

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
Pacific Life Insurance Company Political Action Committee

ADDRESS (number and street) 700 Newport Center Drive
 Check if different than previously reported. (ACC)
Newport Beach CA 92660

2. **FEC IDENTIFICATION NUMBER** C00068528
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 09 01 2006 through 09 30 2006

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 Robert G. Haskell
Signature of Treasurer Electronically Filed by Robert G. Haskell Date 10 03 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Pacific Life Insurance Company Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		101871.84
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	86659.11									
(c) Total Receipts (from Line 19)	16484.27	156771.54								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	103143.38	258643.38								
7. Total Disbursements (from Line 31)	95500.00	251000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7643.38	7643.38								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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
Pacific Life Insurance Company Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	15681.81	107090.31
(i) Itemized (use Schedule A)	802.46	49681.23
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	16484.27	156771.54
(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)	16484.27	156771.54
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))	16484.27	156771.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16484.27	156771.54

DETAILED SUMMARY PAGE

of Disbursements

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)		
(i) Federal Share.....	0.00	0.00
(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.....	95500.00	251000.00
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))..	95500.00	251000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	95500.00	251000.00

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)	16484.27	156771.54
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16484.27	156771.54
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: (check only one)	PAGE 6 / 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	

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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. NORM AKHAMLICH		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 24321 AUGUSTIN ST		Transaction ID: R19586	
City MISSION VIEJO	State CA	Zip Code 92691-4708	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation MGR BUILDING OPERATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) B. MS. SUSAN M ANDERSEN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 38732 N HILLTOP AVE		Transaction ID: R19587	
City ANTIOCH	State IL	Zip Code 60002-9628	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR BROKERAGE MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. MR. PATRICK J APPLEBY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 13185 GWYNETH DR APT D		Transaction ID: R19588	
City TUSTIN	State CA	Zip Code 92780-3858	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation AVP RE TECHNOLOGY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	90.00
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 7 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. JUNE GARCE

Mailing Address 20050 EMERALD MEADOW DR

City State Zip Code
WALNUT CA 91789-3506

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

Name of Employer Occupation
PACIFIC LIFE DIR MKTG COMPLIANCE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19589

Amount of Each Receipt this Period
50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM B ARMSTRONG

Mailing Address 5322 LAIRD RD

City State Zip Code
LOOMIS CA 95650-8916

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

Name of Employer Occupation
PACIFIC LIFE FVP FIELD WHOLESALING

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19590

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. STEPHANIE J BABKOW

Mailing Address 9901 OCEANCREST DR

City State Zip Code
HUNTINGTON BEACH CA 92646-8259

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

Name of Employer Occupation
PACIFIC LIFE AVP CLIENT SVCS

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19591

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	100.00
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 8 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. DENNIS L BAHLMANN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 6052 MEADOW VIEW CT		Transaction ID: R19592	
City JOHNSTON	State IA	Amount of Each Receipt this Period 50.00	
Zip Code 50131-3053		Payroll Deduction	
FEC ID number of contributing federal political committee. C			
Name of Employer PACIFIC LIFE	Occupation AVP NEW BUSINESS SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) B. MS. WENDY B BALDEN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 1844 PORT CHARLES PL		Transaction ID: R19593	
City NEWPORT BEACH	State CA	Amount of Each Receipt this Period 35.00	
Zip Code 92660-5320		Payroll Deduction	
FEC ID number of contributing federal political committee. C			
Name of Employer PACIFIC LIFE	Occupation AVP PORTFOLIO OPS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

Full Name (Last, First, Middle Initial) C. MR. RICHARD S BANNO		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 26666 WHITE OAKS DR		Transaction ID: R19595	
City LAGUNA HILLS	State CA	Amount of Each Receipt this Period 50.00	
Zip Code 92653-7577		Payroll Deduction	
FEC ID number of contributing federal political committee. C			
Name of Employer PACIFIC LIFE	Occupation AVP CAPITAL MKTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

