

**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 linesAXA Equitable Life Insurance Company Political Action Committee (AXA Equitable  
PAC)

ADDRESS (number and street)

1290 Avenue of the Americas

4th Floor

☐ Check if different  
than previously  
reported. (ACC)

New York

NY

10104

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00161901

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

04

01

2005

through

04

30

2005

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

Paul J. Flora

Signature of Treasurer

Electronically Filed by Paul J. Flora

Date

02

09

2006

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. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	4		0	1		2	0	0	5

To:

M	M		D	D		Y	Y	Y	Y
0	4		3	0		2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2005</span>		114003.74
(b) Cash on Hand at Beginning of Reporting Period .....	69570.77	
(c) Total Receipts (from Line 19) .....	11545.85	27620.14
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	81116.62	141623.88
7. Total Disbursements (from Line 31) .....	4000.00	64507.26
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	77116.62	77116.62
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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Report Covering the Period:

From:

M M  
0 4D D  
0 1Y Y Y Y  
2 0 0 5

To:

M M  
0 4D D  
3 0Y Y Y Y  
2 0 0 5

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	7153.28	11383.28
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	4392.57	16236.86
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	11545.85	27620.14
(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) ..... ➡	11545.85	27620.14
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)) .....	11545.85	27620.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	11545.85	27620.14

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		4000.00	61500.00
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	3007.26
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))..		4000.00	64507.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		4000.00	64507.26

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	11545.85	27620.14
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11545.85	27620.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
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	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 17

(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)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Full Name (Last, First, Middle Initial)

A. Alexander L. Nelson

Mailing Address 1290 Avenue of the Americas  
13th fl

City State Zip Code  
New York NY 10104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Financial

Occupation  
SVP--401K area

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 4 / 2 0 0 5

Transaction ID: 21400921

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Christopher M. Condon

Mailing Address 15 East 82nd Street

City State Zip Code  
New York NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Financial

Occupation  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 1 / 2 0 0 5

Transaction ID: 21429196

Amount of Each Receipt this Period

3000.00

ck. no. 2423

Full Name (Last, First, Middle Initial)

C. THOMAS RUGGIERO

Mailing Address 45 WILLIAM STREET  
SUITE 110

City State Zip Code  
WELLESLEY MA 02181

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Advisors, LLC

Occupation  
Branch Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
/ / /

Transaction ID: PR1018366411591

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

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

4080.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

## **A.**

Full Name (Last, First, Middle Initial)

DONALD BUSKARD

Mailing Address 1290 Ave. of the Americas  
17th Floor

City State Zip Code  
New York NY 10104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Financial, Inc.

Occupation  
SVP & Chief Technology Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018368611591

Amount of Each Receipt this Period

105.00

P/R Deduction (\$35.00 Bi-Weekly)

## **B.**

Full Name (Last, First, Middle Initial)

ALVIN FENICHEL

Mailing Address 1290 Ave. of the Americas  
11th Floor

City State Zip Code  
New York NY 10104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Financial, Inc.

Occupation  
SVP & CONTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018371111591

Amount of Each Receipt this Period

105.00

P/R Deduction (\$70.00 Bi-Weekly)

## **C.**

Full Name (Last, First, Middle Initial)

JANE MAHONEY

Mailing Address 1290 Ave. of the Americas  
7th Floor

City State Zip Code  
New York NY 10104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Financial, Inc.

Occupation  
SVP - Admin & Special Projects

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018375211591

Amount of Each Receipt this Period

105.00

P/R Deduction (\$70.00 Bi-Weekly)

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

315.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

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

ANTHONY PASQUALE

Mailing Address 1290 Ave. of the Americas  
12th FloorCity State Zip Code  
New York NY 10104FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Financial, Inc.Occupation  
SVP - Investment Planning/Forecasting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018377811591

Amount of Each Receipt this Period

105.00

P/R Deduction (\$70.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)

RICHARD SILVER

Mailing Address 1290 Ave. of the Americas  
16th FloorCity State Zip Code  
New York NY 10104FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Financial, Inc.Occupation  
EVP AND GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018380211591

