

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Income Life Political Action Committee

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="2012"/>	<input type="text" value="39161.95"/>	<input type="text" value="39161.95"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="47133.04"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1602.69"/>	<input type="text" value="10823.78"/>
(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="48735.73"/>	<input type="text" value="49985.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5000.00"/>	<input type="text" value="6250.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43735.73"/>	<input type="text" value="43735.73"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Income Life Political Action Committee

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).....	1434.32	7252.32
(ii) Unitemized	168.37	3571.46
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1602.69	10823.78
(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)	1602.69	10823.78
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))..... ▶	1602.69	10823.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1602.69	10823.78

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	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.....	0.00	0.00
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	5000.00	6250.00
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)) ..	5000.00	6250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	6250.00

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)	1602.69	10823.78
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1602.69	10823.78
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 6 OF 11
	<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	

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 Income Life Political Action Committee

A. Mr. Domenico Bertini
Full Name (Last, First, Middle Initial)

Mailing Address 3194 Darlington Dr

City Oaks	State CA	Zip Code 91360
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life	Occupation Director of Agent Retention
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2012

Transaction ID : SA11AI.5704

Amount of Each Receipt this Period

50.00

B. Mr. Denise Bowyer
Full Name (Last, First, Middle Initial)

Mailing Address 1840 Columbia Rd. NW #501

City Washington	State DC	Zip Code 20009
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life	Occupation Vice President Public Relations
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **983.36**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2012

Transaction ID : SA11AI.5705

Amount of Each Receipt this Period

140.48

c. Cynthia Cleary
Full Name (Last, First, Middle Initial)

Mailing Address 13600 E 50th St

City Kansas City	State MO	Zip Code 64133
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FEC ID number of contributing federal political committee. **C**

Name of Employer American Income Life Insurance	Occupation Agent
--	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **241.34**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2012

Transaction ID : SA11AI.5709

Amount of Each Receipt this Period

101.34

SUBTOTAL of Receipts This Page (optional).....▶	291.82
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 7 OF 11
	<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)
American Income Life Political Action Committee

A. James Driscoll
Full Name (Last, First, Middle Initial)

Mailing Address 4162 W Whitehead Road

City Bargersville State IN Zip Code 46106

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

Name of Employer American Income Life Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **317.86**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 24 / 2012

Transaction ID : SA11AI.5710

Amount of Each Receipt this Period
84.82

B. Mr. Robert Falvo
Full Name (Last, First, Middle Initial)

Mailing Address 1705 Surrey LN

City McKinney State TX Zip Code 75070

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

Name of Employer American Income Life Occupation Sr. Vice President Field Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1122.38**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 24 / 2012

Transaction ID : SA11AI.5711

Amount of Each Receipt this Period
160.34

c. Ms Debra Gamble
Full Name (Last, First, Middle Initial)

Mailing Address 708 Wheatland

City McGregor State TX Zip Code 76657

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

Name of Employer American Income Life Occupation Senior VP- Agency

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **688.38**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 24 / 2012

Transaction ID : SA11AI.5712

Amount of Each Receipt this Period
98.34

SUBTOTAL of Receipts This Page (optional).....▶	343.50
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 11
<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)
American Income Life Political Action Committee

Full Name (Last, First, Middle Initial)
A. Murray Horowitz

Mailing Address 1400 Richards Cir

City Alpharetta State GA Zip Code 30009

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

Name of Employer American Income Life Occupation Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 24 / 2012

Transaction ID : SA11AI.5717

Amount of Each Receipt this Period
40.00

Full Name (Last, First, Middle Initial)
B. Steve Kafkis

Mailing Address 1704 Glenmore Road

City Green Oaks State IL Zip Code 60048

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

Name of Employer American Income Life Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.10**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 24 / 2012

Transaction ID : SA11AI.5719

Amount of Each Receipt this Period
130.44

Full Name (Last, First, Middle Initial)
C. Victor Kamber

Mailing Address 4527 29th St NW

City Washington State DC Zip Code 20008

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

Name of Employer American Income Life Occupation Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1314.04**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
07 / 24 / 2012

Transaction ID : SA11AI.5720

Amount of Each Receipt this Period
187.72

SUBTOTAL of Receipts This Page (optional)..... ▶ **358.16**

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 11
<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)
American Income Life Political Action Committee

A. Ms Pamela Miller
Full Name (Last, First, Middle Initial)
Mailing Address 3705 Castle Ave.
City Waco State TX Zip Code 76710
FEC ID number of contributing federal political committee. **C**
Name of Employer American Income Life Occupation Vice President Compliance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 24 / 2012
Transaction ID : SA11AI.5723
Amount of Each Receipt this Period 50.00

B. Mr. Randall Mull
Full Name (Last, First, Middle Initial)
Mailing Address 5416 Edinburgh
City Waco State TX Zip Code 76710
FEC ID number of contributing federal political committee. **C**
Name of Employer American Income Life Occupation Senior Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 985.88

Date of Receipt 07 / 24 / 2012
Transaction ID : SA11AI.5724
Amount of Each Receipt this Period 140.84

C. Mr. Scott Smith
Full Name (Last, First, Middle Initial)
Mailing Address 1821 Woodbridge Dr.
City McKinney State TX Zip Code 75070
FEC ID number of contributing federal political committee. **C**
Name of Employer American Income Life Occupation Executive Vice President & CMO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 07 / 24 / 2012
Transaction ID : SA11AI.5727
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 390.84
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: PAGE 10 OF 11
(check only one)

<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)
American Income Life Political Action Committee

A. Larry Strong
Full Name (Last, First, Middle Initial)

Mailing Address 2222 Hwy 66 #5

City Estates Park State CO Zip Code 80517

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

Name of Employer American Income Life Occupation Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 24 / 2012

Transaction ID : SA11AI.5702

Amount of Each Receipt this Period
50.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

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

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	1434.32

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Income Life Political Action Committee

Full Name (Last, First, Middle Initial)

A. Amercian Sustainable Business Council

Mailing Address 1401 New York Ave NW !1225

City Washington State DC Zip Code 20010

Purpose of Disbursement
2012 contribution

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 10 / 2012

Transaction ID : SB29.5701

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5000.00

5000.00