SUBTOTAL of Receipts This Page (optional) ▶	135.00
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 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. DANIEL F BASS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 385 WHITE CAP LN		Transaction ID: R19597	
City State Zip Code NEWPORT COAST CA 92657-1096	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP REINSURANCE	Aggregate Year-to-Date ▼ 720.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. RICHARD BAUDOIN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 12 INDIAN SPRING RD		Transaction ID: R19598	
City State Zip Code NORWALK CT 06853-1303	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE MANAGING DIR	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. ROBERT H BEARDSLEE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 27612 ESCUNA		Transaction ID: R19599	
City State Zip Code MISSION VIEJO CA 92692-1204	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP M.C. MKTG&SELECT MKTS	Aggregate Year-to-Date ▼ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	190.00
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 10 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL A BELL

Mailing Address 2 PRECIPICE

City State Zip Code
LAGUNA NIGUEL CA 92677-5919

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

Name of Employer Occupation
PACIFIC LIFE EVP LIFE INSURANCE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1125.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19600

Amount of Each Receipt this Period
125.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. KEVIN W BERWALD

Mailing Address 9030 NORTHAMPTON DR

City State Zip Code
PLYMOUTH MI 48170-3340

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19601

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. THOMAS C BILELLO

Mailing Address 17812 BIGELOW PARK

City State Zip Code
TUSTIN CA 92780-2111

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

Name of Employer Occupation
PACIFIC LIFE AVP IND COMP & TRANS

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19603

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	175.00
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 11 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. STEPHEN M BOLLINGER

Mailing Address 17345 FLAME TREE CIR

City State Zip Code
FOUNTAIN VALLEY CA 92708-3521

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

Name of Employer Occupation
PACIFIC LIFE AVP E-COMMERCE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19605

Amount of Each Receipt this Period
30.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. LYNETTE G BONES

Mailing Address 23955 WARSAW ST

City State Zip Code
MISSION VIEJO CA 92691-3852

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

Name of Employer Occupation
PACIFIC LIFE MGR RET ANN BUS DEV

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19606

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. ANTHONY J BONNO

Mailing Address 2384 PORTRAIT WAY

City State Zip Code
TUSTIN CA 92782-4339

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

Name of Employer Occupation
PACIFIC LIFE SR VP HUMAN RESOURCES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19607

Amount of Each Receipt this Period
100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	155.00
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 12 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. MICHAEL P BORGATTI		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 978 BALD CYPRESS DR		Transaction ID: R19608	
City State Zip Code MANDEVILLE LA 70448-1087	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR WHOLESALER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) B. MR. JEFF J BRADSHAW		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 27302 MONDANO DR		Transaction ID: R19609	
City State Zip Code MISSION VIEJO CA 92692-5192	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation AVP IT APPLIC DEV & SUPPT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) C. MR. ALAN H BROWN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 505 13TH ST		Transaction ID: R19610	
City State Zip Code HUNTINGTON BEACH CA 92648-4037	Amount of Each Receipt this Period 70.00		
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation AVP INFO TECH OPS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00		

SUBTOTAL of Receipts This Page (optional) ▶	170.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 13 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. KAREN M BROWN

Mailing Address 11 FOREST HILLS CT

City State Zip Code
DANA POINT CA 92629-4111

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

Name of Employer Occupation
PACIFIC LIFE AVP MODEL OFC ANN TECH

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19611

Amount of Each Receipt this Period
40.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. MARY ANN BROWN

Mailing Address 288 CHIQUITA ST

City State Zip Code
LAGUNA BEACH CA 92651-1337

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

Name of Employer Occupation
PACIFIC LIFE SR VP CORP DEVELPMT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3749.94

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19613

Amount of Each Receipt this Period
416.66

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM D BURKE

Mailing Address 2216 NELDA WAY

City State Zip Code
ALAMO CA 94507-2004

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

Name of Employer Occupation
PACIFIC LIFE REGIONAL VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19614

