



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Association for Advanced Life Underwriting PAC (AALU PAC)**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		184637.93
(b) Cash on Hand at Beginning of Reporting Period.....	181647.5	
(c) Total Receipts (from Line 19) .....	26981.56	423451.22
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	208629.06	608089.15
7. Total Disbursements (from Line 31).....	10667.56	410127.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	197961.5	197961.5
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	

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

**Association for Advanced Life Underwriting PAC (AALU PAC)**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	25650	385850
(ii) Unitemized .....	700	10550
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	26350	396400
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	15000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	26350	411400
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received .....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	631.56	12051.22
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5) .....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	26981.56	423451.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	26981.56	423451.22

**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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	667.56	12627.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	667.56	12627.65
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500	390000
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	500	7500
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	500	7500
29. Other Disbursements (Including Non-Federal Donations).....	0	0
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10667.56	410127.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10667.56	410127.65

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	26350	411400
34. Total Contribution Refunds (from Line 28(d)) .....	500	7500
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25850	403900
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	667.56	12627.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	667.56	12627.65

**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 31
	<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	

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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Adams, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15328 32nd Avenue SE  
 City Mill Creek State WA Zip Code 98012-8311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sound Financial Group Occupation (for Individual) Financial Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600

Date of Receipt 10 / 04 / 2016  
**Transaction ID : 2626-7902-c**  
 Amount of Each Receipt this Period 200  
 Memo Item Contribution

**B. Arnaud, Hiram, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 305 West 16th Street Apt. 3K  
 City New York State NY Zip Code 10011-5983  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Strategies for Wealth Occupation (for Individual) Financial Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000

Date of Receipt 10 / 18 / 2016  
**Transaction ID : 3246-7952-c**  
 Amount of Each Receipt this Period 500  
 Memo Item Contribution

**C. Bacque, Odon, L., , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 Rue Beauregard Suite J  
 City Lafayette State LA Zip Code 70508-8511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 171-7933-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	825.00
<b>TOTAL</b> 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 31
<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Boyle, Daphne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 Mt Everest Court  
 City Clayton State CA Zip Code 94517-1605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Sitzmann, Morris & Lavis Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 14 / 2016  
**Transaction ID : 3756-7942-c**  
 Amount of Each Receipt this Period  
 250  
 Memo Item Contribution

**B. Burgess, Steven, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 103 E Social Hall Avenue  
 City Salt Lake City State UT Zip Code 84111-1503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 The Burgess Group President and CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2016  
**Transaction ID : 3567-7951-c**  
 Amount of Each Receipt this Period  
 125  
 Memo Item Contribution

**C. Burlie, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1344 Horse Creek Drive  
 City Frisco State TX Zip Code 75034-1178  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 MullinTBG Sr. Vice President, Sales & Mktg  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 875

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2016  
**Transaction ID : 3527-7898-c**  
 Amount of Each Receipt this Period  
 125  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> 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 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Cammon, Roger, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1711 Deer Creek Lane  
 City Saint Louis State MO Zip Code 63124-1445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bryant Group, Inc. Occupation (for Individual) Executive Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 2696-7937-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

**B. Castronovo Financial Group, Inc.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1276 N 15th Avenue Suite 202  
 City Bozeman State MT Zip Code 59715-3289  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500

Date of Receipt 10 / 07 / 2016  
**Transaction ID : 3854-7877-c**  
 Amount of Each Receipt this Period 500  
 Memo Item Refunded on 10/12/2016

**C. Caswell, John Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17844 E Augusta Drive  
 City Baton Rouge State LA Zip Code 70810-5921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Iron Horse Financial Occupation (for Individual) President/Managing Principal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1200

Date of Receipt 10 / 10 / 2016  
**Transaction ID : 3828-7910-c**  
 Amount of Each Receipt this Period 200  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	825.00
<b>TOTAL</b> 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 31
<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Clary, James, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2398 E Camelback Rd, Suite 320  
 City Phoenix State AZ Zip Code 85016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Clary Executive Benefits LLC Occupation (for Individual) Founder/Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 124-7944-c**  
 Amount of Each Receipt this Period 1000  
 Memo Item Contribution

