

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
MetLife Inc. Employees Pol. Participation Fund A

ADDRESS (number and street) 27-01 Queens Plaza North Area 4-D  
 Check if different than previously reported. (ACC)  
Long Island City NY 11101

2. **FEC IDENTIFICATION NUMBER** C00040923  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 02 01 2008 through 02 29 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Timothy J. Ring

Signature of Treasurer Electronically Filed by Timothy J. Ring Date 03 18 2008

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MetLife Inc. Employees Pol. Participation Fund A

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		234055.37
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	277374.67									
(c) Total Receipts (from Line 19) .....	47128.75	95098.05								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	324503.42	329153.42								
7. Total Disbursements (from Line 31) .....	105500.00	110150.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	219003.42	219003.42								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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  
MetLife Inc. Employees Pol. Participation Fund A

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

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	26216.87	38032.64
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	20911.88	57065.41
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	47128.75	95098.05
(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) .....	47128.75	95098.05
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	47128.75	95098.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	47128.75	95098.05

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	4650.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	4650.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	105500.00	105500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	105500.00	110150.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	105500.00	110150.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	47128.75	95098.05
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	47128.75	95098.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	4650.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	4650.00

**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 6 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Rhea Adler		Date of Receipt MM / DD / YYYY 02 / 15 / 2008		
	Mailing Address 3 Winslow Road		<b>Transaction ID:</b> A2008-316377		
	City Weston	State CT	Zip Code 06883	Amount of Each Receipt this Period 83.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Vice President & Actuary	Aggregate Year-to-Date 249.99		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Rhea Adler		Date of Receipt MM / DD / YYYY 02 / 29 / 2008		
	Mailing Address 3 Winslow Road		<b>Transaction ID:</b> A2008-338467		
	City Weston	State CT	Zip Code 06883	Amount of Each Receipt this Period 83.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Vice President & Actuary	Aggregate Year-to-Date 333.32		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Roy R Anderson		Date of Receipt MM / DD / YYYY 02 / 15 / 2008		
	Mailing Address 151 Surrey Lane		<b>Transaction ID:</b> A2008-315927		
	City Dracut	State MA	Zip Code 01826	Amount of Each Receipt this Period 104.17	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Vice-President	Aggregate Year-to-Date 312.51		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	270.83
<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: PAGE 7 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Roy R Anderson

Mailing Address 151 Surrey Lane

City State Zip Code  
Dracut MA 01826

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 416.68

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338016

Amount of Each Receipt this Period  
104.17

**B.**

Full Name (Last, First, Middle Initial)  
William D. Anderson

Mailing Address 56 Birch Run Avenue

City State Zip Code  
Denville NJ 07834

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 312.51

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316270

Amount of Each Receipt this Period  
104.17

**C.**

Full Name (Last, First, Middle Initial)  
William D. Anderson

Mailing Address 56 Birch Run Avenue

City State Zip Code  
Denville NJ 07834

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 416.68

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338360

Amount of Each Receipt this Period  
104.17

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

312.51

**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: PAGE 8 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial) Virgelan E Aquino		Date of Receipt MM / DD / YYYY 02 / 15 / 2008
Mailing Address 748 Durham Terrace		<b>Transaction ID:</b> A2008-315955
City Brick	State NJ	Zip Code 08724
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 76.92
Name of Employer Metropolitan Life Insurance Co	Occupation Vice-President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

**B.**

Full Name (Last, First, Middle Initial) Virgelan E Aquino		Date of Receipt MM / DD / YYYY 02 / 29 / 2008
Mailing Address 748 Durham Terrace		<b>Transaction ID:</b> A2008-338044
City Brick	State NJ	Zip Code 08724
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 76.92
Name of Employer Metropolitan Life Insurance Co	Occupation Vice-President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

**C.**

Full Name (Last, First, Middle Initial) Roberto Baron		Date of Receipt MM / DD / YYYY 02 / 15 / 2008
Mailing Address 28 Stonehenge Rd		<b>Transaction ID:</b> A2008-315941
City Manhasset	State NY	Zip Code 11030
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 104.16
Name of Employer Metropolitan Life Insurance Co	Occupation Vice President & Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.48	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>258.00</b>
<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 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Roberto Baron	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 28 Stonehenge Rd	<b>Transaction ID:</b> A2008-338030
	City State Zip Code Manhasset NY 11030	Amount of Each Receipt this Period 104.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice President & Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.64	

<b>B.</b>	Full Name (Last, First, Middle Initial) Gregory S Benesh	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 913 Lakewood Drive	<b>Transaction ID:</b> A2008-315906
	City State Zip Code Barrington IL 60010	Amount of Each Receipt this Period 96.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice-President & Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.45	

<b>C.</b>	Full Name (Last, First, Middle Initial) Gregory S Benesh	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 913 Lakewood Drive	<b>Transaction ID:</b> A2008-337995
	City State Zip Code Barrington IL 60010	Amount of Each Receipt this Period 96.15
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice-President & Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 384.60	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	296.46
<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: PAGE 10 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Susan H Berger

Mailing Address 433 East 56th St

City State Zip Code  
New York NY 10022

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312.48

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316226

Amount of Each Receipt this Period  
104.16

**B.**

Full Name (Last, First, Middle Initial)  
Susan H Berger

Mailing Address 433 East 56th St

City State Zip Code  
New York NY 10022

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.64

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338316

Amount of Each Receipt this Period  
104.16

**C.**

Full Name (Last, First, Middle Initial)  
Bradley Bodell

Mailing Address 536 Ridgewood Ave.

City State Zip Code  
Glen Ridge NJ 07028

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312.48

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-315920

Amount of Each Receipt this Period  
104.16

**SUBTOTAL** of Receipts This Page (optional) ..... ► **312.48**

**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: PAGE 11 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bradley Bodell</p> <p>Mailing Address 536 Ridgewood Ave.</p> <p>City State Zip Code Glen Ridge NJ 07028</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Metropolitan Life Insurance Co Occupation Vice-President</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">416.64</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Transaction ID:</b> A2008-338009</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">104.16</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Duane Bollert</p> <p>Mailing Address 20 Old Hill Farms Road</p> <p>City State Zip Code Westport CT 06880</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Metropolitan Life Insurance Co Occupation Director</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">312.51</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Transaction ID:</b> A2008-316544</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">104.17</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Duane Bollert</p> <p>Mailing Address 20 Old Hill Farms Road</p> <p>City State Zip Code Westport CT 06880</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Metropolitan Life Insurance Co Occupation Director</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">416.68</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">29</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Transaction ID:</b> A2008-338633</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">104.17</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">312.50</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Renee Borchardt

Mailing Address 82 Thurston Terrace

City State Zip Code  
Glen Rock NJ 07452

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316011

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Renee Borchardt

Mailing Address 82 Thurston Terrace

City State Zip Code  
Glen Rock NJ 07452

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338100

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Steven J Brash

Mailing Address 1150 Park Avenue

City State Zip Code  
New York NY 10128

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316189

Amount of Each Receipt this Period  
77.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **277.00**

**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: PAGE 13 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

<p><b>A.</b> Full Name (Last, First, Middle Initial) Steven J Brash</p> <p>Mailing Address 1150 Park Avenue</p> <p>City State Zip Code New York NY 10128</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Metropolitan Life Insurance Co Occupation Vice President</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">308.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>  <span style="border: 1px solid black; padding: 2px;">02 / 29 / 2008</span></p> <p><b>Transaction ID:</b> A2008-338279</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">77.00</span></p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Herbert B Brown</p> <p>Mailing Address 64 Adams Street</p> <p>City State Zip Code Garden City NY 11530</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Metropolitan Life Insurance Co Occupation Vice-President</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">288.45</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>  <span style="border: 1px solid black; padding: 2px;">02 / 15 / 2008</span></p> <p><b>Transaction ID:</b> A2008-316222</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">96.15</span></p>
---	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Herbert B Brown</p> <p>Mailing Address 64 Adams Street</p> <p>City State Zip Code Garden City NY 11530</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Metropolitan Life Insurance Co Occupation Vice-President</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">384.60</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>  <span style="border: 1px solid black; padding: 2px;">02 / 29 / 2008</span></p> <p><b>Transaction ID:</b> A2008-338312</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">96.15</span></p>
---	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">269.30</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Angelica Cantlon

Mailing Address 741 New Norwalk Rd.

City State Zip Code  
New Canaan CT 06840

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 406.23

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316248

Amount of Each Receipt this Period  
135.41

**B.**

Full Name (Last, First, Middle Initial)  
Angelica Cantlon

Mailing Address 741 New Norwalk Rd.