Amount of Each Receipt this Period
100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	556.66
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 14 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. DEWEY P BUSHAW

Mailing Address 29132 ALFIERI ST

City State Zip Code
LAGUNA NIGUEL CA 92677-4603

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

Name of Employer Occupation
PACIFIC LIFE SR VP AMF CHF MKTG OFCR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1260.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19615

Amount of Each Receipt this Period
140.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL J BUSSARD

Mailing Address 3029 FLAGSTONE DR

City State Zip Code
FRANKLIN TN 37069-7229

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

Name of Employer Occupation
PACIFIC LIFE REGIONAL VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 687.54

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19616

Amount of Each Receipt this Period
83.34

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. EDWARD R BYRD

Mailing Address 17520 PAGE CT

City State Zip Code
YORBA LINDA CA 92886-3865

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

Name of Employer Occupation
PACIFIC LIFE SR VP CONT & CHF ACTG OFC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19617

Amount of Each Receipt this Period
100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	323.34
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 15 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. JOHN E CARLSON

Mailing Address 55 GILLMAN ST

City IRVINE State CA Zip Code 92612-2101

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

Name of Employer PACIFIC LIFE Occupation AVP INS CNSL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19619

Amount of Each Receipt this Period
 25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. DAVID R CARMICHAEL

Mailing Address 1525 SERENADE TER

City CORONA DEL MAR State CA Zip Code 92625-1753

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

Name of Employer PACIFIC LIFE Occupation SR VP GEN COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3744.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19620

Amount of Each Receipt this Period
 416.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. LORI K CARRASCO

Mailing Address 2742 PORTOLA DR

City COSTA MESA State CA Zip Code 92626-5819

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

Name of Employer PACIFIC LIFE Occupation SR PARALEGAL ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19621

Amount of Each Receipt this Period
 25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	466.00
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 16 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH E CELENTANO

Mailing Address 26661 CAMPESINO

City State Zip Code
MISSION VIEJO CA 92691-6048

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

Name of Employer Occupation
PACIFIC LIFE SR VP PROD MGMT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: R19622

Amount of Each Receipt this Period
100.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. SHARON A CHEEVER

Mailing Address 33512 VALLE RD

City State Zip Code
SN JUAN CAPISTRANO CA 92675-4838

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

Name of Employer Occupation
PACIFIC LIFE VP & INVEST COUNSEL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: R19623

Amount of Each Receipt this Period
85.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. LAURIE A CHURCH

Mailing Address 21851 NEWLAND ST SPC 246

City State Zip Code
HUNTINGTON BEACH CA 92646-7636

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

Name of Employer Occupation
PACIFIC LIFE MGR STRUCT STTLMNTS OPS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: R19626

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	225.00
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 17 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. JIM Y CHU

Mailing Address 120 ALBERT PL APT 10

City State Zip Code
COSTA MESA CA 92627-1768

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

Name of Employer Occupation
PACIFIC LIFE AVP PROD DESIGN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19625

Amount of Each Receipt this Period
65.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. BERNADINE E CHWALEK

Mailing Address 33741 SHACKLETON ISLE

City State Zip Code
DANA POINT CA 92629-4235

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

Name of Employer Occupation
PACIFIC LIFE AVP INVEST CNSL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 945.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19627

Amount of Each Receipt this Period
105.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. JACK D CLABOUGH

Mailing Address 1410 TANGLEWOOD DR

City State Zip Code
CORONA CA 92882-3777

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

Name of Employer Occupation
PACIFIC LIFE VP & CHIEF LIFE UNDERWRITER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19628

Amount of Each Receipt this Period
50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	220.00
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 18 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. KATHLEEN A CLUNE

Mailing Address 858 S BLUEBIRD CIR

City ANAHEIM State CA Zip Code 92807-4404

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

Name of Employer PACIFIC LIFE Occupation AVP ASST TREASURER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19629

Amount of Each Receipt this Period
 25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. GAIL L COBIN

