

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
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

ADDRESS (number and street) 1290 Avenue of the Americas
4th Floor
 Check if different than previously reported. (ACC)
New York NY 10104

2. **FEC IDENTIFICATION NUMBER** C00161901
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 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:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 09 01 2005 through 09 30 2005

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

Type or Print Name of Treasurer Paul J. Flora

Signature of Treasurer Electronically Filed by Paul J. Flora Date 02 09 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		114003.74
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	61192.03									
(c) Total Receipts (from Line 19)	5909.57	55105.12								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	67101.60	169108.86								
7. Total Disbursements (from Line 31)	11000.00	113007.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56101.60	56101.60								
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**

Write or Type Committee Name

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	5

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	3790.00	30030.17
(i) Itemized (use Schedule A)	2119.57	25074.95
(ii) Unitemized	5909.57	55105.12
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5909.57	55105.12
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5909.57	55105.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5909.57	55105.12

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) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	11000.00	110000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	3007.26
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))..	11000.00	113007.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	11000.00	113007.26

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)	5909.57	55105.12
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5909.57	55105.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) KEVIN HANLEY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018365412618
Mailing Address TRI PARKWAY PLAZA 230 HALF MILE RD.		Amount of Each Receipt this Period 25.00
City RED BANK State NJ Zip Code 07701	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Monthly)
Name of Employer AXA Advisors, LLC Occupation District Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 225.00		

B. Full Name (Last, First, Middle Initial) THOMAS RUGGIERO		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018366412618
Mailing Address 45 WILLIAM STREET SUITE 110		Amount of Each Receipt this Period 80.00
City WELLESLEY State MA Zip Code 02181	FEC ID number of contributing federal political committee. C	P/R Deduction (\$80.00 Monthly)
Name of Employer AXA Advisors, LLC Occupation Branch Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 720.00		

C. Full Name (Last, First, Middle Initial) ALVIN FENICHEL		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018371112618
Mailing Address 1290 Ave. of the Americas 11th Floor		Amount of Each Receipt this Period 105.00
City New York State NY Zip Code 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$70.00 Bi-Weekly)
Name of Employer AXA Financial, Inc. Occupation SVP & CONTROLLER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 700.00		

SUBTOTAL of Receipts This Page (optional) ▶	210.00
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: (check only one)	PAGE 7 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) EDWARD HAYES		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018372512618
Mailing Address 200 PLAZA DRIVE		Amount of Each Receipt this Period 45.00
City State Zip Code SECAUCUS NJ 07006	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation SENIOR VICE PRESIDENT - Annuity Center	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) THOMAS LONG		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018375012618
Mailing Address 1290 Ave. of the Americas 4th Floor		Amount of Each Receipt this Period 45.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation VP - Internal Audit Department	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) PATRICIA MACISAAC		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018375112618
Mailing Address 200 PLAZA DRIVE 2		Amount of Each Receipt this Period 45.00
City State Zip Code SECAUCUS NJ 07094	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation VP - Technical Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	135.00
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: (check only one)	PAGE 8 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) JANE MAHONEY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018375212618
Mailing Address 1290 Ave. of the Americas 7th Floor		Amount of Each Receipt this Period 105.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$70.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation SVP - Admin & Special Projects	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

B. Full Name (Last, First, Middle Initial) JOHN MIRANDA		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018376512618
Mailing Address 1290 Ave. of the Americas 18th Floor		Amount of Each Receipt this Period 45.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation Technological Architecture	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) DAVID WOLLIN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018382712618
Mailing Address 1290 Ave. of the Americas 17th Floor		Amount of Each Receipt this Period 45.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation MANAGING DIRECTOR - E Business Develop	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	195.00
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: (check only one)	PAGE 9 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) MARK WUTT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018382812618
Mailing Address 1290 Ave. of the Americas 13th Floor		Amount of Each Receipt this Period 105.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$70.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation SVP - TSG Headquarters	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

B. Full Name (Last, First, Middle Initial) THOMAS DUDDY JR.		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018384212618
Mailing Address 6133 N. RIVER ROAD SUITE 1120		Amount of Each Receipt this Period 75.00
City State Zip Code ROSEMONT IL 60018	FEC ID number of contributing federal political committee. C	P/R Deduction (\$75.00 Monthly)
Name of Employer AXA Advisors, LLC	Occupation Midwest Division President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