City State Zip Code  
New Canaan CT 06840

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 541.64

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338338

Amount of Each Receipt this Period  
135.41

**C.**

Full Name (Last, First, Middle Initial)  
Debra J Capolarello

Mailing Address 79 Village Road

City State Zip Code  
Manhasset NY 11030

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.45

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316283

Amount of Each Receipt this Period  
96.15

**SUBTOTAL** of Receipts This Page (optional) ..... ► **366.97**

**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 15 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Debra J Capolarello		Date of Receipt MM / DD / YYYY 02 / 29 / 2008		
	Mailing Address 79 Village Road		<b>Transaction ID:</b> A2008-338373		
	City Manhasset	State NY	Zip Code 11030	Amount of Each Receipt this Period 96.15	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Senior Vice President	Aggregate Year-to-Date 384.60		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Gwenn L Carr		Date of Receipt MM / DD / YYYY 02 / 15 / 2008		
	Mailing Address 150 East 69th Street		<b>Transaction ID:</b> A2008-315951		
	City New York	State NY	Zip Code 10021	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Senior Vice-President	Aggregate Year-to-Date 375.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Gwenn L Carr		Date of Receipt MM / DD / YYYY 02 / 29 / 2008		
	Mailing Address 150 East 69th Street		<b>Transaction ID:</b> A2008-338040		
	City New York	State NY	Zip Code 10021	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Senior Vice-President	Aggregate Year-to-Date 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>346.15</b>
<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: PAGE 16 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Frank Cassandra  
 Mailing Address 16 Ferndale Court  
 City Staten Island State NY Zip Code 10314  
 Date of Receipt MM / DD / YYYY 02 / 15 / 2008  
 Transaction ID: A2008-316097  
 Amount of Each Receipt this Period 76.92  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Metropolitan Life Insurance Co Occupation Vice-President & Actuary  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 230.76

**B.** Full Name (Last, First, Middle Initial)  
Frank Cassandra  
 Mailing Address 16 Ferndale Court  
 City Staten Island State NY Zip Code 10314  
 Date of Receipt MM / DD / YYYY 02 / 29 / 2008  
 Transaction ID: A2008-338186  
 Amount of Each Receipt this Period 76.92  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Metropolitan Life Insurance Co Occupation Vice-President & Actuary  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 307.68

**C.** Full Name (Last, First, Middle Initial)  
Steven T Cates  
 Mailing Address 2574 North Rock Creek Road  
 City Waco State TX Zip Code 76708  
 Date of Receipt MM / DD / YYYY 02 / 15 / 2008  
 Transaction ID: A2008-316056  
 Amount of Each Receipt this Period 96.15  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Metropolitan Life Insurance Co Occupation Vice-President  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 288.45

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 249.99  
**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 17 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven T Cates		Date of Receipt
	Mailing Address 2574 North Rock Creek Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Waco	TX	76708
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-338145
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 384.60	96.15

<b>B.</b>	Full Name (Last, First, Middle Initial) Kevin R Cavanagh		Date of Receipt
	Mailing Address 12 Holly Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Blauvelt	NY	10913
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-316077
Name of Employer Metropolitan Life Insurance Co		Occupation Director-Real Estate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	100.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Kevin R Cavanagh		Date of Receipt
	Mailing Address 12 Holly Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Blauvelt	NY	10913
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-338166
Name of Employer Metropolitan Life Insurance Co		Occupation Director-Real Estate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>296.15</b>
<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: PAGE 18 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Paul Cellupica

Mailing Address 250 West 50th Street

City State Zip Code  
New York NY 10019

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

Name of Employer  
Metropolitan Life Insurance Co

Occupation  
Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-315899

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)  
Paul Cellupica

Mailing Address 250 West 50th Street

City State Zip Code  
New York NY 10019

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

Name of Employer  
Metropolitan Life Insurance Co

Occupation  
Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-337988

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)  
William Mark Coggan

Mailing Address 75 Linden Lane

City State Zip Code  
West Greenwich RI 02817

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

Name of Employer  
Metropolitan Life Insurance Co

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338245

Amount of Each Receipt this Period

62.50

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

312.50

**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: PAGE 19 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Richard S Collins

Mailing Address 72 West Brother Drive

City State Zip Code  
Greenwich CT 06830

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 323.43

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316010

Amount of Each Receipt this Period  
107.81

**B.**

Full Name (Last, First, Middle Initial)  
Richard S Collins

Mailing Address 72 West Brother Drive

City State Zip Code  
Greenwich CT 06830

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 431.24

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338099

Amount of Each Receipt this Period  
107.81

**C.**

Full Name (Last, First, Middle Initial)  
Donnalee DeMaio

Mailing Address 8 Hancock Lane

City State Zip Code  
Middletown NJ 07748

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Sr.VP & President-MetLife Bank

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.51

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316482

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional) ..... ► **319.79**

**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 20 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Donnalee DeMaio		Date of Receipt
	Mailing Address 8 Hancock Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Middletown	NJ	07748
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A2008-338572
Name of Employer Metropolitan Life Insurance Co		Occupation Sr.VP & President-MetLife Bank	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.68	<input type="text"/> 104.17

<b>B.</b>	Full Name (Last, First, Middle Initial) Michelle DeWine		Date of Receipt
	Mailing Address 67 Cooper Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Warwick	RI	02886
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A2008-316326
Name of Employer Metropolitan Life Insurance Co		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 246.87	<input type="text"/> 82.29

<b>C.</b>	Full Name (Last, First, Middle Initial) Michelle DeWine		Date of Receipt
	Mailing Address 67 Cooper Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Warwick	RI	02886
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A2008-338416
Name of Employer Metropolitan Life Insurance Co		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 329.16	<input type="text"/> 82.29

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 268.75
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Jane Dickson		Date of Receipt MM / DD / YYYY 02 / 15 / 2008		
	Mailing Address 109 Brooklake Rd		<b>Transaction ID:</b> A2008-316509		
	City Florham Park	State NJ	Zip Code 07932	Amount of Each Receipt this Period 83.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Associate General Counsel	Aggregate Year-to-Date 249.99		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Jane Dickson		Date of Receipt MM / DD / YYYY 02 / 29 / 2008		
	Mailing Address 109 Brooklake Rd		<b>Transaction ID:</b> A2008-338599		
	City Florham Park	State NJ	Zip Code 07932	Amount of Each Receipt this Period 83.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Associate General Counsel	Aggregate Year-to-Date 333.32		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Francis M. Donnantuono		Date of Receipt MM / DD / YYYY 02 / 15 / 2008		
	Mailing Address 196 Summit Avenue		<b>Transaction ID:</b> A2008-316068		
	City Summit	State NJ	Zip Code 07901	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Managing Director-FII/PMU	Aggregate Year-to-Date 375.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	291.66
<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: PAGE 22 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Francis M. Donnantuono

Mailing Address 196 Summit Avenue

City State Zip Code  
Summit NJ 07901

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Managing Director-FII/PMU

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338157

Amount of Each Receipt this Period  
125.00

**B.**

Full Name (Last, First, Middle Initial)  
Nancy Doyle

Mailing Address 10 Concord Ln

City State Zip Code  
Morristown NJ 07960

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Director-FII/PMU

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316237

Amount of Each Receipt this Period  
83.33

**C.**

Full Name (Last, First, Middle Initial)  
Nancy Doyle

Mailing Address 10 Concord Ln

City State Zip Code  
Morristown NJ 07960

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Director-FII/PMU

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.32

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338327

Amount of Each Receipt this Period  
83.33

**SUBTOTAL** of Receipts This Page (optional) ..... ► **291.66**

**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 23 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Barbara Duffy		Date of Receipt
	Mailing Address 188 Manhasset Woods Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Manhasset	NY	11030
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-315913
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.48	<input type="text"/> 104.16

<b>B.</b>	Full Name (Last, First, Middle Initial) Barbara Duffy		Date of Receipt
	Mailing Address 188 Manhasset Woods Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Manhasset	NY	11030
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-338002
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.64	<input type="text"/> 104.16

<b>C.</b>	Full Name (Last, First, Middle Initial) Joseph L Dunn		Date of Receipt
	Mailing Address 18 Fenimore Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Scarsdale	NY	10583
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-316039
Name of Employer Metropolitan Life Insurance Co		Occupation Vice President & Sr. Actuary	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.51	<input type="text"/> 104.17

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>312.49</b>
<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 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Joseph L Dunn		Date of Receipt
	Mailing Address 18 Fenimore Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Scarsdale	NY	10583
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-338128
Name of Employer Metropolitan Life Insurance Co		Occupation Vice President & Sr. Actuary	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.68	<input type="text"/> 104.17

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Ehrenzweig		Date of Receipt
	Mailing Address 43 Lent Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Plainview	NY	11803
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-316206
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.48	<input type="text"/> 104.16

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Ehrenzweig		Date of Receipt
	Mailing Address 43 Lent Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Plainview	NY	11803
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-338296
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.64	<input type="text"/> 104.16

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>312.49</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



**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 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael K Farrell		Date of Receipt	
	Mailing Address PO Box 52		M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-315926
	New Vernon	NJ	07976	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		208.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 624.99		

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael K Farrell		Date of Receipt	
	Mailing Address PO Box 52		M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-338015
	New Vernon	NJ	07976	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		208.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 833.32		

<b>C.</b>	Full Name (Last, First, Middle Initial) Margaret C Fechtmann		Date of Receipt	
	Mailing Address 420 East 23rd Street		M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-316020
	New York	NY	10010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		208.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 624.99		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	624.99
<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: PAGE 26 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Margaret C Fechtmann

Mailing Address 420 East 23rd Street

City State Zip Code  
New York NY 10010

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338109

Amount of Each Receipt this Period  
208.33

**B.**

Full Name (Last, First, Middle Initial)  
Michael A Fradkin

Mailing Address 13 Quail Court

City State Zip Code  
Manalapan NJ 07726

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338385

Amount of Each Receipt this Period  
62.50

**C.**

Full Name (Last, First, Middle Initial)  
Aaron Fried

Mailing Address 162 Slocum Crescent

City State Zip Code  
Forest Hills NY 11375

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President & Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.51

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316402

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)

Aaron Fried

Mailing Address 162 Slocum Crescent

City State Zip Code  
Forest Hills NY 11375

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President & Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 416.68

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338492

Amount of Each Receipt this Period

104.17

**B.**

Full Name (Last, First, Middle Initial)

Ira Friedman

Mailing Address 130 Chadwick Road

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316172

Amount of Each Receipt this Period

130.00

**C.**

Full Name (Last, First, Middle Initial)