**B. Culley, David, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3728 Vermont Place NE  
 City Atlanta State GA Zip Code 30319-6104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NLEC Occupation (for Individual) Life Insurance Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500

Date of Receipt 10 / 11 / 2016  
**Transaction ID : 138-7914-c**  
 Amount of Each Receipt this Period 1500  
 Memo Item Contribution

**C. D'Addona, Vincent, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 341 Harbor Drive  
 City Lido Beach State NY Zip Code 11561-4906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Strategies For Wealth Occupation (for Individual) Life Insurance Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 221-7930-c**  
 Amount of Each Receipt this Period 200  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2700.00
<b>TOTAL</b> 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 10 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Dalal, Mayur, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 275 Madison Ave  
 Suite 2301  
 City New York State NY Zip Code 10016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Dalal Capital Advisors LLC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500

Date of Receipt 10 / 18 / 2016  
**Transaction ID : 222-7956-c**  
 Amount of Each Receipt this Period 2500  
 Memo Item Contribution

**B. Denison, Lori, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12146 186th Street N  
 City Jupiter State FL Zip Code 33478-2011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NFP Partners Financial Occupation (for Individual) AVP Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300

Date of Receipt 10 / 18 / 2016  
**Transaction ID : 3862-7955-c**  
 Amount of Each Receipt this Period 300  
 Memo Item Contribution

**C. Dollarhide, Jeffrey, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9646 E Laurel Lane  
 City Scottsdale State AZ Zip Code 85260-5956  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MassMutual - Arizona Occupation (for Individual) CEO and Managing Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000

Date of Receipt 10 / 18 / 2016  
**Transaction ID : 3201-7953-c**  
 Amount of Each Receipt this Period 1000  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3800.00
<b>TOTAL</b> 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 11 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Ducato, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35 E Main Street  
 City Westfield State NY Zip Code 14787-1319  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York Life Insurance Co. Occupation (for Individual) Regional Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 3632-7928-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

**B. Feldman, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 20202 E Superstition Drive  
 City Queen Creek State AZ Zip Code 85142-9760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New York Life Occupation (for Individual) Financial Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125

Date of Receipt 10 / 04 / 2016  
**Transaction ID : 3656-7901-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

**C. Ferik, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1212 5th Avenue Apt. 12B  
 City New York State NY Zip Code 10029-5219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Guardian Life Occupation (for Individual) Actuary  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 3001-7941-c**  
 Amount of Each Receipt this Period 250  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> 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 12 OF 31
<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Fritz, R. David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 626 E Wisconsin Avenue  
 Suite 1000  
 City Milwaukee State WI Zip Code 53202-4616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Financial Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 48-7931-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

**B. Hemmer, Jerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12899 Stone Tower Loop  
 City Fort Myers State FL Zip Code 33913-6770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Guardian Occupation (for Individual) Investment Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 2932-7932-c**  
 Amount of Each Receipt this Period 200  
 Memo Item Contribution

**C. Hoyle, Samuel, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1104 Kenilworth Drive  
 Suite 402  
 City Baltimore State MD Zip Code 21204-3101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hoyle Insurance Advisory LLC Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500

Date of Receipt 10 / 06 / 2016  
**Transaction ID : 2489-7905-c**  
 Amount of Each Receipt this Period 500  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	825.00
<b>TOTAL</b> 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 13 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Johnson III, E. Hough, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 617 Dale Drive  
 City Virginia Beach State VA Zip Code 23452-1848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MassMutual Occupation (for Individual) Financial Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250

Date of Receipt 10 / 18 / 2016  
**Transaction ID : 3526-7962-c**  
 Amount of Each Receipt this Period 250  
 Memo Item Contribution

**B. Kaltenbach, Geoff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4275 Executive Square Suite 400  
 City La Jolla State CA Zip Code 92037-1476  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MassMutual of San Diego Occupation (for Individual) Managing Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250

Date of Receipt 10 / 15 / 2016  
**Transaction ID : 3677-7947-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

**C. Kaltenbach, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4275 Executive Square Suite 400  
 City La Jolla State CA Zip Code 92037-1476  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MassMutual of San Diego Occupation (for Individual) General Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250