C. Full Name (Last, First, Middle Initial) LUIS GABRIEL CHIAPPY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018385312618
Mailing Address 9130 SOUTH DADELAND BLVD. SUITE 1400		Amount of Each Receipt this Period 100.00
City State Zip Code MIAMI FL 33156	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Monthly)
Name of Employer AXA Advisors, LLC	Occupation District Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional) ▶	280.00
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: (check only one)	PAGE 10 / 25
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) HUGO CASTRO		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018388712618	
Mailing Address 9130 S. DADELAND BLVD SUITE 1400		Amount of Each Receipt this Period 80.00	
City MIAMI	State FL	Zip Code 33156	P/R Deduction (\$80.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 720.00	
Name of Employer AXA Advisors, LLC	Occupation District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) STANLEY TULIN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018389612618	
Mailing Address 1290 Ave. of the Americas 16th Floor		Amount of Each Receipt this Period 300.00	
City New York	State NY	Zip Code 10104	P/R Deduction (\$200.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 2000.00	
Name of Employer AXA Financial, Inc.	Occupation Vice Chairman and Chief Financial Offi		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) DAVE HATTEM		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018390812618	
Mailing Address 1290 Ave. of the Americas 12th Floor		Amount of Each Receipt this Period 45.00	
City New York	State NY	Zip Code 10104	P/R Deduction (\$30.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00	
Name of Employer AXA Financial, Inc.	Occupation SVP & ASSOCIATE GENERAL COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	425.00
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: (check only one)	PAGE 11 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) EDNA RUSSO		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018391212618
Mailing Address 333 Thornall Road 8th Floor		Amount of Each Receipt this Period 45.00
City Metuchen State NJ Zip Code 07094	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc. Occupation VP - TSA	Aggregate Year-to-Date 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

B. Full Name (Last, First, Middle Initial) KEVIN BYRNE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018394412618
Mailing Address 1290 Ave. of the Americas 12th Floor		Amount of Each Receipt this Period 45.00
City New York State NY Zip Code 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc. Occupation SVP and Treasurer	Aggregate Year-to-Date 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

C. Full Name (Last, First, Middle Initial) DAVID KARR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018399612618
Mailing Address 40 MONUMOUNT ROAD		Amount of Each Receipt this Period 50.00
City BALA CYNWYD State PA Zip Code 19004	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Monthly)
Name of Employer AXA Advisors, LLC Occupation Branch Manager	Aggregate Year-to-Date 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	140.00
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: (check only one)	PAGE 12 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Full Name (Last, First, Middle Initial) A. ANDREW BEIERWALTES		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 233 N. MICHIGAN AVENUE #2450		Transaction ID: PR1018400312618
City CHICAGO	State IL	Zip Code 60601
Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AXA Advisors, LLC	Occupation DISTRICT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 225.00	
P/R Deduction (\$25.00 Monthly)		

Full Name (Last, First, Middle Initial) B. WILLIAM DEGNAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7400 W. 100TH STREET SUITE 700		Transaction ID: PR1018402812618
City OVERLAND PARK	State KS	Zip Code 66210
Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AXA Advisors, LLC	Occupation Branch Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00	
P/R Deduction (\$40.00 Monthly)		

Full Name (Last, First, Middle Initial) C. STEPHEN BURNTALL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6455 SHILOH RD. STE. D		Transaction ID: PR1018403412618
City ALPHARETTA	State GA	Zip Code 30005
Amount of Each Receipt this Period _____ 60.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AXA Financial, Inc.	Occupation SENIOR VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00	
P/R Deduction (\$60.00 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 125.00
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: (check only one)	PAGE 13 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) DAVID KAM		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018406212618
Mailing Address 1290 Ave. of the Americas 14th Floor		Amount of Each Receipt this Period 45.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation SENIOR VICE PRESIDENT & SENIOR ACTUARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) RALPH VORACEK		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018408012618
Mailing Address 1001 LAKESIDE AVENUE SUITE 950		Amount of Each Receipt this Period 30.00
City State Zip Code CLEVELAND OH 44114	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Monthly)
Name of Employer AXA Advisors, LLC	Occupation Divisional Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

C. Full Name (Last, First, Middle Initial) KENNETH POULTON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018408712618
Mailing Address 6100 FAIRVIEW SUITE 200		Amount of Each Receipt this Period 30.00
City State Zip Code CHARLOTTE NC 28210	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Monthly)
Name of Employer AXA Advisors, LLC	Occupation Branch Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional) ▶	105.00
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: (check only one)	PAGE 15 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. THOMAS LAMANNA Full Name (Last, First, Middle Initial) Mailing Address 1290 Ave. of the Americas 11th Floor City State Zip Code New York NY 10104		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018412012618 Amount of Each Receipt this Period 45.00
FEC ID number of contributing federal political committee. C	Name of Employer AXA Financial, Inc. Occupation AVP & ACTUARY - R&D/Special Projects Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$30.00 Bi-Weekly)