Ira Friedman

Mailing Address 130 Chadwick Road

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338262

Amount of Each Receipt this Period

130.00

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

364.17

**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: PAGE 28 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
William P Gardella

Mailing Address 95 Tomahawk Street

City Yorktown Heights State NY Zip Code 10598

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

Name of Employer Metropolitan Life Insurance Co Occupation Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.45

Date of Receipt 02 / 15 / 2008

**Transaction ID:** A2008-316043

Amount of Each Receipt this Period 96.15

**B.**

Full Name (Last, First, Middle Initial)  
William P Gardella

Mailing Address 95 Tomahawk Street

City Yorktown Heights State NY Zip Code 10598

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

Name of Employer Metropolitan Life Insurance Co Occupation Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.60

Date of Receipt 02 / 29 / 2008

**Transaction ID:** A2008-338132

Amount of Each Receipt this Period 96.15

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Mira Graetz-Ball

Mailing Address 4 Peter Cooper Road

City New York State NY Zip Code 10010

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

Name of Employer Metropolitan Life Insurance Co Occupation Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.51

Date of Receipt 02 / 15 / 2008

**Transaction ID:** A2008-316095

Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional) ..... ► 296.47

**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: PAGE 29 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Mira Graetz-Ball

Mailing Address 4 Peter Cooper Road

City State Zip Code  
New York NY 10010

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.68

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

Transaction ID: A2008-338184

Amount of Each Receipt this Period  
104.17

**B.**

Full Name (Last, First, Middle Initial)  
Nancy Hanslowe

Mailing Address 105 East Central Avenue

City State Zip Code  
Wharton NJ 07885

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312.48

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

Transaction ID: A2008-315914

Amount of Each Receipt this Period  
104.16

**C.**

Full Name (Last, First, Middle Initial)  
Nancy Hanslowe

Mailing Address 105 East Central Avenue

City State Zip Code  
Wharton NJ 07885

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.64

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

Transaction ID: A2008-338003

Amount of Each Receipt this Period  
104.16

**SUBTOTAL** of Receipts This Page (optional) ..... ► **312.49**

**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: PAGE 30 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Patricia Haverland  
 Mailing Address 49 Prospect St  
 City Madison State NJ Zip Code 07940  
 Date of Receipt 02 / 15 / 2008  
**Transaction ID:** A2008-316319  
 Amount of Each Receipt this Period 83.33  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Metropolitan Life Insurance Co Occupation Director-FII/PMU  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 249.99

**B.** Full Name (Last, First, Middle Initial)  
Patricia Haverland  
 Mailing Address 49 Prospect St  
 City Madison State NJ Zip Code 07940  
 Date of Receipt 02 / 29 / 2008  
**Transaction ID:** A2008-338409  
 Amount of Each Receipt this Period 83.33  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Metropolitan Life Insurance Co Occupation Director-FII/PMU  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.32

**C.** Full Name (Last, First, Middle Initial)  
Kathleen A Henkel  
 Mailing Address 43 the Glen  
 City Tamiment State PA Zip Code 18371  
 Date of Receipt 02 / 15 / 2008  
**Transaction ID:** A2008-316218  
 Amount of Each Receipt this Period 125.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Metropolitan Life Insurance Co Occupation Senior Vice-President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 291.66  
**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: PAGE 31 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)

Kathleen A Henkel

Mailing Address 43 the Glen

City State Zip Code  
Tamiment PA 18371

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338308

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)

James N Heston

Mailing Address 41 Franklin School Way

City State Zip Code  
Metuchen NJ 08840

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
624.99

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316203

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)

James N Heston

Mailing Address 41 Franklin School Way

City State Zip Code  
Metuchen NJ 08840

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
833.32

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338293

Amount of Each Receipt this Period

208.33

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

541.66

**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: PAGE 32 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Jerry A Hoffman

Mailing Address 4405 Wernle Road

City Richmond State IN Zip Code 47374

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Director-Agric Inv

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 02 / 29 / 2008  
**Transaction ID: A2008-338256**  
 Amount of Each Receipt this Period 56.25

**B.** Full Name (Last, First, Middle Initial)  
James Hunt

Mailing Address 310 West 72 Street Apt.7D

City New York State NY Zip Code 10023

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.48

Date of Receipt 02 / 15 / 2008  
**Transaction ID: A2008-316410**  
 Amount of Each Receipt this Period 104.16

**C.** Full Name (Last, First, Middle Initial)  
James Hunt

Mailing Address 310 West 72 Street Apt.7D

City New York State NY Zip Code 10023

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.64

Date of Receipt 02 / 29 / 2008  
**Transaction ID: A2008-338500**  
 Amount of Each Receipt this Period 104.16

**SUBTOTAL** of Receipts This Page (optional) ..... ► 264.57

**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: <span style="float: right;">PAGE 33 / 95</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Scott Isley

Mailing Address 31 Arnold Drive

City Randolph State NJ Zip Code 07869

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

Name of Employer Metropolitan Life Insurance Co Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt 02 / 15 / 2008

**Transaction ID: A2008-316409**

Amount of Each Receipt this Period 87.50

**B.**

Full Name (Last, First, Middle Initial)  
Scott Isley

Mailing Address 31 Arnold Drive

City Randolph State NJ Zip Code 07869

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

Name of Employer Metropolitan Life Insurance Co Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 02 / 29 / 2008

**Transaction ID: A2008-338499**

Amount of Each Receipt this Period 87.50

**C.**

Full Name (Last, First, Middle Initial)  
Lowell L Jacobs

Mailing Address 12 Harrison Ct

City So Orange State NJ Zip Code 07079

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

Name of Employer Metropolitan Life Insurance Co Occupation Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.99

Date of Receipt 02 / 15 / 2008

**Transaction ID: A2008-316263**

Amount of Each Receipt this Period 83.33

**SUBTOTAL** of Receipts This Page (optional) ..... ► **258.33**

**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: PAGE 34 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Lowell L Jacobs

Mailing Address 12 Harrison Ct

City State Zip Code  
So Orange NJ 07079

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.32

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338353

Amount of Each Receipt this Period  
83.33

**B.**

Full Name (Last, First, Middle Initial)  
Sibyl C Jacobson

Mailing Address 510 East 23rd Street Apt 14B

City State Zip Code  
New York NY 10010

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
346.14

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316284

Amount of Each Receipt this Period  
115.38

**C.**

Full Name (Last, First, Middle Initial)  
Sibyl C Jacobson

Mailing Address 510 East 23rd Street Apt 14B

City State Zip Code  
New York NY 10010

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
461.52

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338374

Amount of Each Receipt this Period  
115.38

**SUBTOTAL** of Receipts This Page (optional) ..... ► **314.09**

**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 35 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) John T. Jordano	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 37 St. Nickolas Way	<b>Transaction ID:</b> A2008-338131
	City State Zip Code Basking Ridge NJ 07920	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice President & Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Melissa J Kahn	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 1129 Halesworth Drive	<b>Transaction ID:</b> A2008-315924
	City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice-President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 249.99	

<b>C.</b>	Full Name (Last, First, Middle Initial) Melissa J Kahn	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 1129 Halesworth Drive	<b>Transaction ID:</b> A2008-338013
	City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice-President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 333.32	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	229.16
<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: PAGE 36 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Jennifer J Kalb

Mailing Address 110 St. Marks Avenue

City State Zip Code  
Brooklyn NY 11217

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.51

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316009

Amount of Each Receipt this Period  
104.17

**B.**

Full Name (Last, First, Middle Initial)  
Jennifer J Kalb

Mailing Address 110 St. Marks Avenue

City State Zip Code  
Brooklyn NY 11217

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.68

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338098

Amount of Each Receipt this Period  
104.17

**C.**

Full Name (Last, First, Middle Initial)  
Steven Kandarian

Mailing Address 25 Lenox Road

City State Zip Code  
Summit NJ 07901

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 624.99

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316333

Amount of Each Receipt this Period  
208.33

**SUBTOTAL** of Receipts This Page (optional) ..... ► **416.67**

**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: PAGE 37 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Steven Kandarian

Mailing Address 25 Lenox Road

City State Zip Code  
Summit NJ 07901

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338423

Amount of Each Receipt this Period  
208.33

**B.**

Full Name (Last, First, Middle Initial)  
Todd B Katz

Mailing Address 11 Graniks Way

City State Zip Code  
Suffern NY 10901

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-315985

Amount of Each Receipt this Period  
125.00

**C.**

Full Name (Last, First, Middle Initial)  
Todd B Katz

Mailing Address 11 Graniks Way

City State Zip Code  
Suffern NY 10901

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338074

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **458.33**

**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: PAGE 38 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Marcella Kelly

Mailing Address 2 Devonshire Ct

City State Zip Code  
Morris Township NJ 07960

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 288.45

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316171

Amount of Each Receipt this Period

96.15

**B.**

Full Name (Last, First, Middle Initial)  
Marcella Kelly

Mailing Address 2 Devonshire Ct

City State Zip Code  
Morris Township NJ 07960

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 384.60

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338261

Amount of Each Receipt this Period

96.15

**C.**

Full Name (Last, First, Middle Initial)  
John R Kershaw

Mailing Address 4 Peter Cooper Road

City State Zip Code  
New York NY 10010

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316209

Amount of Each Receipt this Period

75.00

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

267.30

**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: PAGE 39 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
John R Kershaw