Date of Receipt 10 / 15 / 2016  
**Transaction ID : 3680-7946-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> 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 14 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Karlitz, Paul, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2717 Via Elevado

City Palos Verdes Estates	State CA	Zip Code 90274-1436
------------------------------	-------------	------------------------

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

Name of Employer (for Individual) Lenox Advisors Inc.	Occupation (for Individual) Managing Director
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

**Transaction ID : 3252-7939-c**

Amount of Each Receipt this Period  
125

Memo Item Contribution

**B. Kelm, Chris, T., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15603 Wren Haven

City San Antonio	State TX	Zip Code 78248-1714
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Kelm Financial Services	Occupation (for Individual) Financial Advisor
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2016

**Transaction ID : 3166-7922-c**

Amount of Each Receipt this Period  
125

Memo Item Contribution

**C. Lai, Chau, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2658 Del Mar Heights Road # 221

City Del Mar	State CA	Zip Code 92014-3100
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Guardian Insurance Co.	Occupation (for Individual) CFP
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

**Transaction ID : 2453-7927-c**

Amount of Each Receipt this Period  
1000

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> 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 15 OF 31
<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Leisman III, William, F., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 800 South Street  
 Suite 650  
 City Waltham State MA Zip Code 02453-1478  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Leisman Insurance Agency, Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500

Date of Receipt 10 / 18 / 2016  
**Transaction ID : 544-7954-c**  
 Amount of Each Receipt this Period 2500  
 Memo Item Contribution

**B. Lipscomb, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10813 W 141st Street  
 City Overland Park State KS Zip Code 66221-8084  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Financial Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500

Date of Receipt 10 / 11 / 2016  
**Transaction ID : 3110-7915-c**  
 Amount of Each Receipt this Period 500  
 Memo Item Contribution

**C. Maus, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2500 Legacy Drive  
 City Finksburg State MD Zip Code 21048  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Nautilus Group Occupation (for Individual) Financial Advisor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1600

Date of Receipt 10 / 13 / 2016  
**Transaction ID : 2785-7923-c**  
 Amount of Each Receipt this Period 200  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3200.00
<b>TOTAL</b> 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 16 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. McClain, Marla, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5402 Tortuga Trail

City Austin	State TX	Zip Code 78731-4542
----------------	-------------	------------------------

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

Name of Employer (for Individual) The Kentor Company	Occupation (for Individual) Executive Vice President
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2016

**Transaction ID : 600-7949-c**

Amount of Each Receipt this Period  
125

Memo Item Contribution

**B. McKenna, Meghann, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3151 Lily Drive

City Bozeman	State MT	Zip Code 59718-6088
-----------------	-------------	------------------------

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

Name of Employer (for Individual) McKenna Financial	Occupation (for Individual) Advisor
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

**Transaction ID : 3635-7934-c**

Amount of Each Receipt this Period  
125

Memo Item Contribution

**C. McLanahan, Timothy, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1245 W Causeway Approach

City Mandeville	State LA	Zip Code 70471-3041
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Becker Suffern McLanahan Ltd	Occupation (for Individual) Vice President
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

**Transaction ID : 3721-7917-c**

Amount of Each Receipt this Period  
500

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> 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 17 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. McQuade, Corey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2015 Spring Road  
 City Oak Brook State IL Zip Code 60523-1811  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwestern Mutual Chicago Occupation (for Individual) Managing Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250

Date of Receipt 10 / 17 / 2016  
**Transaction ID : 3861-7950-c**  
 Amount of Each Receipt this Period 250  
 Memo Item Contribution

**B. Mendels, Allan, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 The Spur  
 City Roslyn State NY Zip Code 11576-1733  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Mendels & Associates Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500

Date of Receipt 10 / 10 / 2016  
**Transaction ID : 621-7907-c**  
 Amount of Each Receipt this Period 250  
 Memo Item Contribution

**C. Mendelsohn, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 Water Oak Lane  
 City Altamonte Springs State FL Zip Code 32714-5825  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ashar Group LLC Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250