B. GREGORY GOLDSTEIN Full Name (Last, First, Middle Initial) Mailing Address 1290 Ave. of the Americas 14th Floor City State Zip Code New York NY 10104		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018412712618 Amount of Each Receipt this Period 45.00
FEC ID number of contributing federal political committee. C	Name of Employer AXA Financial, Inc. Occupation VICE PRESIDENT - Reporting & Analysis Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$30.00 Bi-Weekly)

C. MARY BETH FARRELL Full Name (Last, First, Middle Initial) Mailing Address 1290 Ave. of the Americas 16th Floor City State Zip Code New York NY 10104		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018413612618 Amount of Each Receipt this Period 225.00
FEC ID number of contributing federal political committee. C	Name of Employer AXA Financial, Inc. Occupation EVP - Expense Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00	P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	315.00
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: (check only one)	PAGE 16 / 25
	<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

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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) DIMAS NUNEZ		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018414912618
Mailing Address 6435 Shiloh Rd. SUITE A		Amount of Each Receipt this Period 45.00
City ALPHARETTA State GA Zip Code 30005	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc. Occupation VP - Advisors Support Group HQ & Staff	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) ANTHONY BRUCCOLERI		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018416212618
Mailing Address 1290 Ave. of the Americas 11th Floor		Amount of Each Receipt this Period 60.00
City New York State NY Zip Code 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer AXA Financial, Inc. Occupation SVP	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) HENRY LANDA		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018417412618
Mailing Address 9130 S. Dadeland Blvd. #1400		Amount of Each Receipt this Period 30.00
City Miami State FL Zip Code 33156	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Monthly)
Name of Employer AXA Advisors, LLC Occupation District Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 270.00		

SUBTOTAL of Receipts This Page (optional) ▶	135.00
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: (check only one)	PAGE 17 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) ROBERT WOODCOCK		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018417712618
Mailing Address 855 ROUTE 146		Amount of Each Receipt this Period 30.00
City CLIFTON PARK	State NY	Zip Code 12065
FEC ID number of contributing federal political committee. C		P/R Deduction (\$30.00 Monthly)
Name of Employer AXA Advisors, LLC	Occupation Branch Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

B. Full Name (Last, First, Middle Initial) SEDRIC AUDAS II		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018418012618
Mailing Address 2378 WOODLAKE DRIVE STE. 200		Amount of Each Receipt this Period 100.00
City OKEMOS	State MI	Zip Code 48864
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)
Name of Employer AXA Advisors, LLC	Occupation Branch Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

C. Full Name (Last, First, Middle Initial) CHRISTOPHER NOONAN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018418312618
Mailing Address 12377 MERIT DRIVE SUITE 1500		Amount of Each Receipt this Period 50.00
City DALLAS	State TX	Zip Code 75251
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Monthly)
Name of Employer AXA Advisors, LLC	Occupation District Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	180.00
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: (check only one)	PAGE 18 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) STACY BRAUN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018420712618
Mailing Address 1290 Ave. of the Americas 7th Floor		Amount of Each Receipt this Period 45.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) MARGARET LOVE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018420812618
Mailing Address 6455 SHILOH ROAD SUITE D		Amount of Each Receipt this Period 45.00
City State Zip Code ALPHARETTA GA 30005	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation AVP - Training/Continuous Learning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) GLENN ONOS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018420912618
Mailing Address 1290 Ave. of the Americas 20th Floor		Amount of Each Receipt this Period 60.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation DIRECTOR - CRM / Siebel Applications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	150.00
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: (check only one)	PAGE 19 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) CLARENCE WRIGHT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1018421312618
Mailing Address 1290 Ave. of the Americas 13th Floor		Amount of Each Receipt this Period 45.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial, Inc.	Occupation VP - Marketing - Emerging Markets	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) HENRY SWAN JR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1047215212618
Mailing Address 233 N. Michigan Avenue Suite 2450		Amount of Each Receipt this Period 80.00
City State Zip Code Chicago IL 60601	FEC ID number of contributing federal political committee. C	P/R Deduction (\$80.00 Monthly)
Name of Employer AXA Advisors, LLC	Occupation District Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

C. Full Name (Last, First, Middle Initial) PETER CRAWFORD		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1745983612618
Mailing Address 1290 Avenue of the Americas		Amount of Each Receipt this Period 45.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	170.00
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: (check only one)	PAGE 20 / 25
	<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