Mailing Address 4 Peter Cooper Road

City State Zip Code  
New York NY 10010

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338299

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)  
Juliane Kowalski

Mailing Address 2770 Judith Drive

City State Zip Code  
Bellmore NY 11710

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.51

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316408

Amount of Each Receipt this Period  
104.17

**C.**

Full Name (Last, First, Middle Initial)  
Juliane Kowalski

Mailing Address 2770 Judith Drive

City State Zip Code  
Bellmore NY 11710

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.68

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338498

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional) ..... ► **283.34**

**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 40 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
John Kranefuss

Mailing Address 49 Longview Ave

City Madison State NJ Zip Code 07940

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

Name of Employer Metropolitan Life Insurance Co Occupation Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 29 / 2008

**Transaction ID: A2008-338584**

Amount of Each Receipt this Period 62.50

**B.** Full Name (Last, First, Middle Initial)  
Lisa Kuklinski

Mailing Address 370 First Avenue

City New York State NY Zip Code 10010

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

Name of Employer Metropolitan Life Insurance Co Occupation Vice-President & Actuary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 312.48

Date of Receipt 02 / 15 / 2008

**Transaction ID: A2008-316267**

Amount of Each Receipt this Period 104.16

**C.** Full Name (Last, First, Middle Initial)  
Lisa Kuklinski

Mailing Address 370 First Avenue

City New York State NY Zip Code 10010

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

Name of Employer Metropolitan Life Insurance Co Occupation Vice-President & Actuary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.64

Date of Receipt 02 / 29 / 2008

**Transaction ID: A2008-338357**

Amount of Each Receipt this Period 104.16

**SUBTOTAL** of Receipts This Page (optional) ..... ► 270.82

**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: PAGE 41 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Michael J Lacek

Mailing Address 6 Salem Road

City Wellesley State MA Zip Code 02481

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.99

Date of Receipt 02 / 15 / 2008  
**Transaction ID: A2008-316244**  
 Amount of Each Receipt this Period 83.33

**B.**

Full Name (Last, First, Middle Initial)  
Michael J Lacek

Mailing Address 6 Salem Road

City Wellesley State MA Zip Code 02481

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.32

Date of Receipt 02 / 29 / 2008  
**Transaction ID: A2008-338334**  
 Amount of Each Receipt this Period 83.33

**C.**

Full Name (Last, First, Middle Initial)  
Paul LaPiana

Mailing Address 18 Mikro

City Laguna Niguel State CA Zip Code 92677

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Director-Nat'l Sls Mgr-Life

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.48

Date of Receipt 02 / 15 / 2008  
**Transaction ID: A2008-316479**  
 Amount of Each Receipt this Period 104.16

**SUBTOTAL** of Receipts This Page (optional) ..... ► 270.82

**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: PAGE 42 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Paul LaPiana

Mailing Address 18 Mikro

City Laguna Niguel State CA Zip Code 92677

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Director-Nat'l Sls Mgr-Life

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.64

Date of Receipt 02 / 29 / 2008  
**Transaction ID: A2008-338569**  
Amount of Each Receipt this Period 104.16

**B.**

Full Name (Last, First, Middle Initial)  
Nicholas D. Latrenta

Mailing Address 11 Blue Sky Lane

City Montvale State NJ Zip Code 07645

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 02 / 15 / 2008  
**Transaction ID: A2008-316199**  
Amount of Each Receipt this Period 120.00

**C.**

Full Name (Last, First, Middle Initial)  
Nicholas D. Latrenta

Mailing Address 11 Blue Sky Lane

City Montvale State NJ Zip Code 07645

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 02 / 29 / 2008  
**Transaction ID: A2008-338289**  
Amount of Each Receipt this Period 120.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 344.16

**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: PAGE 43 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
James L Lipscomb

Mailing Address One Legend Court

City State Zip Code  
Purchase NY 10577

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 624.99

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316170

Amount of Each Receipt this Period  
208.33

**B.**

Full Name (Last, First, Middle Initial)  
James L Lipscomb

Mailing Address One Legend Court

City State Zip Code  
Purchase NY 10577

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338260

Amount of Each Receipt this Period  
208.33

**C.**

Full Name (Last, First, Middle Initial)  
Robert F Lundgren

Mailing Address 77 Holly Hill Lane

City State Zip Code  
Saunderstown RI 02874

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

Name of Employer Metropolitan Property & Casualty  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.48

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316107

Amount of Each Receipt this Period  
104.16

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **520.82**

**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: PAGE 44 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Robert F Lundgren

Mailing Address 77 Holly Hill Lane

City State Zip Code  
Saunderstown RI 02874

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

Name of Employer Metropolitan Property & Casualty  
Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 416.64

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338196

Amount of Each Receipt this Period

104.16

**B.**

Full Name (Last, First, Middle Initial)  
Barbara Lynch

Mailing Address 53 Fortin Drive

City State Zip Code  
Brooklyn CT 06234

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 249.99

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316327

Amount of Each Receipt this Period

83.33

**C.**

Full Name (Last, First, Middle Initial)  
Barbara Lynch

Mailing Address 53 Fortin Drive

City State Zip Code  
Brooklyn CT 06234

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 333.32

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338417

Amount of Each Receipt this Period

83.33

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

270.82

**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 45 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert R Lynch	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 531 East 20th Street Apt 1B	<b>Transaction ID:</b> A2008-316207
	City State Zip Code New York NY 10010	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Assistant Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 249.99	

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert R Lynch	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 531 East 20th Street Apt 1B	<b>Transaction ID:</b> A2008-338297
	City State Zip Code New York NY 10010	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Assistant Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 333.32	

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul Malchow	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 247 Holcombe Way	<b>Transaction ID:</b> A2008-316021
	City State Zip Code Lambertville NJ 08530	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 249.99	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	249.99
<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 46 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul Malchow	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 247 Holcombe Way	<b>Transaction ID:</b> A2008-338110
	City State Zip Code Lambertville NJ 08530	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 333.32	

<b>B.</b>	Full Name (Last, First, Middle Initial) Karen L Manning	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 115 Adirondack Drive	<b>Transaction ID:</b> A2008-316143
	City State Zip Code East Greenwich RI 02818	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice-President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 249.99	

<b>C.</b>	Full Name (Last, First, Middle Initial) Karen L Manning	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 115 Adirondack Drive	<b>Transaction ID:</b> A2008-338233
	City State Zip Code East Greenwich RI 02818	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice-President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 333.32	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	249.99
<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: PAGE 47 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Eugene Marks

Mailing Address 1614 Bronson Road

City State Zip Code  
Fairfield CT 06430

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316353

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Eugene Marks

Mailing Address 1614 Bronson Road

City State Zip Code  
Fairfield CT 06430

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338443

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard Marx

Mailing Address 4910 East Longboat Blvd

City State Zip Code  
Tampa FL 33615

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.74

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316493

Amount of Each Receipt this Period  
84.58

**SUBTOTAL** of Receipts This Page (optional) ..... ► **284.58**

**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: PAGE 48 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Richard Marx

Mailing Address 4910 East Longboat Blvd

City State Zip Code  
Tampa FL 33615

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 338.32

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338583

Amount of Each Receipt this Period

84.58

**B.**

Full Name (Last, First, Middle Initial)  
John McCallion

Mailing Address 63 N. Sunnycrest Drive

City State Zip Code  
Little Silver NJ 07739

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 312.51

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316536

Amount of Each Receipt this Period

104.17

**C.**

Full Name (Last, First, Middle Initial)  
John McCallion

Mailing Address 63 N. Sunnycrest Drive

City State Zip Code  
Little Silver NJ 07739

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 416.68

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338625

Amount of Each Receipt this Period

104.17

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

292.92

**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: PAGE 49 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Curt D McMillen  
 Mailing Address 500 East 77th Street #537  
 City State Zip Code  
 New York NY 10162  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 2 9 / 2 0 0 8  
**Transaction ID:** A2008-338094  
 Amount of Each Receipt this Period  
 56.25  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Metropolitan Life Insurance Co  
 Occupation Director-Sales Support  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

**B.** Full Name (Last, First, Middle Initial)  
Robert R Merck  
 Mailing Address 12 Howell Dr  
 City State Zip Code  
 Far Hills NJ 07931  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 1 5 / 2 0 0 8  
**Transaction ID:** A2008-316065  
 Amount of Each Receipt this Period  
 125.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Metropolitan Life Insurance Co  
 Occupation Managing Director-Real Estate  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

**C.** Full Name (Last, First, Middle Initial)  
Robert R Merck  
 Mailing Address 12 Howell Dr  
 City State Zip Code  
 Far Hills NJ 07931  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 2 9 / 2 0 0 8  
**Transaction ID:** A2008-338154  
 Amount of Each Receipt this Period  
 125.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Metropolitan Life Insurance Co  
 Occupation Managing Director-Real Estate  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **306.25**  
**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 50 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul H Michael	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 1105 Hidden Meadow Road	<b>Transaction ID:</b> A2008-316150
	City State Zip Code McKinney TX 75070	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Paul H Michael	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 1105 Hidden Meadow Road	<b>Transaction ID:</b> A2008-338240
	City State Zip Code McKinney TX 75070	Amount of Each Receipt this Period 70.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Charles Miller	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 61 Nicole Drive	<b>Transaction ID:</b> A2008-338201
	City State Zip Code Denville NJ 07834	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Vice President & Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	202.50
<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: PAGE 51 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
William D Moore

Mailing Address 4 Longfellow Place

City State Zip Code  
Boston MA 02114

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

Name of Employer Metropolitan Property & Casualty  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 624.99

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316142

Amount of Each Receipt this Period  
208.33

**B.**

Full Name (Last, First, Middle Initial)  
William D Moore

Mailing Address 4 Longfellow Place

City State Zip Code  
Boston MA 02114

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

Name of Employer Metropolitan Property & Casualty  
Occupation Senior Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338232