Mailing Address 31558 W NINE DR

City LAGUNA NIGUEL State CA Zip Code 92677-2953

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

Name of Employer PACIFIC LIFE Occupation AVP CUSTOMER RELS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19630

Amount of Each Receipt this Period
 60.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. BRENDAN L COLLINS

Mailing Address 25551 ORCHARD RIM LN

City LAKE FOREST State CA Zip Code 92630-2717

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

Name of Employer PACIFIC LIFE Occupation AVP PORT MGMT, IG TRADING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19631

Amount of Each Receipt this Period
 35.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	120.00
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 19 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. DENNIS M CORBETT		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 15136 TOURAIN WAY		Transaction ID: R19632	
City State Zip Code IRVINE CA 92604-3173	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP TAX COMPLIANCE	Aggregate Year-to-Date ▼ 765.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. CAMERON COSGROVE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 36 WOODCREST		Transaction ID: R19633	
City State Zip Code IRVINE CA 92603-0220	Amount of Each Receipt this Period 85.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP LIFE CHIEF INFO OFFICER	Aggregate Year-to-Date ▼ 765.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. WILLIAM D COTTON		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 703 KAHN PL		Transaction ID: R19634	
City State Zip Code ALEXANDRIA VA 22314-3883	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE SR WHOLESALER	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	220.00
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 20 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. KENNETH W COX		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 570 EBBCREEK RD #P		Transaction ID: R19635	
City CORONA	State CA	Zip Code 92880-7713	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR SOFTWARE ENG-GEN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

Full Name (Last, First, Middle Initial) B. MR. DANIEL C CRAIN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 36 WINTERGREEN		Transaction ID: R19636	
City IRVINE	State CA	Zip Code 92604-2831	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation MGR PROD COMPLIANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		

Full Name (Last, First, Middle Initial) C. MR. EDWARD T CREECH		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 168 HIGH HILLS DR		Transaction ID: R19637	
City MOORESVILLE	State NC	Zip Code 28117-9000	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR WHOLESALER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	135.00
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 21 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. PAUL J CROXTON

Mailing Address 30132 HILLSIDE TER

City State Zip Code
SN JUAN CAPISTRANO CA 92675-1540

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

Name of Employer Occupation
PACIFIC LIFE FVP FIELD WHOLESALING

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19638

Amount of Each Receipt this Period
50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. DEBRA CUNNINGHAM HONERKAMP

Mailing Address 2712 LIGHTHOUSE LN

City State Zip Code
CORONA DEL MAR CA 92625-1314

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

Name of Employer Occupation
PACIFIC LIFE AVP RE ASSET MGMT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19639

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL R CURRY

Mailing Address 23820 CAPE MONACO RD

City State Zip Code
BONITA SPRINGS FL 34135-1768

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

Name of Employer Occupation
PACIFIC LIFE FVP FIELD WHOLESALING

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19640

Amount of Each Receipt this Period
50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	150.00
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 22 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. STEPHANIE J CURRY

Mailing Address PO BOX 15358

City IRVINE State CA Zip Code 92623-5358

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

Name of Employer PACIFIC LIFE Occupation AVP ADVANCED SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 705.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19641

Amount of Each Receipt this Period
 80.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. DIANE W DALES

Mailing Address 28 CLERMONT

City NEWPORT COAST State CA Zip Code 92657-1071

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

Name of Employer PACIFIC LIFE Occupation AVP CREDIT ANALYSIS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19642

Amount of Each Receipt this Period
 50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. LINDA K DAVIS

Mailing Address 8315 ROAD R NW

City QUINCY State WA Zip Code 98848-9607

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

Name of Employer PACIFIC LIFE Occupation AVP IND COMPLIANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 795.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19643

Amount of Each Receipt this Period
 90.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	220.00
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 23 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. CAROLYN DEAN

Mailing Address PO BOX 3051

City State Zip Code
DANA POINT CA 92629-8051

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

Name of Employer Occupation
PACIFIC LIFE DIR FINANCIAL RPTG

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19644

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. PETER S DEERING

Mailing Address 3314 HILL ST

City State Zip Code
SAN DIEGO CA 92106-2415

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

Name of Employer Occupation
PACIFIC LIFE SR VP PSD STRATEGC GRWTH

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19645

Amount of Each Receipt this Period
100.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. DAMIAN DELL'OSO

Mailing Address 1A DERICKSON DR.