Date of Receipt 10 / 13 / 2016  
**Transaction ID : 3752-7925-c**  
 Amount of Each Receipt this Period 250  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> 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 18 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Millen, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3421 Ridgewood Road  
 Suite 225  
 City Fairlawn State OH Zip Code 44333-3180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cornerstone Consulting Group Occupation (for Individual) VP of Operations & Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 3859-7943-c**  
 Amount of Each Receipt this Period 250  
 Memo Item Contribution

**B. Mingolelli, Michael, A., , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 Cartwright Road  
 City Wellesley State MA Zip Code 02482-7103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pinnacle Financial Group Occupation (for Individual) Insurance Broker/Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500

Date of Receipt 10 / 18 / 2016  
**Transaction ID : 637-7961-c**  
 Amount of Each Receipt this Period 2500  
 Memo Item Contribution

**C. Moore, Ryan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23914 Lakeside Road  
 City Valencia State CA Zip Code 91355-1605  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Wealth Management Advisor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1125

Date of Receipt 10 / 12 / 2016  
**Transaction ID : 3690-7918-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2875.00
<b>TOTAL</b> 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 19 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Murnane, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 650 Dundee Road  
 Suite 450  
 City Northbrook State IL Zip Code 60062-2700  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Wealth Management Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 3634-7935-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

**B. Nienaber, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Capitol Mall  
 Suite 350  
 City Sacramento State CA Zip Code 95814-3245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Benefit RFP Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500

Date of Receipt 10 / 15 / 2016  
**Transaction ID : 670-7948-c**  
 Amount of Each Receipt this Period 375  
 Memo Item Contribution

**C. Noland, Michael, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15 W 6th Street  
 Suite 2500  
 City Tulsa State OK Zip Code 74119-5419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Integrated Financial Occupation (for Individual) Life Insurance Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 673-7940-c**  
 Amount of Each Receipt this Period 375  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	875.00
<b>TOTAL</b> 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 20 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. O'Sullivan, Brian, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 School Street

City Marshfield	State MA	Zip Code 02050-2046
--------------------	-------------	------------------------

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

Name of Employer (for Individual) MassMutual	Occupation (for Individual) Financial Advisor
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2016

**Transaction ID : 3745-7924-c**

Amount of Each Receipt this Period  
250

Memo Item Contribution

**B. Orsolino, David, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1482 72nd Street

City Brooklyn	State NY	Zip Code 11228-1712
------------------	-------------	------------------------

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

Name of Employer (for Individual) Guardian	Occupation (for Individual) Financial Coach
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

**Transaction ID : 3059-7903-c**

Amount of Each Receipt this Period  
125

Memo Item Contribution

**C. Pangburn, Brian, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 301 Major Parkway

City New Roads	State LA	Zip Code 70760-2679
-------------------	-------------	------------------------

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

Name of Employer (for Individual) The Pangburn Group	Occupation (for Individual) President
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2016

**Transaction ID : 688-7921-c**

Amount of Each Receipt this Period  
375

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> 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 21 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Pasichow, Jerome, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7912 River Road  
 Apt. 404  
 City North Bergen State NJ Zip Code 07047-6292  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Guardian Occupation (for Individual) Associate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000

Date of Receipt 10 / 01 / 2016  
**Transaction ID : 3553-7897-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

**B. Peelen, Scott, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 W Canton Avenue  
 # 201  
 City Winter Park State FL Zip Code 32789-3154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Moreno, Peelen & Company, LLC Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 702-7938-c**  
 Amount of Each Receipt this Period 375  
 Memo Item Contribution

**C. Peterson, Jeffrey, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 Sutter St  
 Suite 1800  
 City San Francisco State CA Zip Code 94104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Financial Adviser  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1125

Date of Receipt 10 / 07 / 2016  
**Transaction ID : 709-7906-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	625.00
<b>TOTAL</b> 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 22 OF 31
<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Pickett, Phillip, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4373 Kings Mountain Ridge  
 City Vestavia State AL Zip Code 35242-2252  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EBS Occupation (for Individual) Financial Adviser  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200

Date of Receipt 10 / 02 / 2016  
**Transaction ID : 1113-7899-c**  
 Amount of Each Receipt this Period 150  
 Memo Item Contribution