Amount of Each Receipt this Period  
208.33

**C.**

Full Name (Last, First, Middle Initial)  
Janet M Morgan

Mailing Address #8 Pequa Lane

City State Zip Code  
Commack NY 11725

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.99

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316252

Amount of Each Receipt this Period  
83.33

**SUBTOTAL** of Receipts This Page (optional) ..... ► 499.99

**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: PAGE 52 / 95  
(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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Janet M Morgan

Mailing Address #8 Pequa Lane

City State Zip Code  
Commack NY 11725

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.32

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	9	/	2	0	0	8

**Transaction ID:** A2008-338342

Amount of Each Receipt this Period  
83.33

**B.** Full Name (Last, First, Middle Initial)  
Barry G. Morphis

Mailing Address 50 Fox Run

City State Zip Code  
East Greenwich RI 02818

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

Name of Employer Metropolitan Property & Casualty  
Occupation Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
248.20

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	9	/	2	0	0	8

**Transaction ID:** A2008-338239

Amount of Each Receipt this Period  
62.05

**C.** Full Name (Last, First, Middle Initial)  
Maria R Morris

Mailing Address 726 Standish Avenue

City State Zip Code  
Westfield NJ 07090

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
624.99

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	8

**Transaction ID:** A2008-316085

Amount of Each Receipt this Period  
208.33

**SUBTOTAL** of Receipts This Page (optional) ..... ► **353.71**

**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 53 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Maria R Morris		Date of Receipt
	Mailing Address 726 Standish Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Westfield	NJ	07090
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A2008-338174
Name of Employer Metropolitan Life Insurance Co		Occupation Executive Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 833.32	208.33

<b>B.</b>	Full Name (Last, First, Middle Initial) Daniel Mule		Date of Receipt
	Mailing Address 3844 Dianne Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Bethpage	NY	11714
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A2008-316435
Name of Employer Metropolitan Life Insurance Co		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.99	83.33

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel Mule		Date of Receipt
	Mailing Address 3844 Dianne Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Bethpage	NY	11714
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A2008-338525
Name of Employer Metropolitan Life Insurance Co		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.32	83.33

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	374.99
<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 54 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) William J. Mullaney	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 14 Roc Etam Road	<b>Transaction ID:</b> A2008-316066
	City State Zip Code Randolph NJ 07869	Amount of Each Receipt this Period 208.33
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Metropolitan Life Insurance Co	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.99	

<b>B.</b>	Full Name (Last, First, Middle Initial) William J. Mullaney	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 14 Roc Etam Road	<b>Transaction ID:</b> A2008-338155
	City State Zip Code Randolph NJ 07869	Amount of Each Receipt this Period 208.33
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Metropolitan Life Insurance Co	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.32	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kieran Mullins	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 1 Madison Avenue	<b>Transaction ID:</b> A2008-316552
	City State Zip Code New York NY 10010	Amount of Each Receipt this Period 95.83
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Metlife Bank National Assoc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.49	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>512.49</b>
<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: PAGE 55 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Kieran Mullins

Mailing Address 1 Madison Avenue

City State Zip Code  
New York NY 10010

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

Name of Employer  
Metlife Bank National Ass-  
oc.

Occupation  
Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
383.32

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338641

Amount of Each Receipt this Period

95.83

**B.**

Full Name (Last, First, Middle Initial)  
Conor Murphy

Mailing Address 103 Corona Ave

City State Zip Code  
Pelham NY 10803

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

Name of Employer  
Metropolitan Life Insuran-  
ce Co

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
287.49

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316461

Amount of Each Receipt this Period

95.83

**C.**

Full Name (Last, First, Middle Initial)  
Conor Murphy

Mailing Address 103 Corona Ave

City State Zip Code  
Pelham NY 10803

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

Name of Employer  
Metropolitan Life Insuran-  
ce Co

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
383.32

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338551

Amount of Each Receipt this Period

95.83

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

287.49

**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: PAGE 56 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Gaetan Nicolas  
Mailing Address 77 Raffaele Dr.  
City Waltham State MA Zip Code 02452  
FEC ID number of contributing federal political committee. **C**

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008  
Transaction ID: A2008-316151  
Amount of Each Receipt this Period  
104.16

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary  
Receipt For:  
 Primary    General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
312.48

**B.** Full Name (Last, First, Middle Initial)  
Gaetan Nicolas  
Mailing Address 77 Raffaele Dr.  
City Waltham State MA Zip Code 02452  
FEC ID number of contributing federal political committee. **C**

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008  
Transaction ID: A2008-338241  
Amount of Each Receipt this Period  
104.16

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary  
Receipt For:  
 Primary    General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
416.64

**C.** Full Name (Last, First, Middle Initial)  
Anthony J Nugent  
Mailing Address 2515 Brickfield Court  
City Thousand Oaks State CA Zip Code 91362  
FEC ID number of contributing federal political committee. **C**

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008  
Transaction ID: A2008-316102  
Amount of Each Receipt this Period  
125.00

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice-President  
Receipt For:  
 Primary    General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
375.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **333.32**

**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: PAGE 57 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Anthony J Nugent  
 Mailing Address 2515 Brickfield Court  
 City State Zip Code  
 Thousand Oaks CA 91362  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 9 / 2 0 0 8  
**Transaction ID:** A2008-338191  
 Amount of Each Receipt this Period  
 125.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Metropolitan Life Insurance Co  
 Occupation Senior Vice-President  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
Charles Odell  
 Mailing Address 300 East 64th Street Apt 10D  
 City State Zip Code  
 New York NY 10021  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 9 / 2 0 0 8  
**Transaction ID:** A2008-338610  
 Amount of Each Receipt this Period  
 62.50  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Metropolitan Life Insurance Co  
 Occupation Vice President  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
David W Parsons  
 Mailing Address Seven Peter Cooper Rd # 10G  
 City State Zip Code  
 New York NY 10010  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 9 / 2 0 0 8  
**Transaction ID:** A2008-338124  
 Amount of Each Receipt this Period  
 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Metropolitan Life Insurance Co  
 Occupation Vice President  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 204.17

**SUBTOTAL** of Receipts This Page (optional) ..... ► **237.50**  
**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 58 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Peter Pastre		Date of Receipt	
	Mailing Address 2347 N Oakland St		M M / D D / Y Y Y Y 02 / 15 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-316238
	Arlington	VA	22207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		83.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.99		

<b>B.</b>	Full Name (Last, First, Middle Initial) Peter Pastre		Date of Receipt	
	Mailing Address 2347 N Oakland St		M M / D D / Y Y Y Y 02 / 29 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-338328
	Arlington	VA	22207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		83.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.32		

<b>C.</b>	Full Name (Last, First, Middle Initial) James R Petrosini		Date of Receipt	
	Mailing Address 23 Appletree Road		M M / D D / Y Y Y Y 02 / 15 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-316017
	Flemington	NJ	08822	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		104.16	
Name of Employer Metropolitan Life Insurance Co		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.48		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>270.82</b>
<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 59 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) James R Petrosini		Date of Receipt
	Mailing Address 23 Appletree Road		<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Flemington	NJ	08822
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A2008-338106
Name of Employer Metropolitan Life Insurance Co		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.64	<input type="text" value="104.16"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Georgette A Piligian		Date of Receipt
	Mailing Address 9 Landing Lane		<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	West Islip	NY	11795
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A2008-315978
Name of Employer Metropolitan Life Insurance Co		Occupation Senior Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	<input type="text" value="125.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Georgette A Piligian		Date of Receipt
	Mailing Address 9 Landing Lane		<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	West Islip	NY	11795
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: A2008-338067
Name of Employer Metropolitan Life Insurance Co		Occupation Senior Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text" value="125.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="354.16"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 60 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Timothy Plesko		Date of Receipt	
	Mailing Address 4 Clearview Drive		M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-315910
	Summit	NJ	07901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		83.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.99		

<b>B.</b>	Full Name (Last, First, Middle Initial) Timothy Plesko		Date of Receipt	
	Mailing Address 4 Clearview Drive		M M / D D / Y Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-337999
	Summit	NJ	07901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		83.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.32		

<b>C.</b>	Full Name (Last, First, Middle Initial) Louis J Ragusa		Date of Receipt	
	Mailing Address 10 Jason Court		M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-316084
	Dix Hills	NY	11746	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		208.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 624.99		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>374.99</b>
<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: PAGE 61 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Louis J Ragusa

Mailing Address 10 Jason Court

City Dix Hills State NY Zip Code 11746

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt 02 / 29 / 2008  
**Transaction ID: A2008-338173**  
Amount of Each Receipt this Period 208.33

**B.**

Full Name (Last, First, Middle Initial)  
Douglas A Rayvid

Mailing Address 10 Morningside Court

City Short Hills State NJ Zip Code 07078

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.76

Date of Receipt 02 / 29 / 2008  
**Transaction ID: A2008-338345**  
Amount of Each Receipt this Period 57.69

**C.**

Full Name (Last, First, Middle Initial)  
Leonard Reback

Mailing Address 385 N. Wyoming Ave.

City South Orange State NJ Zip Code 07079

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President & Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.25

Date of Receipt 02 / 15 / 2008  
**Transaction ID: A2008-316395**  
Amount of Each Receipt this Period 73.75

**SUBTOTAL** of Receipts This Page (optional) ..... ► **339.77**

**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: PAGE 62 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Leonard Reback

Mailing Address 385 N. Wyoming Ave.