City State Zip Code
WILMINGTON DE 19808-1901

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19646

Amount of Each Receipt this Period
30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 155.00

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 24 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. PATRICIA S DOUGLASS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 640 SAINT JAMES RD		Transaction ID: R19649	
City State Zip Code NEWPORT BEACH CA 92663-5855	Amount of Each Receipt this Period 205.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP GOVT RELNS	Aggregate Year-to-Date ▼ 1830.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. DONALD M DOWNING		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 995 QUIVERA ST		Transaction ID: R19650	
City State Zip Code LAGUNA BEACH CA 92651-3821	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE FVP M MKTG	Aggregate Year-to-Date ▼ 1350.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. SILAS K DUNN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 14 ELDERWOOD		Transaction ID: R19651	
City State Zip Code IRVINE CA 92614-7449	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP PSD COMPLIANCE	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	380.00
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 25 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. EMILE C DUROCHER

Mailing Address 9740 E GRANITE PEAK TRL

City State Zip Code
SCOTTSDALE AZ 85262-3140

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

Name of Employer Occupation
PACIFIC LIFE FIELD VP MRKTNG AFFILIATE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19652

Amount of Each Receipt this Period
50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. JEFFREY D DZIADZIOLA

Mailing Address 2917 CHALFONT LN

City State Zip Code
PLANO TX 75023-1408

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19653

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. STEVEN R ELDER

Mailing Address 37936 19TH AVE S

City State Zip Code
FEDERAL WAY WA 98003-7712

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19654

Amount of Each Receipt this Period
50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	125.00
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 26 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. STEPHEN K ENG

Mailing Address 2311 BAYPOINTE DR

City State Zip Code
NEWPORT BEACH CA 92660-8519

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

Name of Employer Occupation
PACIFIC LIFE ALM CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19655

Amount of Each Receipt this Period
40.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. NANCY E ENOMOTO

Mailing Address 2001 BARRANCA

City State Zip Code
NEWPORT BEACH CA 92660-4529

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

Name of Employer Occupation
PACIFIC LIFE AVP GUARANTEED ANNUITIES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19656

Amount of Each Receipt this Period
35.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. MARK R FALK

Mailing Address 64 SUMMERSTONE

City State Zip Code
IRVINE CA 92614-7000

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

Name of Employer Occupation
PACIFIC LIFE AVP STRATEGIC PROGRAMS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1125.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19657

Amount of Each Receipt this Period
125.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	200.00
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 27 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. SIMON S FENG		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 10 CANDELA		Transaction ID: R19659	
City IRVINE	State CA	Amount of Each Receipt this Period 150.00	
Zip Code 92620-1823		Payroll Deduction	
FEC ID number of contributing federal political committee. C			
Name of Employer PACIFIC LIFE	Occupation VP INFO TECH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) B. MR. PETER S FIEK		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 22 ARCADE		Transaction ID: R19660	
City IRVINE	State CA	Amount of Each Receipt this Period 25.00	
Zip Code 92603-0120		Payroll Deduction	
FEC ID number of contributing federal political committee. C			
Name of Employer PACIFIC LIFE	Occupation AVP PORTFOLIO MGMT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. MR. DAVID R FINEAR		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 718 K THANGA DR		Transaction ID: R19661	
City CORONA DEL MAR	State CA	Amount of Each Receipt this Period 35.00	
Zip Code 92625-1734		Payroll Deduction	
FEC ID number of contributing federal political committee. C			
Name of Employer PACIFIC LIFE	Occupation AVP RE INVESTMENTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

