03/17/2005 11 : 46

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

American Council of Life Insurers PAC

ADDRESS (number and street) ▼

101 Constitution Avenue, NW

Suite 700 West

Check if different than previously reported. (ACC)

Washington | DC | 20001 | 2133

CITY ▲ STATE ▲ ZIPCODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C00147066

3. IS THIS REPORT — X 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: X

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 02 01 2005 through 02 28 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 Richard I. Klein

Signature of Treasurer Electronically Filed by Richard I. Klein Date 03 17 2005

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
American Council of Life Insurers PAC

Report Covering the Period: From: 02 01 2005 To: 02 28 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		51625.41
(b) Cash on Hand at Begining of Reporting Period	45313.31	
(c) Total Receipts (from Line 19)	14064.00	22251.90
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	59377.31	73877.31
7. Total Disbursements (from Line 31)	19000.00	33500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40377.31	40377.31
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Council of Life Insurers PAC

Report Covering the Period: From: 02 01 2005 To: 02 28 2005

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)	2324.02	3385.48
(ii) Unitemized	1739.98	3866.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	4064.00	7251.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	10000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	14064.00	22251.90
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))	14064.00	22251.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14064.00	22251.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	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	19000.00	33500.00
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	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	19000.00	33500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	19000.00	33500.00

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)	14064.00	22251.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14064.00	22251.90
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: PAGE 6 / 17
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.
Full Name (Last, First, Middle Initial)
Ms. Joanne S. Daly
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Asst PAC Treasurer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 02 15 2005
Transaction ID: R20060
Amount of Each Receipt this Period: 75.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ms. Joanne S. Daly
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Asst PAC Treasurer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 02 28 2005
Transaction ID: R20109
Amount of Each Receipt this Period: 75.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ms. Kimberly Dorgan
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President, Federal Relatio
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 572.92
Date of Receipt: 02 15 2005
Transaction ID: R20064
Amount of Each Receipt this Period: 143.23
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 293.23

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 7 / 17
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial)
Ms. Kimberly Dorgan
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President, Federal Relatio
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 572.92
Date of Receipt: 02 28 2005
Transaction ID: R20113
Amount of Each Receipt this Period: 143.23
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. Gary E. Hughes
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President & General Counse
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 02 15 2005
Transaction ID: R20074
Amount of Each Receipt this Period: 137.50
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. Gary E. Hughes
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President & General Counse
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 02 28 2005
Transaction ID: R20123
Amount of Each Receipt this Period: 137.50
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ **418.23**

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 8 / 17
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Michael J. Hunter
Mailing Address: 101 Consitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Executive Vice President & COO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 15 2005
Transaction ID: R20075
Amount of Each Receipt this Period: 125.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial): Michael J. Hunter
Mailing Address: 101 Consitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Executive Vice President & COO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 28 2005
Transaction ID: R20124
Amount of Each Receipt this Period: 125.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial): Frank Keating
Mailing Address: 101 Consitution Avenue, NW, Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: President & CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 15 2005
Transaction ID: R20076
Amount of Each Receipt this Period: 125.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 375.00

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 9 / 17
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A.
Full Name (Last, First, Middle Initial)
Frank Keating
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: President & CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 02 28 2005
Transaction ID: R20125
Amount of Each Receipt this Period: 125.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Daniel J. Mahoney
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Sr. Vice President, Public Affairs and
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 215.00
Date of Receipt: 02 15 2005
Transaction ID: R20082
Amount of Each Receipt this Period: 53.75
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Daniel J. Mahoney
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Sr. Vice President, Public Affairs and
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 215.00
Date of Receipt: 02 28 2005
Transaction ID: R20133
Amount of Each Receipt this Period: 53.75
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 232.50

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 10 / 17
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Peggy Miller
Mailing Address 101 Constitution Ave.
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Assistant Director, Publishing
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: 02 15 2005
Transaction ID: R20049
Amount of Each Receipt this Period: 650.00
Check

B.
Full Name (Last, First, Middle Initial)
Ms. Michelle A. Monkou
Mailing Address 101 Constitution Ave, NW Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 02 11 2005
Transaction ID: R20047
Amount of Each Receipt this Period: 240.00
Check

C.
Full Name (Last, First, Middle Initial)
Mr. Donald G. Preston
Mailing Address 101 Constitution Avenue, NW Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Managing Director, Reinsurance
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 230.12
Date of Receipt: 02 15 2005
Transaction ID: R20089
Amount of Each Receipt this Period: 57.53
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 947.53

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 11 / 17
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Donald G. Preston

Mailing Address 101 Constitution Avenue, NW
Suite 700 West

City: Washington
State: DC
Zip Code: 20001

FEC ID number of contributing federal political committee: C

Name of Employer: American Council of Life Insurers

Occupation: Managing Director, Reinsurance

Receipt For:
Primary General
Other (specify)

Aggregate Year-to-Date: 230.12

Date of Receipt: 02 28 2005

Transaction ID: R20140

Amount of Each Receipt this Period: 57.53

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 57.53

TOTAL This Period (last page this line number only) ..... ▶ 2324.02

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 17
(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