City State Zip Code  
South Orange NJ 07079

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President & Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338485

Amount of Each Receipt this Period  
73.75

**B.**

Full Name (Last, First, Middle Initial)  
Ann M Reed

Mailing Address 16 W. 16th Street Apt 8m

City State Zip Code  
New York NY 10011

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.76

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-315992

Amount of Each Receipt this Period  
76.92

**C.**

Full Name (Last, First, Middle Initial)  
Ann M Reed

Mailing Address 16 W. 16th Street Apt 8m

City State Zip Code  
New York NY 10011

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 307.68

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338081

Amount of Each Receipt this Period  
76.92

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **227.59**

**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: PAGE 63 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Catherine A. Rein

Mailing Address 21 East 22nd St Apt 8B

City State Zip Code  
New York NY 10010

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

Name of Employer Metropolitan Property & Casualty  
Occupation Senior Executive

Receipt For:  Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 624.99

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316088

Amount of Each Receipt this Period

208.33

**B.**

Full Name (Last, First, Middle Initial)  
Catherine A. Rein

Mailing Address 21 East 22nd St Apt 8B

City State Zip Code  
New York NY 10010

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

Name of Employer Metropolitan Property & Casualty  
Occupation Senior Executive

Receipt For:  Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 833.32

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338177

Amount of Each Receipt this Period

208.33

**C.**

Full Name (Last, First, Middle Initial)  
William Rhatigan

Mailing Address 4 Kenwood Lane

City State Zip Code  
Matawan NJ 07747

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338265

Amount of Each Receipt this Period

62.50

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

479.16

**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 64 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Bradley D Rhoads	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 25 Oak Drive	<b>Transaction ID:</b> A2008-316257
	City State Zip Code Chatham NJ 07928	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Metropolitan Life Insurance Co	Occupation Managing Director-FII/PMU	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bradley D Rhoads	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 25 Oak Drive	<b>Transaction ID:</b> A2008-338347
	City State Zip Code Chatham NJ 07928	Amount of Each Receipt this Period 83.33
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Metropolitan Life Insurance Co	Occupation Managing Director-FII/PMU	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.32	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kurt Riedener	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 21 Fern Road	<b>Transaction ID:</b> A2008-316290
	City State Zip Code Sparta NJ 07871	Amount of Each Receipt this Period 104.16
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Metropolitan Life Insurance Co	Occupation Vice-President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.48	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>270.82</b>
<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: PAGE 65 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Kurt Riedener

Mailing Address 21 Fern Road

City State Zip Code  
Sparta NJ 07871

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.64

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338380

Amount of Each Receipt this Period  
104.16

**B.**

Full Name (Last, First, Middle Initial)  
Douglas Roach

Mailing Address 69A Morris Av

City State Zip Code  
Summit NJ 07901

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338614

Amount of Each Receipt this Period  
56.25

**C.**

Full Name (Last, First, Middle Initial)  
Michael F Rogalski

Mailing Address 19 Southhall Court

City State Zip Code  
Wayne NJ 07470

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316129

Amount of Each Receipt this Period  
83.33

**SUBTOTAL** of Receipts This Page (optional) ..... ► **243.74**

**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: PAGE 66 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Michael F Rogalski

Mailing Address 19 Southhall Court

City State Zip Code  
Wayne NJ 07470

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 333.32

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338218

Amount of Each Receipt this Period

83.33

**B.**

Full Name (Last, First, Middle Initial)  
Teresa Roseborough

Mailing Address 1356 High Falls Court SW

City State Zip Code  
Atlanta GA 30311

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 431.25

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316528

Amount of Each Receipt this Period

143.75

**C.**

Full Name (Last, First, Middle Initial)  
Teresa Roseborough

Mailing Address 1356 High Falls Court SW

City State Zip Code  
Atlanta GA 30311

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Chief Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 575.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338617

Amount of Each Receipt this Period

143.75

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

370.83

**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: PAGE 67 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Jonathan L Rosenthal

Mailing Address 210 Woods End Drive

City State Zip Code  
Basking Ridge NJ 07920

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Managing Director-FII/PMU

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 304.68

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316074

Amount of Each Receipt this Period  
101.56

**B.**

Full Name (Last, First, Middle Initial)  
Jonathan L Rosenthal

Mailing Address 210 Woods End Drive

City State Zip Code  
Basking Ridge NJ 07920

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Managing Director-FII/PMU

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 406.24

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338163

Amount of Each Receipt this Period  
101.56

**C.**

Full Name (Last, First, Middle Initial)  
David W Rupper

Mailing Address 211 Tall Timber Drive

City State Zip Code  
Johnstown PA 15904

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 228.32

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-337991

Amount of Each Receipt this Period  
57.08

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

260.20

**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: PAGE 68 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Alexander G Scheitlin  
Mailing Address 125 E 72 Street  
City State Zip Code  
New York NY 10021  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President & Actuary  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 288.45  
Date of Receipt 02 / 15 / 2008  
Transaction ID: A2008-316178  
Amount of Each Receipt this Period 96.15

**B.** Full Name (Last, First, Middle Initial)  
Alexander G Scheitlin  
Mailing Address 125 E 72 Street  
City State Zip Code  
New York NY 10021  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President & Actuary  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 384.60  
Date of Receipt 02 / 29 / 2008  
Transaction ID: A2008-338268  
Amount of Each Receipt this Period 96.15

**C.** Full Name (Last, First, Middle Initial)  
Timothy Schmidt  
Mailing Address 12 Spring Lake Drive  
City State Zip Code  
Far Hills NJ 07931  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 375.00  
Date of Receipt 02 / 15 / 2008  
Transaction ID: A2008-315898  
Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 317.30  
**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: PAGE 69 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Timothy Schmidt

Mailing Address 12 Spring Lake Drive

City State Zip Code  
Far Hills NJ 07931

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-337987

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)  
Kathleen J. Schoos

Mailing Address 54 Traymore Street

City State Zip Code  
Cranston RI 02920

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338246

Amount of Each Receipt this Period

62.50

**C.**

Full Name (Last, First, Middle Initial)  
Michael H Schwartz

Mailing Address 36 Yarmouth Drive

City State Zip Code  
New Providence NJ 07974

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
312.51

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316013

Amount of Each Receipt this Period

104.17

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

291.67

**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: PAGE 70 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Michael H Schwartz

Mailing Address 36 Yarmouth Drive

City State Zip Code  
New Providence NJ 07974

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 416.68

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338102

Amount of Each Receipt this Period  
104.17

**B.**

Full Name (Last, First, Middle Initial)  
Peter M Schwarz

Mailing Address 8 Meadowlark Court

City State Zip Code  
Oakland NJ 07436

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 288.45

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316200

Amount of Each Receipt this Period  
96.15

**C.**

Full Name (Last, First, Middle Initial)  
Peter M Schwarz

Mailing Address 8 Meadowlark Court

City State Zip Code  
Oakland NJ 07436

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 384.60

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338290

Amount of Each Receipt this Period  
96.15

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

296.47

**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: PAGE 71 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Sachin N. Shah

Mailing Address 4 Dutch Lane

City State Zip Code  
Scotch Plains NJ 07076

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
312.51

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-315947

Amount of Each Receipt this Period  
104.17

**B.**

Full Name (Last, First, Middle Initial)  
Sachin N. Shah

Mailing Address 4 Dutch Lane

City State Zip Code  
Scotch Plains NJ 07076

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.68

Date of Receipt  
MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338036

Amount of Each Receipt this Period  
104.17

**C.**

Full Name (Last, First, Middle Initial)  
Steven Sheinheit

Mailing Address 20 Sunbeam Road

City State Zip Code  
Syosset NY 11791

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
624.99

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-315922

Amount of Each Receipt this Period  
208.33

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **416.67**

**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: PAGE 72 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Steven Sheinheit

Mailing Address 20 Sunbeam Road

City State Zip Code  
Syosset NY 11791

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 9 / 2 0 0 8

**Transaction ID:** A2008-338011

Amount of Each Receipt this Period  
208.33

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey K Smith

Mailing Address 2020 Nancy Blvd

City State Zip Code  
Merrick NY 11566

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 268.74

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 1 5 / 2 0 0 8

**Transaction ID:** A2008-316036

Amount of Each Receipt this Period  
89.58

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey K Smith

Mailing Address 2020 Nancy Blvd

City State Zip Code  
Merrick NY 11566

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 358.32

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 9 / 2 0 0 8

**Transaction ID:** A2008-338125

Amount of Each Receipt this Period  
89.58

**SUBTOTAL** of Receipts This Page (optional) ..... ► **387.49**

**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 73 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert E Sollmann	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 351 Nod Hill Road	<b>Transaction ID:</b> A2008-338258
	City State Zip Code Wilton CT 06897	Amount of Each Receipt this Period 62.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Eric T Steigerwalt	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 160 Fox Chase Rd.	<b>Transaction ID:</b> A2008-316025
	City State Zip Code Chester NJ 07930	Amount of Each Receipt this Period 115.38
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 346.14	

<b>C.</b>	Full Name (Last, First, Middle Initial) Eric T Steigerwalt	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 160 Fox Chase Rd.	<b>Transaction ID:</b> A2008-338114
	City State Zip Code Chester NJ 07930	Amount of Each Receipt this Period 115.38
	FEC ID number of contributing federal political committee. C	
	Name of Employer Metropolitan Life Insurance Co Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 461.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	293.26
<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: PAGE 74 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey I Stoll		Date of Receipt MM / DD / YYYY 02 / 15 / 2008		
	Mailing Address 52 Canterbury Rd		<b>Transaction ID:</b> A2008-315923		
	City Chatham	State NJ	Zip Code 07928	Amount of Each Receipt this Period 76.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Senior Vice President	Aggregate Year-to-Date 230.76		