**B. Rardon, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 514 Commerce Avenue Suite A  
 City Palmdale State CA Zip Code 93551-3799  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gary Rardon and Associates Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500

Date of Receipt 10 / 11 / 2016  
**Transaction ID : 3742-7916-c**  
 Amount of Each Receipt this Period 500  
 Memo Item Contribution

**C. Schwartz, Chet, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 120 Broadway Floor 37  
 City New York State NY Zip Code 10271  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Guardian Life Occupation (for Individual) Life Insurance  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000

Date of Receipt 10 / 03 / 2016  
**Transaction ID : 142-7900-c**  
 Amount of Each Receipt this Period 200  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> 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 23 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Silverman, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Bala Plaza E  
 Suite 103  
 City Bala Cynwyd State PA Zip Code 19004-3410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Arborhsa LLC Occupation (for Individual) Life Insurance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500

Date of Receipt 10 / 18 / 2016  
**Transaction ID : 905-7957-c**  
 Amount of Each Receipt this Period 500  
 Memo Item Contribution

**B. Smith, Cale, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Galleria Boulevard  
 Suite 909  
 City Metairie State LA Zip Code 70001-8501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MassMutual Louisiana Occupation (for Individual) General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 3860-7945-c**  
 Amount of Each Receipt this Period 250  
 Memo Item Contribution

**C. Umekubo, Dexter, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2105 E Crawford Place  
 City Salina State KS Zip Code 67401-3719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Producers XL Occupation (for Individual) Managing Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750

Date of Receipt 10 / 10 / 2016  
**Transaction ID : 2917-7909-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	875.00
<b>TOTAL</b> 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 24 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. Van Benschoten, Rick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 875 5th Avenue  
 Apt. 3A  
 City New York State NY Zip Code 10065-4952  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lenox Advisors Occupation (for Individual) Financial Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 2451-7936-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

**B. Whitmore, Edgar, , , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 707 Wilshire Boulevard  
 Suite 4900  
 City Los Angeles State CA Zip Code 90017-3611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Lenox Advisors Occupation (for Individual) Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250

Date of Receipt 10 / 14 / 2016  
**Transaction ID : 3633-7929-c**  
 Amount of Each Receipt this Period 125  
 Memo Item Contribution

**C. Yaisle, John, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1802 W Hamilton Street  
 City Allentown State PA Zip Code 18104-5630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cornerstone Advisors Occupation (for Individual) Insurance  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3000

Date of Receipt 10 / 05 / 2016  
**Transaction ID : 1055-7904-c**  
 Amount of Each Receipt this Period 2000  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> 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 25 OF 31
	<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)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Young, Thomas, W., ,

Mailing Address 1413 3rd Street

City Beaver	State PA	Zip Code 15009-2427
----------------	-------------	------------------------

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

Name of Employer (for Individual) 1st Consultants Inc.	Occupation (for Individual) Financial Advisor/Strategist
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2016

**Transaction ID : 2915-7908-c**

Amount of Each Receipt this Period  
125

Memo Item Contribution

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	25650.00

**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 26 OF 31
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

**A. AALU**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11921 Freedom Dr  
Suite 1100

City Reston State VA Zip Code 20190

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12051.22

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2016

**Transaction ID : 1186-7896-m**

Amount of Each Receipt this Period  
631.56

Memo Item  
PAC Merchant Fee Reimbursement

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

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

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	631.56
<b>TOTAL</b> This Period (last page this line number only).....▶	631.56

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

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NAME OF COMMITTEE (In Full)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016	
Mailing Address PO Box 8999		FEC Identification Number C [ ] <b>Transaction ID : SB21B-3119-</b> Amount of Each Disbursement this Period [ ] 37.3	
City San Francisco	State CA	Zip Code 94128-8999	Category/ Type 001
Purpose of Disbursement PAC Merchant Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. First Choice Merchants</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2016	
Mailing Address 2 Skillman Street Suite 203		FEC Identification Number C [ ] <b>Transaction ID : SB21B-3096-</b> Amount of Each Disbursement this Period [ ] 594.26	
City Brooklyn	State NY	Zip Code 11205-1549	Category/ Type 001
Purpose of Disbursement PAC Merchant Fee		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 631.56
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 631.56