Amount of Each Receipt this Period

225.00

P/R Deduction (\$150.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)

MARK WUTT

Mailing Address 1290 Ave. of the Americas  
13th FloorCity State Zip Code  
New York NY 10104FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Financial, Inc.Occupation  
SVP - TSG Headquarters

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018382811591

Amount of Each Receipt this Period

105.00

P/R Deduction (\$70.00 Bi-Weekly)

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

435.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

**A.** Full Name (Last, First, Middle Initial)  
THOMAS DUDDY JR.

Mailing Address 6133 N. RIVER ROAD  
SUITE 1120

City State Zip Code  
ROSEMONT IL 60018

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AXA Advisors, LLC

Occupation  
Midwest Division President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1018384211591

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
LUIS GABRIEL CHIAPPY

Mailing Address 9130 SOUTH DADELAND BLVD.  
SUITE 1400

City State Zip Code  
MIAMI FL 33156

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AXA Advisors, LLC

Occupation  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1018385311591

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
HUGO CASTRO

Mailing Address 9130 S. DADELAND BLVD  
SUITE 1400

City State Zip Code  
MIAMI FL 33156

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AXA Advisors, LLC

Occupation  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1018388711591

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

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

255.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

**A.**

Full Name (Last, First, Middle Initial)

STANLEY TULIN

Mailing Address 1290 Ave. of the Americas  
16th Floor

City State Zip Code  
New York NY 10104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AXA Financial, Inc.

Occupation  
Vice Chairman and Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018389611591

Amount of Each Receipt this Period

300.00

P/R Deduction (\$200.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)

WENDY COOPER

Mailing Address 1290 Ave. of the Americas  
12th Floor

City State Zip Code  
New York NY 10104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AXA Financial, Inc.

Occupation  
SVP & ASSOC. GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018390911591

Amount of Each Receipt this Period

105.00

P/R Deduction (\$70.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)

Mark R. Manley

Mailing Address 1345 Ave. of the Americas  
32nd Floor

City State Zip Code  
New York NY 10105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Alliance Capital Management

Occupation  
SVP/Counsel & Assistant Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018395811591

Amount of Each Receipt this Period

70.00

P/R Deduction (\$35.00 Bi-Weekly)

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

475.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Richard A. Davies Mailing Address 1345 Ave. of the Americas 33RD FLOOR City NEW YORK State NY Zip Code 10105 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer ALLIANCE Occupation Mutual Funds Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1018411011591 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)
<b>B.</b> Full Name (Last, First, Middle Initial) JOHN PASSANANTI Mailing Address Five Revere Drive, Suite 400 City Northbrook State IL Zip Code 60062 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AXA Advisors, LLC Occupation Branch Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1018411311591 Amount of Each Receipt this Period 80.00 P/R Deduction (\$80.00 Monthly)
<b>C.</b> Full Name (Last, First, Middle Initial) QIANG CAI Mailing Address 1000 CORPORATE CTR.DR. SUITE 100 City MONTEREY State CA Zip Code 91754 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AXA Advisors, LLC Occupation Branch Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 467.43		Date of Receipt M M / D D / Y Y Y Y Y <b>Transaction ID:</b> PR1018412411591 Amount of Each Receipt this Period 288.28 P/R Deduction (\$2.50 Monthly)

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

468.28

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

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

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

FOR LINE NUMBER: PAGE 12 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. MARY BETH FARRELL

Full Name (Last, First, Middle Initial)

Mailing Address 1290 Ave. of the Americas  
16th FloorCity State Zip Code  
New York NY 10104FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AXA Financial, Inc.Occupation  
EVP - Expense Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018413611591

Amount of Each Receipt this Period

225.00

P/R Deduction (\$150.00 Bi-Weekly)

B. Donald N. Fritts

Full Name (Last, First, Middle Initial)

Mailing Address 7885 Landowne Drive

City State Zip Code  
Atlanta GA 30350FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alliance Capital ManagementOccupation  
SVP/Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018413711591