SUBTOTAL of Receipts This Page (optional) ▶	210.00
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 28 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. MARTIN J FLEISCHMAN

Mailing Address 2915 CALLE GUADALAJARA

City State Zip Code
SAN CLEMENTE CA 92673-3017

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

Name of Employer Occupation
PACIFIC LIFE AVP SEPARATE ACCTS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19662

Amount of Each Receipt this Period
30.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. MARTHA A GATES

Mailing Address 31411 MONTEREY ST

City State Zip Code
LAGUNA BEACH CA 92651-6963

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

Name of Employer Occupation
PACIFIC LIFE VP CLIENT SERVICES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19665

Amount of Each Receipt this Period
125.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. ADRIANNE M GEORGANTAS

Mailing Address 28373 BOULDER DR

City State Zip Code
TRABUCO CANYON CA 92679-1144

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

Name of Employer Occupation
PACIFIC LIFE SR FLD SVCS PROJ ANA

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19666

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	195.00
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 29 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. RAYMOND S GETTINS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 218 WORTHINGTON AVE		Transaction ID: R19667	
City State Zip Code WYOMING OH 45215-4342	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE SR WHOLESALER	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. THOMAS GIBBONS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 45137 BIG CANYON ST		Transaction ID: R19668	
City State Zip Code INDIANO CA 92201-0919	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP TAX	Aggregate Year-to-Date ▼ 900.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. FRANK J GOETZ		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 7 SOVENTE		Transaction ID: R19669	
City State Zip Code IRVINE CA 92606-0830	Amount of Each Receipt this Period 62.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE DIR LIFE UNDWRTNG	Aggregate Year-to-Date ▼ 558.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	187.00
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 30 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. KEVIN P GOODMAN

Mailing Address 310 ALISO AVE

City State Zip Code
NEWPORT BEACH CA 92663-5103

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

Name of Employer Occupation
PACIFIC LIFE ACCUM PROD CONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19672

Amount of Each Receipt this Period
40.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. MILDA C GOODMAN

Mailing Address 310 ALISO AVE

City State Zip Code
NEWPORT BEACH CA 92663-5103

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

Name of Employer Occupation
PACIFIC LIFE AVP ADV & PUB RL TNS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 378.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19673

Amount of Each Receipt this Period
42.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. LORENE C GORDON

Mailing Address 37 LANTANA

City State Zip Code
ALISO VIEJO CA 92656-2123

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

Name of Employer Occupation
PACIFIC LIFE VP OPERATIONS

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19674

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	107.00
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 31 / 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

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

Full Name (Last, First, Middle Initial) A. MS. C MARLA GRAHAM		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 23672 BRASILIA ST		Transaction ID: R19675	
City State Zip Code MISSION VIEJO CA 92691-3012	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE MGR NEXT WAVE PMO/BA	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS. CHARLENE A GRANT		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 3301 SEAVIEW AVE		Transaction ID: R19677	
City State Zip Code CORONA DEL MAR CA 92625-3056	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP VAR REG COMPL	Aggregate Year-to-Date ▼ 315.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. WILLIAM C GREEN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 12889 RALSTON CIR		Transaction ID: R19678	
City State Zip Code SAN DIEGO CA 92130-2447	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE SR CASH COLLTRL COORD	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	110.00
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 32 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. ADRIAN S GRIGGS

Mailing Address 8766 CANARY AVE

City State Zip Code
FOUNTAIN VALLEY CA 92708-6353

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

Name of Employer Occupation
PACIFIC LIFE VP FINANCE & COMPLIANCE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19680

Amount of Each Receipt this Period
50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. MILISSA M GUITTERREZ

Mailing Address 116 FONTAINBLEAU DR

City State Zip Code
MANDEVILLE LA 70471-6419

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 305.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19681

Amount of Each Receipt this Period
45.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. IRENE L HALLETT

Mailing Address 60 PALATINE APT 223

City State Zip Code
IRVINE CA 92612-5647

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

Name of Employer Occupation
PACIFIC LIFE NATL ACCOUNTS SUPR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19682