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffrey I Stoll		Date of Receipt MM / DD / YYYY 02 / 29 / 2008		
	Mailing Address 52 Canterbury Rd		<b>Transaction ID:</b> A2008-338012		
	City Chatham	State NJ	Zip Code 07928	Amount of Each Receipt this Period 76.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Senior Vice President	Aggregate Year-to-Date 307.68		

<b>C.</b>	Full Name (Last, First, Middle Initial) Joanne Strakosch		Date of Receipt MM / DD / YYYY 02 / 15 / 2008		
	Mailing Address 2200 Newton Avenue South		<b>Transaction ID:</b> A2008-316378		
	City Minneapolis	State MN	Zip Code 55405	Amount of Each Receipt this Period 83.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation National Marketing Director	Aggregate Year-to-Date 249.99		

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

237.17

**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: PAGE 75 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Joanne Strakosch		Date of Receipt MM / DD / YYYY 02 / 29 / 2008		
	Mailing Address 2200 Newton Avenue South		<b>Transaction ID:</b> A2008-338468		
	City Minneapolis	State MN	Zip Code 55405	Amount of Each Receipt this Period 83.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation National Marketing Director	Aggregate Year-to-Date 333.32		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Randall A Stram		Date of Receipt MM / DD / YYYY 02 / 15 / 2008		
	Mailing Address 117 Chatham St.		<b>Transaction ID:</b> A2008-316137		
	City Chatham	State NJ	Zip Code 07928	Amount of Each Receipt this Period 83.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Vice-President	Aggregate Year-to-Date 249.99		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Randall A Stram		Date of Receipt MM / DD / YYYY 02 / 29 / 2008		
	Mailing Address 117 Chatham St.		<b>Transaction ID:</b> A2008-338226		
	City Chatham	State NJ	Zip Code 07928	Amount of Each Receipt this Period 83.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Metropolitan Life Insurance Co	Occupation Vice-President	Aggregate Year-to-Date 333.32		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

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

249.99

**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 76 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Donald Swanson	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 214 S B Rees Rd	<b>Transaction ID:</b> A2008-316481
	City State Zip Code Kerrville TX 78028	Amount of Each Receipt this Period 104.17
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Metropolitan Life Insurance Co Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 312.51	

<b>B.</b>	Full Name (Last, First, Middle Initial) Donald Swanson	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 214 S B Rees Rd	<b>Transaction ID:</b> A2008-338571
	City State Zip Code Kerrville TX 78028	Amount of Each Receipt this Period 104.17
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Metropolitan Life Insurance Co Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.68	

<b>C.</b>	Full Name (Last, First, Middle Initial) Stanley J. Talbi	Date of Receipt MM / DD / YYYY 02 / 15 / 2008
	Mailing Address 527 Sayre Drive	<b>Transaction ID:</b> A2008-316187
	City State Zip Code Princeton NJ 08540	Amount of Each Receipt this Period 166.66
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Metropolitan Life Insurance Co Occupation Executive Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 499.98	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<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: PAGE 77 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Stanley J. Talbi

Mailing Address 527 Sayre Drive

City State Zip Code  
Princeton NJ 08540

FEC ID number of contributing federal political committee. C

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 666.64

Date of Receipt MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338277

Amount of Each Receipt this Period 166.66

**B.** Full Name (Last, First, Middle Initial)  
Kevin M Thorwarth

Mailing Address 19 Spring Lake Drive

City State Zip Code  
Far Hills NJ 07931

FEC ID number of contributing federal political committee. C

Name of Employer Metropolitan Life Insurance Co  
Occupation Director-Real Estate

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.99

Date of Receipt MM / DD / YYYY  
02 / 15 / 2008

**Transaction ID:** A2008-316254

Amount of Each Receipt this Period 83.33

**C.** Full Name (Last, First, Middle Initial)  
Kevin M Thorwarth

Mailing Address 19 Spring Lake Drive

City State Zip Code  
Far Hills NJ 07931

FEC ID number of contributing federal political committee. C

Name of Employer Metropolitan Life Insurance Co  
Occupation Director-Real Estate

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.32

Date of Receipt MM / DD / YYYY  
02 / 29 / 2008

**Transaction ID:** A2008-338344

Amount of Each Receipt this Period 83.33

**SUBTOTAL** of Receipts This Page (optional) ..... 333.32

**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: PAGE 78 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. William Toppeta</p> <p>Mailing Address 158 East 66th Street</p> <p>City State Zip Code New York NY 10021</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Metropolitan Life Insurance Co      Occupation President International</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">624.99</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 1 5 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A2008-316183</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">208.33</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. William Toppeta</p> <p>Mailing Address 158 East 66th Street</p> <p>City State Zip Code New York NY 10021</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Metropolitan Life Insurance Co      Occupation President International</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">833.32</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 2 9 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A2008-338273</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">208.33</span></p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) John R Tremmel</p> <p>Mailing Address 834 Hawk Run Trail</p> <p>City State Zip Code O'Fallon MO 63368</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Metropolitan Life Insurance Co      Occupation Vice-President</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">312.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 1 5 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> A2008-315944</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">104.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">520.66</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**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 79 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
John R Tremmel

Mailing Address 834 Hawk Run Trail

City O'Fallon State MO Zip Code 63368

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

Name of Employer Metropolitan Life Insurance Co Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt 02 / 29 / 2008

Transaction ID: A2008-338033

Amount of Each Receipt this Period 104.00

**B.** Full Name (Last, First, Middle Initial)  
Joseph Trovato

Mailing Address 3 Hyatt Lane

City Somers State NY Zip Code 10589

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

Name of Employer Metropolitan Life Insurance Co Occupation Sr Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.76

Date of Receipt 02 / 15 / 2008

Transaction ID: A2008-316070

Amount of Each Receipt this Period 76.92

**C.** Full Name (Last, First, Middle Initial)  
Joseph Trovato

Mailing Address 3 Hyatt Lane

City Somers State NY Zip Code 10589

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

Name of Employer Metropolitan Life Insurance Co Occupation Sr Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 307.68

Date of Receipt 02 / 29 / 2008

Transaction ID: A2008-338159

Amount of Each Receipt this Period 76.92

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 257.84

**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: PAGE 80 / 95  
(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Michael C Walsh

Mailing Address 60 Arrowhead Way

City Warwick State RI Zip Code 02886

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

Name of Employer Metropolitan Property & Casualty Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 29 / 2008  
**Transaction ID: A2008-338230**  
 Amount of Each Receipt this Period 62.50

**B.** Full Name (Last, First, Middle Initial)  
Sharon E. Waters

Mailing Address 15 Suffolk Lane

City Princeton Junction State NJ Zip Code 08550

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

Name of Employer Metropolitan Life Insurance Co Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.51

Date of Receipt 02 / 15 / 2008  
**Transaction ID: A2008-316069**  
 Amount of Each Receipt this Period 104.17

**C.** Full Name (Last, First, Middle Initial)  
Sharon E. Waters

Mailing Address 15 Suffolk Lane

City Princeton Junction State NJ Zip Code 08550

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

Name of Employer Metropolitan Life Insurance Co Occupation Vice-President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.68

Date of Receipt 02 / 29 / 2008  
**Transaction ID: A2008-338158**  
 Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional) ..... ► 270.84

**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: PAGE 81 / 95  
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial) Lisa M Weber		Date of Receipt MM / DD / YYYY 02 / 15 / 2008
Mailing Address 196 Anderson Avenue		<b>Transaction ID:</b> A2008-316022
City Closter	State NJ	Zip Code 07624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
Name of Employer Metropolitan Life Insurance Co	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.99	

**B.**

Full Name (Last, First, Middle Initial) Lisa M Weber		Date of Receipt MM / DD / YYYY 02 / 29 / 2008
Mailing Address 196 Anderson Avenue		<b>Transaction ID:</b> A2008-338111
City Closter	State NJ	Zip Code 07624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
Name of Employer Metropolitan Life Insurance Co	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.32	

**C.**

Full Name (Last, First, Middle Initial) Matthew K Wessel		Date of Receipt MM / DD / YYYY 02 / 15 / 2008
Mailing Address 322 Goldfinch Drive		<b>Transaction ID:</b> A2008-316121
City Bridgewater	State NJ	Zip Code 08807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 74.17
Name of Employer Metropolitan Life Insurance Co	Occupation Vice-President & Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.51	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	490.83
<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: PAGE 82 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)  
Matthew K Wessel

Mailing Address 322 Goldfinch Drive

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 296.68

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338210

Amount of Each Receipt this Period  
74.17

**B.**

Full Name (Last, First, Middle Initial)  
William J Wheeler

Mailing Address 147 Brite Avenue

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 624.99

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-316282

Amount of Each Receipt this Period  
208.33

**C.**

Full Name (Last, First, Middle Initial)  
William J Wheeler

Mailing Address 147 Brite Avenue

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 833.32

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: A2008-338372

Amount of Each Receipt this Period  
208.33

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

490.83

**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: PAGE 83 / 95

(check only one)

<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.**

Full Name (Last, First, Middle Initial)

Albert G Woodring

Mailing Address 1370 Timberlake Manor Parkway

City State Zip Code  
Chesterfield MO 63017

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

Name of Employer Occupation  
RGA Reinsurance Company Pres. And CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 415.38

Date of Receipt

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

Transaction ID: A2008-315893

Amount of Each Receipt this Period

138.46

**B.**

Full Name (Last, First, Middle Initial)