A.
Full Name (Last, First, Middle Initial)
Mutual of Omaha Companies PAC
Mailing Address Mutual of Omaha Plaza
City: Omaha State: NE Zip Code: 68175
FEC ID number of contributing federal political committee. C C00094581
Name of Employer
Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00
Date of Receipt 02 24 2005
Transaction ID: R20050
Amount of Each Receipt this Period 5000.00
Check

B.
Full Name (Last, First, Middle Initial)
New York Life PAC
Mailing Address 51 Madison Avenue
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 02 24 2005
Transaction ID: R20051
Amount of Each Receipt this Period 5000.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 10000.00

TOTAL This Period (last page this line number only) ..... ▶ 10000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial)
Baker for Congress Committee

Mailing Address Post Office Box 1694

City: Baton Rouge | State: LA | Zip Code: 70821

Purpose of Disbursement: Contr.

Candidate Name: Richard H. Baker

Category/Type

Office Sought: X House / Senate / President

State: LA District: 06

Disbursement For: 2006 X Primary / General / Other (specify)

Transaction ID: D9828
Date of Disbursement: 02 / 18 / 2005

Amount of Each Disbursement this Period: 1000.00

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

Mailing Address P.O. Box 746

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

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

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District:

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9824
Date of Disbursement: 02 / 03 / 2005

Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial)
Crowley for Congress

Mailing Address PO Box 75214

City: Washington | State: DC | Zip Code: 20013

Purpose of Disbursement: Contr.

Candidate Name: Joseph Crowley

Category/Type

Office Sought: X House / Senate / President

State: NY District: 07

Disbursement For: 2006 X Primary / General / Other (specify)

Transaction ID: D9844
Date of Disbursement: 02 / 18 / 2005

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): ERICPAC
Mailing Address: 209 Pennsylvania Ave, SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contr. ERICPAC (-R)
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D9834
Date of Disbursement: 02 / 18 / 2005
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Feinstein for Senate
Mailing Address: 420 C Street NE, Lower Level
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr.
Candidate Name: Dianne Feinstein
Category/Type:
Office Sought: House / X Senate / President
State: CA District
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: D9832
Date of Disbursement: 02 / 18 / 2005
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Friends of Kent Conrad
Mailing Address: PO Box 812
City: Bismarck State: ND Zip Code: 58502
Purpose of Disbursement: Contr.
Candidate Name: Kent Conrad
Category/Type:
Office Sought: House / X Senate / President
State: ND District
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: D9830
Date of Disbursement: 02 / 18 / 2005
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): Friends of Max Baucus
Mailing Address: 818 Connecticut Ave, NW, Suite 1100
City: Washington State: DC Zip Code: 20006
Purpose of Disbursement: Contr.
Candidate Name: Max Baucus
Category/Type
Office Sought: House / X Senate / President
State: MT District:
Disbursement For: 2008 X Primary General Other (specify)
Transaction ID: D9833
Date of Disbursement: 02 / 18 / 2005
Amount of Each Disbursement this Period: 1500.00

B.
Full Name (Last, First, Middle Initial): Hatch Election Committee
Mailing Address: 257 East 200 South Suite 950
City: Salt Lake City State: UT Zip Code: 84111
Purpose of Disbursement: Contr.
Candidate Name: Orrin G. Hatch
Category/Type
Office Sought: House / X Senate / President
State: UT District:
Disbursement For: 2006 X Primary General Other (specify)
Transaction ID: D9829
Date of Disbursement: 02 / 18 / 2005
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial): Mike Crapo for US Senate
Mailing Address: PO Box 1948
City: Boise State: ID Zip Code: 83701
Purpose of Disbursement: Contr.
Candidate Name: Michael D. Crapo
Category/Type
Office Sought: House / X Senate / President
State: ID District:
Disbursement For: 2010 X Primary General Other (specify)
Transaction ID: D9838
Date of Disbursement: 02 / 18 / 2005
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A.
Full Name (Last, First, Middle Initial): PRYCE Project
Mailing Address: 1155 21st Street, NW, Suite 330
City: Washington State: DC Zip Code: 20036
Purpose of Disbursement: Contr. Pryce Project (OH-R)
Candidate Name:
Category/Type:
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: D9825
Date of Disbursement: 02 / 16 / 2005
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial): Snowe for Senate
Mailing Address: P.O. Box 2006
City: Portland State: ME Zip Code: 04104
Purpose of Disbursement: Contr.
Candidate Name: Olympia J. Snowe
Category/Type:
Office Sought: House / X Senate / President
State: ME District:
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: D9827
Date of Disbursement: 02 / 18 / 2005
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Sue Kelly for Congress
Mailing Address: 1707 Prince Street, #7
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: Contr.
Candidate Name: Sue W. Kelly
Category/Type:
Office Sought: X House / Senate / President
State: NY District: 19
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: D9837
Date of Disbursement: 02 / 18 / 2005
Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

A. Full Name (Last, First, Middle Initial)
TOMPAC

Mailing Address P.O. Box 16488

City: Arlington
State: VA
Zip Code: 22215

Purpose of Disbursement
Contr. TOMPAC

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9931
Date of Disbursement
02 / 18 / 2005

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 1000.00

TOTAL This Period (last page this line number only) ..... ▶ 19000.00