Amount of Each Receipt this Period

70.00

P/R Deduction (\$35.00 Bi-Weekly)

C. Paul C. Rissman

Full Name (Last, First, Middle Initial)

Mailing Address 1345 Ave. of the Americas  
40th FloorCity State Zip Code  
New York NY 10105FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alliance Capital ManagementOccupation  
EVP/Director Global Equity Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018415511591

Amount of Each Receipt this Period

70.00

P/R Deduction (\$35.00 Bi-Weekly)

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

365.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

**A.** Full Name (Last, First, Middle Initial)  
SEDRIC AUDAS II

Mailing Address 2378 WOODLAKE DRIVE  
STE. 200

City State Zip Code  
OKEMOS MI 48864

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AXA Advisors, LLC

Occupation  
Branch Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018418011591

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Raymond J. Papera

Mailing Address 500 PLAZA DRIVE

City State Zip Code  
SECAUCUS NY 07094

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Alliance Capital Management

Occupation  
SVP/Portfolio Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018418611591

Amount of Each Receipt this Period

70.00

P/R Deduction (\$35.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Hans P Ziegler

Mailing Address 1345 Ave. of the Americas  
36th Floor

City State Zip Code  
NEW YORK SC 10105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Alliance Capital Management

Occupation  
SVP/BERNSTEIN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018418911591

Amount of Each Receipt this Period

70.00

P/R Deduction (\$35.00 Bi-Weekly)

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

240.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Full Name (Last, First, Middle Initial)

A. Seth J. Masters

Mailing Address 1345 Ave. of the Americas

City State Zip Code  
 NEW YORK NY 10105

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Alliance Capital Management

Occupation  
 CIO/EMERGING MARKETS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018419311591

Amount of Each Receipt this Period

70.00

P/R Deduction (\$35.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Marilyn G Fedak

Mailing Address 1345 Ave. of the Americas

City State Zip Code  
 NEW YORK NY 10105

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Alliance Capital Management

Occupation  
 EVP/CIO US VALUE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018419911591

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. James J Toma

Mailing Address 1345 Ave. of the Americas  
 35th Floor

City State Zip Code  
 New York NY 10105

FEC ID number of contributing federal political committee.

C

Name of Employer  
 Alliance Capital Management

Occupation  
 Managing Director, Taft-Hartley Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR1018422111591

Amount of Each Receipt this Period

70.00

P/R Deduction (\$35.00 Bi-Weekly)

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

290.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

**A.** Full Name (Last, First, Middle Initial)  
HENRY SWAN JR

Mailing Address 233 N. Michigan Avenue  
Suite 2450

City State Zip Code  
Chicago IL 60601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AXA Advisors, LLC

Occupation  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1047215211591

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
EDWARD DANE

Mailing Address 12 Prospect Road

City State Zip Code  
Westport CT 06880

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AXA Financial,

Occupation  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y

**Transaction ID:** PR1485101911591

Amount of Each Receipt this Period

150.00

P/R Deduction (\$100.00 Bi-Weekly)

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

230.00

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

7153.28

# **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 16 / 17

<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)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

Full Name (Last, First, Middle Initial)

**A.** Carper for Senate, Inc.

Mailing Address 729 15th St., NW  
3rd Fl.

City Washington State DC Zip Code 20005

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Thomas R. Carper

Office Sought: ☐ House ☒ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: DE District: 1

Transaction ID: 21428890

Date of Disbursement

04 / 08 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** SUE KELLY

Mailing Address P.O. BOX 599

City KATONAH State NY Zip Code 10536

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Sue W. Kelly

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 19

Transaction ID: 22120518

Date of Disbursement

04 / 29 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Chocola For Congress Inc

Mailing Address PO Box 6728

City South Bend State IN Zip Code 46660

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Christopher Chocola

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 2

Transaction ID: 22120620

Date of Disbursement

04 / 29 / 2005

Amount of Each Disbursement this Period

2000.00

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

4000.00

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

4000.00



Image# 26990298357

Form/Schedule: **F3XA**

Transaction ID:

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