Albert G Woodring

Mailing Address 1370 Timberlake Manor Parkway

City State Zip Code  
Chesterfield MO 63017

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

Name of Employer Occupation  
RGA Reinsurance Company Pres. And CEO

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 553.84

Date of Receipt

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

Transaction ID: A2008-337982

Amount of Each Receipt this Period

138.46

**C.**

Full Name (Last, First, Middle Initial)

Steven R Worley

Mailing Address P. O. Box 767

City State Zip Code  
Waco TX 76703

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

Name of Employer Occupation  
Metropolitan Life Insurance Co Vice-President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.76

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 8

Transaction ID: A2008-315900

Amount of Each Receipt this Period

76.92

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

353.84

**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 84 / 95
	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Steven R Worley		Date of Receipt	
	Mailing Address P. O. Box 767		M M / D D / Y Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-337989
	Waco	TX	76703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		76.92	
Name of Employer Metropolitan Life Insurance Co		Occupation Vice-President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 307.68		

<b>B.</b>	Full Name (Last, First, Middle Initial) David Yu		Date of Receipt	
	Mailing Address 54 Dyckman Place		M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-316529
	Basking Ridge	NJ	07920	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		83.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Director - Distressed Investme		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.99		

<b>C.</b>	Full Name (Last, First, Middle Initial) David Yu		Date of Receipt	
	Mailing Address 54 Dyckman Place		M M / D D / Y Y Y Y Y 0 2 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> A2008-338618
	Basking Ridge	NJ	07920	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		83.33	
Name of Employer Metropolitan Life Insurance Co		Occupation Director - Distressed Investme		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.32		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	243.58
<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: PAGE 85 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
Marian J Zeldin

Mailing Address 23 Solomon Drive

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.45

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 1 5 / 2 0 0 8

**Transaction ID:** A2008-316054

Amount of Each Receipt this Period  
96.15

**B.** Full Name (Last, First, Middle Initial)  
Marian J Zeldin

Mailing Address 23 Solomon Drive

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.60

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 2 9 / 2 0 0 8

**Transaction ID:** A2008-338143

Amount of Each Receipt this Period  
96.15

**C.** Full Name (Last, First, Middle Initial)  
Shihao Zhuo

Mailing Address Floor 12 Tower E2 Beijing Oriental

City State Zip Code  
Beijing ZZ 10073-8

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

Name of Employer Metropolitan Life Insurance Co  
Occupation Vice-President & Actuary

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.99

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 2 / 1 5 / 2 0 0 8

**Transaction ID:** A2008-316003

Amount of Each Receipt this Period  
83.33

**SUBTOTAL** of Receipts This Page (optional) ..... ► **275.63**

**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:		PAGE 86 / 95	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Shihao Zhuo		Date of Receipt		
	Mailing Address Floor 12 Tower E2 Beijing Oriental		M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8		
	City Beijing	State ZZ	Zip Code 10073-8	<b>Transaction ID:</b> A2008-338092	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 83.33		
	Name of Employer Metropolitan Life Insurance Co	Occupation Vice-President & Actuary			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.32			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	83.33
<b>TOTAL</b> This Period (last page this line number only) .....	26216.87

**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)

PAGE 87 / 95

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
MetLife Inc. Employees Pol. Participation Fund A

A.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: B208371
	Mailing Address 430 S Capitol Street SE	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 15000.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) American Council of Life Insurers PAC - ACLI PAC	Transaction ID: B208379
	Mailing Address 101 Constitution Ave NW Suite 700	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) Together For Our Majority PAC (TOMPAC)	Transaction ID: B208359
	Mailing Address 1726 M Street NW Suite 701	Date of Disbursement MM / DD / YYYY 02 / 07 / 2008
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	21500.00
<b>TOTAL</b> 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)

PAGE 88 / 95

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
MetLife Inc. Employees Pol. Participation Fund A

**A.** Full Name (Last, First, Middle Initial)  
National Republican Congressional Committee

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: US District:

Not Applicable

Transaction ID: B208372

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

15000.00

**B.** Full Name (Last, First, Middle Initial)  
American Benefits Council PAC

Mailing Address 1212 New York Ave NW Suite 1250

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: US District:

Not Applicable

Transaction ID: B208373

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
Democratic Senatorial Campaign Committee

Mailing Address 120 Maryland Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: US District:

Not Applicable

Transaction ID: B208368

Date of Disbursement

02 / 07 / 2008

Amount of Each Disbursement this Period

15000.00

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

35000.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b> Full Name (Last, First, Middle Initial) Republican Main Street Partnership PAC Mailing Address 1120 L Street NW Suite 100-263 City Washington State DC Zip Code 20005 Purpose of Disbursement Contribution Candidate Name	Transaction ID: B208366 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 5000.00

<b>B.</b> Full Name (Last, First, Middle Initial) National Republican Senatorial Committee Mailing Address 425 Second Street NE City Washington State DC Zip Code 20002 Purpose of Disbursement Contribution Candidate Name	Transaction ID: B208370 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 15000.00

<b>C.</b> Full Name (Last, First, Middle Initial) Alexander for Senate 2008 Mailing Address 101 Constitution Ave NW Suite 800 City Washington State DC Zip Code 20001 Purpose of Disbursement Contribution Candidate Name Lamar Alexander	Transaction ID: B208335 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 1500.00

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

21500.00

**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)

PAGE 90 / 95

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Roy Blunt</p> <p>Mailing Address 209 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Roy Blunt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B208325</p> <p>Date of Disbursement MM / DD / YYYY 02 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Cantor for Congress</p> <p>Mailing Address PO Box 21027</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Eric I Cantor</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B208344</p> <p>Date of Disbursement MM / DD / YYYY 02 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Capuano for Congress</p> <p>Mailing Address 38 Ivy Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Michael E Capuano</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 08</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B208362</p> <p>Date of Disbursement MM / DD / YYYY 02 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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

8500.00

**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"/> 24	<input type="checkbox"/> 25	<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)  
MetLife Inc. Employees Pol. Participation Fund A

A.

Full Name (Last, First, Middle Initial)  
The Castle Campaign Fund

Transaction ID: B208327

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	0	8

Mailing Address 355 Lexington Ave Suite 403

Amount of Each Disbursement this Period

2000.00
---------

City State Zip Code  
New York NY 10017

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name  
Michael Castle

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: DE District: 01

B.

Full Name (Last, First, Middle Initial)  
Friends of Jim Clyburn

Transaction ID: B208364

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	0	8

Mailing Address 499 South Capitol Street SW Suite

Amount of Each Disbursement this Period

1000.00
---------

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name  
James E Clyburn

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: SC District: 06

C.

Full Name (Last, First, Middle Initial)  
Texans for Senator John Cornyn

Transaction ID: B208337

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	0	8

Mailing Address 201 Massachusetts Ave NE Suite C3

Amount of Each Disbursement this Period

2000.00
---------

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name  
John Cornyn

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: TX District:

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

5000.00
---------

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

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**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)

PAGE 92 / 95

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
MetLife Inc. Employees Pol. Participation Fund A

A.	Full Name (Last, First, Middle Initial) Crowley for Congress	Transaction ID: B208363 Date of Disbursement 02 / 07 / 2008
	Mailing Address 422 C Street NE Lower Level	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Contribution Candidate Name Joseph Crowley	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) The Elizabeth Dole Committee Inc	Transaction ID: B208326 Date of Disbursement 02 / 07 / 2008
	Mailing Address 128 North Columbus Street	Amount of Each Disbursement this Period 2500.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Contribution Candidate Name Elizabeth Dole	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) People for English	Transaction ID: B208361 Date of Disbursement 02 / 07 / 2008
	Mailing Address 101 Hume Ave	Amount of Each Disbursement this Period 1000.00
	City Alexnadria State VA Zip Code 22301	
	Purpose of Disbursement Contribution Candidate Name Philip S English	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4500.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b>	Full Name (Last, First, Middle Initial) Pennsylvanians for Kanjorski <hr/> Mailing Address 233 Massachusetts Ave NE 2nd Floor <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Contribution Contribution Candidate Name Paul E Kanjorski Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 11	<b>Transaction ID:</b> B208342 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8	Amount of Each Disbursement this Period 2000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) John Kerry for Senate <hr/> Mailing Address 10 G Street NE Suite 710 <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Contribution Contribution Candidate Name John F Kerry Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MA District:	<b>Transaction ID:</b> B208345 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8	Amount of Each Disbursement this Period 2500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Loeb sack for Congress <hr/> Mailing Address 301 4th Street NE Suite 202 <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Contribution Contribution Candidate Name Dave Loeb sack Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 02	<b>Transaction ID:</b> B208341 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8	Amount of Each Disbursement this Period 1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5500.00
<b>TOTAL</b> 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
MetLife Inc. Employees Pol. Participation Fund A

<b>A.</b> Full Name (Last, First, Middle Initial) Martinez for Senate <hr/> Mailing Address PO Box 536176 <hr/> City Orlando State FL Zip Code 32853 <hr/> Purpose of Disbursement Contribution Candidate Name Mel Martinez Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B208374 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) The Reed Committee <hr/> Mailing Address 303 Massachusetts Ave NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Contribution Candidate Name Jack Reed Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B208338 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Wicker for Senate <hr/> Mailing Address 104 Hume Ave <hr/> City Alexandria State VA Zip Code 22301 <hr/> Purpose of Disbursement Contribution Candidate Name Roger Wicker Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General	Transaction ID: B208367 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General

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

4000.00

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

105500.00

Form/Schedule: SA11AI

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.