

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.

Insured Retirement Institute Political Action Committee (IRI PAC)

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> 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.

Type or Print Name of Treasurer Lee Covington

Signature of Treasurer

Lee Covington

[Electronically Filed]

Date

/ /

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. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Insured Retirement Institute Political Action Committee (IRI 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="2013"/>		62280.24
(b) Cash on Hand at Beginning of Reporting Period.....	62280.24	
(c) Total Receipts (from Line 19)	20516.94	20516.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	82797.18	82797.18
7. Total Disbursements (from Line 31).....	4600.00	4600.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	78197.18	78197.18
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	

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. 06/2004)

Write or Type Committee Name

Insured Retirement Institute Political Action Committee (IRI 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).....	2500.00	2500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2500.00	2500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	18000.00	18000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	20500.00	20500.00
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.).....	16.94	16.94
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))..... ▶	20516.94	20516.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20516.94	20516.94

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	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.....	4600.00	4600.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) 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)) ..	4600.00	4600.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4600.00	4600.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20500.00	20500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20500.00	20500.00
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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 9
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Insured Retirement Institute Political Action Committee (IRI PAC)

A. Aegon Usa, Llc/Transamerica Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Pennsylvania Avenue, NW
 Suite 500A South
 City Washington State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00236414
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2013
Transaction ID : 3ABC90D964B140FFB48C
 Amount of Each Receipt this Period
 3000.00
 PAC to PAC Transfer

B. Lpl Financial Llc Political Action Committee (LPL PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 75 State Street
 24th Floor
 City Boston State MA Zip Code 02109
 FEC ID number of contributing federal political committee. **C** C00486217
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2013
Transaction ID : 5B1457A6972A4CB38245
 Amount of Each Receipt this Period
 5000.00
 PAC to PAC Transfer

C. New York Life Insurance Company Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 Madison Avenue
 Room 1109
 City New York State NY Zip Code 10010
 FEC ID number of contributing federal political committee. **C** C00158881
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2013
Transaction ID : 074CB199D7CF472E99FD
 Amount of Each Receipt this Period
 5000.00
 PAC-to-PAC Transfer

SUBTOTAL of Receipts This Page (optional).....	▶	13000.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 9
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Insured Retirement Institute Political Action Committee (IRI PAC)

Full Name (Last, First, Middle Initial) A. Pacific Life Insurance Company Political Action Committee		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 26 / 2013 Transaction ID : E0D2D56F28744B70A5F5
Mailing Address 700 Newport Center Drive		Amount of Each Receipt this Period 5000.00
City Newport Beach	State CA	Zip Code 92660
FEC ID number of contributing federal political committee. C C00068528	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	18000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

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)

Insured Retirement Institute Political Action Committee (IRI PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Sherrod Brown

Mailing Address PO Box 15293

City Washington State DC Zip Code 20003

Purpose of Disbursement
2016 Primary

011

Category/
Type

Candidate Name

Sherrod Brown

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2013

Transaction ID : 769D09E16026F96C70A

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Markey Committee; the

Mailing Address PO Box 526

City Medford State MA Zip Code 02155

Purpose of Disbursement
2013 Special

011

Category/
Type

Candidate Name

Edward John Markey

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼
Special

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	06	/	2013

Transaction ID : 05D360835060F9D1C88

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Richard E Neal for Congress Committee

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name

Richard Edmund Neal

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2013

Transaction ID : 147F0766AF1CA8931A5

Amount of Each Disbursement this Period

1000.00

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

4600.00

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

4600.00
