

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

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

FOR LINE NUMBER: PAGE 61 OF 443
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
New York Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)
A. Mr. Frank M. Covelli

Mailing Address 9134 Settlers Road

City State Zip Code
 Madison WI 53717-2751

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

Name of Employer Occupation
 New York Life Insurance Company Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 365.56

Date of Receipt
 09 / 30 / 2011
Transaction ID : PR13526080

Amount of Each Receipt this Period
 38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Mr. Thomas J. Genera

Mailing Address 66 River Street

City State Zip Code
 Guilford CT 06437-2619

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

Name of Employer Occupation
 New York Life Insurance Company Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 234.00

Date of Receipt
 09 / 30 / 2011
Transaction ID : PR1356080

Amount of Each Receipt this Period
 26.00

P/R Deduction (\$26.00 Monthly)

Full Name (Last, First, Middle Initial)
c. Mr. Kenneth A. Olson

Mailing Address 68-1785 Melia Street Apt. 6-211

City State Zip Code
 Waikoloa HI 96738-5572

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

Name of Employer Occupation
 New York Life Insurance Company Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2250.00

Date of Receipt
 09 / 30 / 2011
Transaction ID : PR13566080

Amount of Each Receipt this Period
 250.00

P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 314.48

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