

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

ADDRESS (number and street) 11921 FREEDOM DRIVE SUITE 1100 RESTON VA 20190-5634 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00447565 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

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 Year-End 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 (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2020 through 01 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. MORTON, CHRISTOPHER, J., Type or Print Name of Treasurer

Signature of Treasurer MORTON, CHRISTOPHER, J., [Electronically Filed] Date 02 / 18 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**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="2020"/>	<input type="text" value="301729.47"/>	<input type="text" value="301729.47"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="301729.47"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="22193.17"/>	<input type="text" value="22193.17"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="323922.64"/>	<input type="text" value="323922.64"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6301.51"/>	<input type="text" value="6301.51"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="317621.13"/>	<input type="text" value="317621.13"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

Report Covering the Period: From: 01 / 01 / 2020 To: 01 / 31 / 2020

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).....	16666.66	16666.66
(ii) Unitemized	4225.00	4225.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20891.66	20891.66
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	20891.66	20891.66
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.).....	1301.51	1301.51
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	22193.17	22193.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	22193.17	22193.17

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1301.51	1301.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1301.51	1301.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6301.51	6301.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6301.51	6301.51

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20891.66	20891.66
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20891.66	20891.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1301.51	1301.51
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1301.51	1301.51

**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 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. BARRADAS, RYAN, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2398 E CAMELBACK ROAD
 SUITE 320

City PHOENIX State AZ Zip Code 85016-9006

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

Name of Employer (for Individual) WEALTHPOINT Occupation (for Individual) FINANCIAL ADVISER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 01 / 21 / 2020
Transaction ID : A5E6716D92CD0404BBA5

Amount of Each Receipt this Period 375.00

Memo Item CONTRIBUTION

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

Mailing Address 52 FOREST AVE

City PARAMUS State NJ Zip Code 07652-5200

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

Name of Employer (for Individual) CERTIFIED FINANCIAL SERVICES Occupation (for Individual) FINANCIAL ADVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.66

Date of Receipt 01 / 14 / 2020
Transaction ID : AAD8FCC068F8147F682A

Amount of Each Receipt this Period 416.66

Memo Item CONTRIBUTION

C. BRACHT, CHARLES, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5314 MANDELL ST

City HOUSTON State TX Zip Code 77005

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

Name of Employer (for Individual) USI CONSULTING GROUP Occupation (for Individual) VP/MANAGING DIRECTOR

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 17 / 2020
Transaction ID : A2ABB0FDCFC0648269C6

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1291.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
	<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. BURK, STEPHEN, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9401 INDIAN CREEK PARKWAY
 SUITE 150

City OVERLAND PARK State KS Zip Code 66210

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

Name of Employer (for Individual) INSURANCE DESIGNERS OF KANSAS Occupation (for Individual) PRINCIPAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 01 / 19 / 2020
Transaction ID : AC841BBD4B9AD4853B4A

Amount of Each Receipt this Period 750.00

Memo Item CONTRIBUTION

B. CHIAPPY, LUIS, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 880 JERONIMO DR

City CORAL GABLES State FL Zip Code 33146

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

Name of Employer (for Individual) AXA ADVISORS Occupation (for Individual) EXECUTIVE VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 20 / 2020
Transaction ID : A2B82136051004C23A70

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

C. DEVORE, PAUL, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6345 BALBOA BOULEVARD
 SUITE 290

City ENCINO State CA Zip Code 91316-5238

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

Name of Employer (for Individual) FMS FINANCIAL PARTNERS, INC. Occupation (for Individual) FINANCIAL PLANNER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 27 / 2020
Transaction ID : A4EE8D71317A149ED8ED

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

A. 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 ▼ 375.00

Date of Receipt 01 / 17 / 2020
Transaction ID : AF4FA71BC2F08427794C
 Amount of Each Receipt this Period 375.00
 Memo Item
 CONTRIBUTION

B. ERHARD, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1245 JORDAN CREEK PKWY
 City WEST DES MOINES State IA Zip Code 50266-2342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 01 / 26 / 2020
Transaction ID : A087C72A950F44A61887
 Amount of Each Receipt this Period 375.00
 Memo Item
 CONTRIBUTION

C. GERSTENBLATT, DARREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 HARDING DRIVE
 City RYE State NY Zip Code 10580-1313
 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 ▼ 500.00

Date of Receipt 01 / 29 / 2020
Transaction ID : A4E14A7D0FFB540A8853
 Amount of Each Receipt this Period 500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
<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. GIARMARCO, JULIUS, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 W BIG BEAVER ROAD
 SUITE 1000
 City TROY State MI Zip Code 48084-5280
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GIARMARCO, MULLINS & HORTON Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 30 / 2020
Transaction ID : AD8438FBDB8D5471F9DC
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

B. HELMS, WALTER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4702 BERWICK TRACE
 City MARIETTA State GA Zip Code 30068-5507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEASE, LAGANA, EDEN & CULLEY, INC. Occupation (for Individual) LIFE INSURANCE ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 16 / 2020
Transaction ID : AFED3FA357F8C4016BC5
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

C. JONES, R. MARSHALL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 VIA PARADISIO
 City PALM BEACH GARDENS State FL Zip Code 33418-6204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JONES LOWRY Occupation (for Individual) INSURANCE AGENT/PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 01 / 20 / 2020
Transaction ID : A6E1F2FDD4ADD446A892
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	3375.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
<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. LARGE, GREGORY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 8020
 City GARDEN CITY State NY Zip Code 11530-8020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LENOX ADVISORS Occupation (for Individual) MANAGING PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 22 / 2020
Transaction ID : A5887974F4D9043118A3
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

