  
 City FORT MYERS State FL Zip Code 33913-6770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GUARDIAN Occupation (for Individual) INVESTMENT ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt **07 / 04 / 2020**  
**Transaction ID : A6B6F309CFD5B425E901**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION

**C. IODICE, SCOTT, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 S CALVERT STREET SUITE 2500  
 City BALTIMORE State MD Zip Code 21202-6104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt **07 / 04 / 2020**  
**Transaction ID : AA2E99C9B1E6C4277B10**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. JENKINS, DAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1701 MCFARLAND ROAD  
 City PITTSBURGH State PA Zip Code 15216-1812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JKS FINANCIAL Occupation (for Individual) FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt **07 / 24 / 2020**  
**Transaction ID : A50475074A2F0446C958**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

**B. KRONISH, BEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 355 LEXINGTON AVE  
 City NEW YORK State NY Zip Code 10017-6603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KRONISH ASSOCIATES Occupation (for Individual) LIFE INSURANCE AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 03 / 2020**  
**Transaction ID : AE150FF8E408943A1AB7**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 CONTRIBUTION

**C. LEWIS, TERRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3600 MINNESOTA DRIVE SUITE 100  
 City EDINA State MN Zip Code 55435-7912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEW YORK LIFE Occupation (for Individual) MEMBER AGENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt **07 / 16 / 2020**  
**Transaction ID : A871DC5BEFDD64B5688C**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

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

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

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

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. LOWRY, BURNS, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13631 DEERING BAY DRIVE  
 APT. 218  
 City CORAL GABLES State FL Zip Code 33158-2810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JONES LOWRY Occupation (for Individual) LIFE INSURANCE AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 28 / 2020  
**Transaction ID : ADD840EDD2C944C37974**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

**B. LYMAN, MICHAEL, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6050 78TH AVENUE SE  
 City MERCER ISLAND State WA Zip Code 98040-4823  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE LYMAN GROUP LLC Occupation (for Individual) LIFE INSURANCE-MANAGING PARTN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 07 / 17 / 2020  
**Transaction ID : AF8F66D031294480290C**  
 Amount of Each Receipt this Period 375.00  
 Memo Item CONTRIBUTION

**C. MAUS, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2711 HIBERNIA  
 City DALLAS State TX Zip Code 75204-2555  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE NAUTILUS GROUP Occupation (for Individual) FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 07 / 13 / 2020  
**Transaction ID : AC64CFF34C79942408B2**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. MORRIS, DAVID, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 205 PADDINGTON ROAD  
 City BALTIMORE State MD Zip Code 21212-3438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRIBRIDGE PARTNERS LLC Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 29 / 2020  
**Transaction ID : AFF095AC217494260925**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**B. MULLEN, DENNIS, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 MANOR ROAD  
 City OLD GREENWICH State CT Zip Code 06870  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FIFTH AVENUE FINANCIAL Occupation (for Individual) MANAGING DIRECTOR, BROKERAGI  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 07 / 17 / 2020  
**Transaction ID : AA9A141AC120943ABB8B**  
 Amount of Each Receipt this Period 375.00  
 Memo Item CONTRIBUTION

**C. MURNANE, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 650 DUNDEE ROAD SUITE 450  
 City NORTHBROOK State IL Zip Code 60062-2700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) WEALTH MANAGEMENT ADVISOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 01 / 2020  
**Transaction ID : A7233AF2F02F24E08B9D**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. OLSEN, GREGORY, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 478 CENTRAL PARK W  
 APT. 4D  
 City NEW YORK State NY Zip Code 10025-3353  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LENOX ADVISORS Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : A5AFF957801554AEBB5D**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**B. PANGBURN, BRIAN, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 MAJOR PARKWAY  
 City NEW ROADS State LA Zip Code 70760-2679  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE PANGBURN GROUP Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 30 / 2020  
**Transaction ID : A0F49E43E6D274C0CA71**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

**C. PARKS, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4300 CYPRESS ST.  
 City TAMPA State FL Zip Code 33607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 21ST CENTURY FINANCIAL Occupation (for Individual) PRESIDENT/CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 20 / 2020  
**Transaction ID : A2E421E9C55E0443EBF9**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

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



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

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

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. PEELEN, SCOTT, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 W CANTON AVENUE # 201  
 City WINTER PARK State FL Zip Code 32789-3154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MORENO, PEELEN & COMPANY, LLC Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 07 / 14 / 2020  
**Transaction ID : ACE19C08864924581A2D**  
 Amount of Each Receipt this Period 375.00  
 Memo Item CONTRIBUTION

**B. PETERSON, JEFFREY, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 SUTTER ST SUITE 1800  
 City SAN FRANCISCO State CA Zip Code 94104-4545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) FINANCIAL ADVISER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 07 / 2020  
**Transaction ID : ADAC717D9A16C439E86D**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

**C. PICKETT, PHILLIP, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4373 KINGS MOUNTAIN RIDGE  
 City VESTAVIA State AL Zip Code 35242-2252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EBS Occupation (for Individual) FINANCIAL ADVISER  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 26 / 2020  
**Transaction ID : A26F522CFF0F44451B6A**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	625.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. ROSE, RICHARD, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4505 WILKES ST  
 City RALEIGH State NC Zip Code 27609-5662  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MASSMUTUAL Occupation (for Individual) GENERAL AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 23 / 2020  
**Transaction ID : A630EA4124E7242109A4**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 CONTRIBUTION