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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Full Name (Last, First, Middle Initial) A. JEFFREY GREEN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4251 Crums Mill Road		Transaction ID: PR1745984512618
City Harrisburg	State PA	Zip Code 17112
Amount of Each Receipt this Period _____ 105.00		P/R Deduction (\$70.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		
Name of Employer AXA Financial	Occupation Senior Vice President, AXA Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 525.00	

Full Name (Last, First, Middle Initial) B. ANTHONY SAGES		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1290 Avenue of the Americas		Transaction ID: PR1745984712618
City New York	State NY	Zip Code 10104
Amount of Each Receipt this Period _____ 50.00		P/R Deduction (\$50.00 Monthly)
FEC ID number of contributing federal political committee. C		
Name of Employer AXA Financial	Occupation President, Northeast Division	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	

Full Name (Last, First, Middle Initial) C. JAMES BRYANT		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1290 Avenue of the Americas		Transaction ID: PR1745998412618
City New York	State NY	Zip Code 10104
Amount of Each Receipt this Period _____ 45.00		P/R Deduction (\$15.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		
Name of Employer AXA Financial	Occupation Vice President, Valuations and Projec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	200.00
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: (check only one)	PAGE 21 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) MARIANNE CHURGIN Mailing Address 1290 Avenue of the Americas City State Zip Code New York NY 10104 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1745998712618 Amount of Each Receipt this Period 60.00 P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer AXA Financial Occupation Group Director. IT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) PAMELA DUFFY Mailing Address 1290 Avenue of the Americas City State Zip Code New York NY 10104 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1745998912618 Amount of Each Receipt this Period 105.00 P/R Deduction (\$70.00 Bi-Weekly)
Name of Employer AXA Financial Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

C. Full Name (Last, First, Middle Initial) MICHAEL SLIPOWITZ Mailing Address 1290 Avenue of the Americas City State Zip Code New York NY 10104 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1745999512618 Amount of Each Receipt this Period 45.00 P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer AXA Financial Occupation Senior Vice President, Risk Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	210.00
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: (check only one)	PAGE 22 / 25
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Full Name (Last, First, Middle Initial) A. THOMAS TARBUTTON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1746001212618
Mailing Address 1290 Avenue of the Americas		Amount of Each Receipt this Period 45.00
City State Zip Code New York NY 10104	FEC ID number of contributing federal political committee. C	P/R Deduction (\$30.00 Bi-Weekly)
Name of Employer Occupation AXA Financial Director	Aggregate Year-to-Date 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DARLENE CACCIOLA		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1774726012618
Mailing Address 100 Madison Street		Amount of Each Receipt this Period 60.00
City State Zip Code Syracuse NY 13202	FEC ID number of contributing federal political committee. C	P/R Deduction (\$40.00 Bi-Weekly)
Name of Employer Occupation AXA Financial Vice President	Aggregate Year-to-Date 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. TIMOTHY HERR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1774727012618
Mailing Address 10290 Alliance Road		Amount of Each Receipt this Period 105.00
City State Zip Code Cincinnati OH 45242	FEC ID number of contributing federal political committee. C	P/R Deduction (\$70.00 Bi-Weekly)
Name of Employer Occupation USFL President and CEO	Aggregate Year-to-Date 455.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	210.00
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 23 / 25	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial)
RICHARD DZIADZIO

Mailing Address **1290 Avenue of the Americas**

City **New York** State **NY** Zip Code **10104**

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

Name of Employer **AXA Financial** Occupation **Executive Vice President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

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

Transaction ID: PR1822098212618

Amount of Each Receipt this Period
225.00

P/R Deduction (\$225.00 Bi-Weekly)

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

Mailing Address **1290 Avenue of the Americas**

City **New York** State **NY** Zip Code **10104**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

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

Transaction ID: PR1822100612618

Amount of Each Receipt this Period
225.00

P/R Deduction (\$225.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	3790.00

**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)

PAGE 24 / 25

<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)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Full Name (Last, First, Middle Initial)

A. The Bill Thomas Campaign Committee

Mailing Address P. O. BOX 395

City BAKERSFIELD State CA Zip Code 93302

Purpose of Disbursement

011
Category/
Type

Candidate Name
Bill Thomas

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CA District: 21

Transaction ID: 22858367

Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. CROWLEY FOR CONGRESS

Mailing Address PO Box 75214

City Washington D.C. State DC Zip Code 20013-5214

Purpose of Disbursement

011
Category/
Type

Candidate Name
JOSEPH CROWLEY

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: NY District:

Transaction ID: 22858374

Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Keep Our Majority PAC

Mailing Address PO Box 18277

City Washington State DC Zip Code 20035-8277

Purpose of Disbursement

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 22858372

Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

11000.00

Image# 26990305200

Form/Schedule: **F3XA**

Transaction ID:
