

**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 31 OF 341
	<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)
New York Life Insurance Company Political Action Committee

A. Mr. Frank B. Dolph III
 Full Name (Last, First, Middle Initial)
 Mailing Address 631 Intracoastal Drive
 City Fort Lauderdale State FL Zip Code 33304-3618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York Life Insurance Company Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 07 / 31 / 2014
Transaction ID : PR109810829
 Amount of Each Receipt this Period 250.00
 P/R Deduction (\$250.00 Monthly)

B. Mr. Curtis L. Eskew Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1680 Keely Lane
 City Sarasota State FL Zip Code 34232-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York Life Insurance Company Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1166.69

Date of Receipt 07 / 31 / 2014
Transaction ID : PR110110829
 Amount of Each Receipt this Period 166.67
 P/R Deduction (\$166.67 Monthly)

C. Mr. Mark F. Bailey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 Plntn Island Dr. S Suite 210
 City Saint Augustine State FL Zip Code 32080-3115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York Life Insurance Company Occupation Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 07 / 31 / 2014
Transaction ID : PR110610829
 Amount of Each Receipt this Period 250.00
 P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 666.67
TOTAL This Period (last page this line number only).....▶