B. LYMAN, MICHAEL, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6050 78TH AVENUE SE
 City MERCER ISLAND State WA Zip Code 98040-4823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE LYMAN GROUP LLC Occupation (for Individual) LIFE INSURANCE-MANAGING PARTN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 01 / 17 / 2020
Transaction ID : AC9207077224E4085969
 Amount of Each Receipt this Period 375.00
 Memo Item
 CONTRIBUTION

C. MAPLES, JASON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9464 E. ORCHARD DR.
 City GREENWOOD VILLAGE State CO Zip Code 80111-3523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LOCKTON COMPANIES Occupation (for Individual) EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 16 / 2020
Transaction ID : AF19DA0A06DDEE483EBE1
 Amount of Each Receipt this Period 1500.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2875.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 16
<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. MULLEN, DENNIS, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 MANOR ROAD
 City OLD GREENWICH State CT Zip Code 06870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 FIFTH AVENUE FINANCIAL MANAGING DIRECTOR, BROKERAGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **01 / 17 / 2020**
Transaction ID : A99F75B8495AD4C2D82A
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

B. 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) Occupation (for Individual)
 INTEGRATED FINANCIAL LIFE INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **01 / 14 / 2020**
Transaction ID : A428A0E0B6DB04180ABA
 Amount of Each Receipt this Period 375.00
 Memo Item CONTRIBUTION

C. O'MALLEY, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7251 BEECH ROAD
 City AMBLER State PA Zip Code 19002-5401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 PENN LIFE INSURANCE CO. FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **01 / 28 / 2020**
Transaction ID : A71E01046A7714BA4A6A
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. 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 ▼ 375.00

Date of Receipt 01 / 14 / 2020
Transaction ID : AFAA9F2BC610449AC91C

Amount of Each Receipt this Period 375.00

Memo Item CONTRIBUTION

B. PENNEY, MICHAEL, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1089 W MORSE BOULEVARD

City WINTER PARK State FL Zip Code 32789-3772

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

Name of Employer (for Individual) MICHAEL G PENNEY INS. Occupation (for Individual) INSURANCE SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 29 / 2020
Transaction ID : AE15D5E51574842AE9F1

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

C. PHILLIPS, JOHN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3633 BEECH DOWN DRIVE

City CHANTILLY State VA Zip Code 20151-3382

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

Name of Employer (for Individual) AALU Occupation (for Individual) VP - COMMUNICATIONS AND MKTG

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 01 / 03 / 2020
Transaction ID : AF7D197ABD37548EAA9F

Amount of Each Receipt this Period 750.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)

A. STEWART, BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4215 EDISON LAKES PARKWAY
 SUITE 200

City MISHAWAKA State IN Zip Code 46545-1425

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

Name of Employer (for Individual) NORTHWESTERN MUTUAL Occupation (for Individual) MANAGING PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 03 / 2020
Transaction ID : A6F84FF5FE2E54440871

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

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

Mailing Address 949 SOUTH SHADY GROVE ROAD
 SUITE 300

City MEMPHIS State TN Zip Code 38120-4132

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 24 / 2020
Transaction ID : A7A6B33EE7F50495584B

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

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

Mailing Address 172 E DAVIS BOULEVARD

City TAMPA State FL Zip Code 33606-3514

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

Name of Employer (for Individual) THOMAS FINANCIAL GROUP Occupation (for Individual) PRODUCER ASSOCIATE

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 17 / 2020
Transaction ID : A6171CC06F29B4282A28

Amount of Each Receipt this Period 1500.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	16666.66

**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 16
<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 ▼
1301.51

Date of Receipt
MM / DD / YYYY
01 / 14 / 2020

Transaction ID : A202153A76875445AB90

Amount of Each Receipt this Period
1301.51

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
MM / DD / YYYY

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1301.51
TOTAL This Period (last page this line number only).....	1301.51

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)

A. FIRST CHOICE MERCHANTS

Mailing Address 2 SKILLMAN STREET
SUITE 203

City
BROOKLYN

State
NY

Zip Code
11205-1549

Purpose of Disbursement
PAC MERCHANT FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	2	0

FEC Identification Number

C [REDACTED]

Transaction ID : B8708B2764C

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0

Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST CHOICE MERCHANTS

Mailing Address 2 SKILLMAN STREET
SUITE 203

City
BROOKLYN

State
NY

Zip Code
11205-1549

Purpose of Disbursement
PAC MERCHANT FEE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	2	0

FEC Identification Number

C [REDACTED]

Transaction ID : B6A5CBA156

Amount of Each Disbursement this Period

2	9	9	9	9	9	9	9	9	9

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[REDACTED]

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

Memo Item

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

1	2	3	4	5	6	7	8	9	0

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

1	2	3	4	5	6	7	8	9	0

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. TEAM HAGERTY

Mailing Address 4515 HARDING PIKE
STE 110

City
NASHVILLE

State
TN

Zip Code
37205-2193

Purpose of Disbursement
CONTRIBUTION

Candidate Name

HAGERTY, BILL, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: TN District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	0		2	0	2	0

FEC Identification Number

C C00718627

Transaction ID : B8133FBEA7

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

5000.00

5000.00