**B. ROSUCK, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 SAINT JOHN DRIVE  
 City HAWTHORN WOODS State IL Zip Code 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PACIFIC LIFE Occupation (for Individual) LIFE INSURANCE AGENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 01 / 2020  
**Transaction ID : A666C50DC0DD64C0088F**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
 CONTRIBUTION

**C. SCHNEIDER, COREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20 STRATTON ROAD  
 City SCARSDALE State NY Zip Code 10583-7555  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SENTINEL FINANCIAL SOLUTIONS Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 18 / 2020  
**Transaction ID : A1C743392FCF8417E95C**  
 Amount of Each Receipt this Period 125.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2125.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. SHEAN, MICHAEL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 N FRANKLIN STE. 3330

City CHICAGO	State IL	Zip Code 60606-3611
-----------------	-------------	------------------------

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

Name of Employer (for Individual) LENOX ADVISORS	Occupation (for Individual) MANAGING DIRECTOR
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2020

**Transaction ID : A7E7B8F8108024A4480B**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. TEITELBAUM, MARK, A., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1000 N MAIN STREET

City WEST HARTFORD	State CT	Zip Code 06117-2054
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) AXA EQUITABLE	Occupation (for Individual) LIFE INSURANCE AGENT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2020

**Transaction ID : A70EB3DFA1CD84A0FB70**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. TRIMBOLI, ANTHONY, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 EUGENE DR

City NORWALK	State CT	Zip Code 06851-5404
-----------------	-------------	------------------------

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

Name of Employer (for Individual) STRATEGIES FOR WEALTH	Occupation (for Individual) FINANCIAL SERVICES
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
875.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2020

**Transaction ID : A0202E19FAA7A43F49A9**

Amount of Each Receipt this Period  
875.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2875.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. UMEKUBO, DEXTER, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2105 E CRAWFORD PLACE  
 City SALINA State KS Zip Code 67401-3719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PRODUCERS XL Occupation (for Individual) MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 09 / 2020  
**Transaction ID : AA3F37565B9524DCBBBD**  
 Amount of Each Receipt this Period 375.00  
 Memo Item CONTRIBUTION

**B. VAN BENSCHOTEN, RICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 875 5TH AVENUE APT. 3A  
 City NEW YORK State NY Zip Code 10065-4952  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LENOX ADVISORS Occupation (for Individual) FINANCIAL ADVISOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 01 / 2020  
**Transaction ID : AA5B7C7DF6C474617AE4**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

**C. WHEELER, JOHN, W., , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1075 ASTER LANE  
 City WEST CHICAGO State IL Zip Code 60185-1750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MASS MUTUAL Occupation (for Individual) INSURANCE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 07 / 27 / 2020  
**Transaction ID : A499C66AEF56E40C9895**  
 Amount of Each Receipt this Period 125.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	625.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 21 OF 23
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
WHITMORE, EDGAR, , , III

Mailing Address 707 WILSHIRE BOULEVARD  
SUITE 4900

City LOS ANGELES	State CA	Zip Code 90017-3611
---------------------	-------------	------------------------

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

Name of Employer (for Individual) LENOX ADVISORS	Occupation (for Individual) MANAGING DIRECTOR
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
875.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
07		18		2020

**Transaction ID : A2D8887486DB249D7A6E**

Amount of Each Receipt this Period  
125.00

Memo Item  
CONTRIBUTION

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	16916.66

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

**A. AALU**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11921 FREEDOM DR  
SUITE 1100

City RESTON State VA Zip Code 20190

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5844.03

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 06 / 2020

**Transaction ID : A9D8DE3FD74984063A7C**

Amount of Each Receipt this Period  
329.30

Memo Item  
PAC MERCHANT FEE REIMBURSEMENT

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	329.30
<b>TOTAL</b> This Period (last page this line number only).....	329.30

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

Full Name (Last, First, Middle Initial)

**A. AUTHORIZE.NET**

Mailing Address PO BOX 8999

City  
SAN FRANCISCO

State  
CA

Zip Code  
94128-8999

Purpose of Disbursement  
PAC MERCHANT FEE

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	02	/	2020

FEC Identification Number

C [REDACTED]

**Transaction ID : BBCC8C91**  
Amount of Each Disbursement this Period

[REDACTED] 36.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST CHOICE MERCHANTS**

Mailing Address 2 SKILLMAN STREET  
SUITE 203

City  
BROOKLYN

State  
NY

Zip Code  
11205-1549

Purpose of Disbursement  
PAC MERCHANT FEE

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	02	/	2020

FEC Identification Number

C [REDACTED]

**Transaction ID : BA8347218CI**  
Amount of Each Disbursement this Period

[REDACTED] 262.41

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST CHOICE MERCHANTS**

Mailing Address 2 SKILLMAN STREET  
SUITE 203

City  
BROOKLYN

State  
NY

Zip Code  
11205-1549

Purpose of Disbursement  
PAC MERCHANT FEE

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	28	/	2020

FEC Identification Number

C [REDACTED]

**Transaction ID : BB5D5390CE**  
Amount of Each Disbursement this Period

[REDACTED] 29.99

Memo Item

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

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

329.30
329.30