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Association for Advanced Life Underwriting PAC (AALU PAC)**

Full Name (Last, First, Middle Initial)

**A. 21st Century Majority Fund**

Mailing Address 6065 Roswell Road  
# 2274

City Atlanta State GA Zip Code 30328-4011

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2016

FEC Identification Number

C C00361956

**Transaction ID : SB23-3822-7f**

Amount of Each Disbursement this Period

1500

Memo Item

Full Name (Last, First, Middle Initial)

**B. Blumenauer For Congress**

Mailing Address 901 SE Oak Street  
Suite 105

City Portland State OR Zip Code 97214-1351

Purpose of Disbursement  
VOID: Uncashed Check Orig. Disbursed 6/30/2016.

Candidate Name

**Blumenauer, Earl, , ,**

Office Sought:  House  Senate  President  
State: OR District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify)

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 11 / 2016

FEC Identification Number

C C00307314

**Transaction ID : SB23-1201-78**

Amount of Each Disbursement this Period

-1000

Memo Item

Full Name (Last, First, Middle Initial)

**C. Devin Nunes Campaign Committee**

Mailing Address PO Box 6545

City Visalia State CA Zip Code 93290-6545

Purpose of Disbursement  
Contribution

Candidate Name

**Nunes, Devin G., , ,**

Office Sought:  House  Senate  President  
State: CA District: 22

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2016

FEC Identification Number

C C00370056

**Transaction ID : SB23-2617-7;**

Amount of Each Disbursement this Period

2000

Memo Item

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

2500.00

**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)

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

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NAME OF COMMITTEE (In Full)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

Full Name (Last, First, Middle Initial)

**A. Excelsior PAC**

Mailing Address 824 S Milledge Avenue  
Suite 101

City Athens State GA Zip Code 30605-1332

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2016

FEC Identification Number

C C00541078

Transaction ID : SB23-3850-7  
Amount of Each Disbursement this Period

2000

Memo Item

Full Name (Last, First, Middle Initial)

**B. First State PAC**

Mailing Address PO Box 3006

City Wilmington State DE Zip Code 19804-0006

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 10 / 2016

FEC Identification Number

C C00363648

Transaction ID : SB23-3349-7  
Amount of Each Disbursement this Period

2500

Memo Item

Full Name (Last, First, Middle Initial)

**C. Jump Into Action For Conservatives To Keep Our Ideas Elevated PAC**

Mailing Address PO Box 26141

City Alexandria State VA Zip Code 22313-6141

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2016

FEC Identification Number

C C00582726

Transaction ID : SB23-3853-7  
Amount of Each Disbursement this Period

1000

Memo Item

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

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

5500.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

Full Name (Last, First, Middle Initial) <b>A. Tom Reed For Congress</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2016
Mailing Address PO Box 10847		FEC Identification Number C 000464032 <b>Transaction ID : SB23-3041-7</b>
City Rochester	State NY	Zip Code 14610-0847
Purpose of Disbursement Contribution		Category/Type 011
Candidate Name <b>Reed II, Thomas W., , ,</b>		Amount of Each Disbursement this Period 1500
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 23	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
Amount of Each Disbursement this Period		
City	State	Zip Code
Purpose of Disbursement		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
Amount of Each Disbursement this Period		
City	State	Zip Code
Purpose of Disbursement		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	
<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Association for Advanced Life Underwriting PAC (AALU PAC)**

Full Name (Last, First, Middle Initial) <b>A. Castronovo Financial Group, Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 12 / 2016	
Mailing Address 1276 N 15th Avenue Suite 202		FEC Identification Number C [ ] <b>Transaction ID : SB28a-3854-7</b>	
City Bozeman	State MT	Zip Code 59715-3289	Amount of Each Disbursement this Period [ ] 500
Purpose of Disbursement Refund		Category/Type 010	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period [ ]
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period [ ]
Purpose of Disbursement		Category/Type	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	500.00