Amount of Each Receipt this Period
30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	125.00
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 33 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. RODERICK P HANSEN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 21612 MARIGOT DR		Transaction ID: R19683	
City State Zip Code BOCA RATON FL 33428-4824	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE REGIONAL VP	Aggregate Year-to-Date ▼ 750.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS. BRENDA K HARDWIG		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 13112 EARLHAM ST		Transaction ID: R19684	
City State Zip Code SANTA ANA CA 92705-2139	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE COMMUNITY RELTNS COORD	Aggregate Year-to-Date ▼ 360.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. CHARLES W HARVEY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 411 1/2 POINSETTIA AVE		Transaction ID: R19686	
City State Zip Code CORONA DEL MAR CA 92625-2527	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE NETWORK ENGINEER	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	165.00
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 34 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. ROBERT G HASKELL		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 31735 SEACLIFF DR		Transaction ID: R19687	
City State Zip Code LAGUNA BEACH CA 92651-7001	Amount of Each Receipt this Period 416.66		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE SR VP PUBLIC AFFAIRS	Aggregate Year-to-Date ▼ 3249.96		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS. PAM M HAUK		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 88 CALLE DE FELICIDAD		Transaction ID: R19688	
City State Zip Code RCHO STA MARGARITA CA 92688-2884	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE M MARKETING DIR	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MS. MARY M HAWKINS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 6182 S 177TH ST		Transaction ID: R19689	
City State Zip Code OMAHA NE 68135-2897	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP NEB OPS CENTER	Aggregate Year-to-Date ▼ 405.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	486.66
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 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	

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

Full Name (Last, First, Middle Initial) A. MR. DALE E HAWLEY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 1137 SUNSET CLIFFS BLVD		Transaction ID: R19690	
City State Zip Code SAN DIEGO CA 92107-4014	Amount of Each Receipt this Period 74.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP INVEST CNSL	Aggregate Year-to-Date ▼ 666.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. ROBERT J HEMSTEAD		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 2335 RANCHO DEL ORO RD UNIT 4		Transaction ID: R19692	
City State Zip Code OCEANSIDE CA 92056-1734	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP & VALUATION ACTUARY	Aggregate Year-to-Date ▼ 540.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. KEVIN A HENDRA		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 58 VIAGGIO LN		Transaction ID: R19693	
City State Zip Code FOOTHILL RANCH CA 92610-1925	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE DIR TAX OPERATIONS	Aggregate Year-to-Date ▼ 345.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	174.00
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 36 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM L HEZZELWOOD

Mailing Address 6700 CAMINO CRESTA

City State Zip Code
SAN CLEMENTE CA 92673-7103

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

Name of Employer Occupation
PACIFIC LIFE VP PROGRAM MGMT OFC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1020.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19695

Amount of Each Receipt this Period
120.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. CHRISTINA Q HE

Mailing Address 15 ALCOBA

City State Zip Code
IRVINE CA 92614-8423

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

Name of Employer Occupation
PACIFIC LIFE AVP ASSET/LIAB STRAT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19691

Amount of Each Receipt this Period
40.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. DAVID L HICKS

Mailing Address 25391 REMESA DR

City State Zip Code
MISSION VIEJO CA 92691-5460

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

Name of Employer Occupation
PACIFIC LIFE SR NETWORK ENGINEER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 288.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19696

Amount of Each Receipt this Period
32.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	192.00
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 37 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) MR. HOWARD T HIRAKAWA		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 23972 GOLDENEYE DR		Transaction ID: R19698	
City State Zip Code LAGUNA NIGUEL CA 92677-1332	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP INV ADVISOR OPS	Aggregate Year-to-Date ▼ 825.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) MR. STUART A HOLLAND		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 9422 S KENNETH PL		Transaction ID: R19699	
City State Zip Code TEMPE AZ 85284-4104	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE FVP FIELD WHOLESALING	Aggregate Year-to-Date ▼ 575.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) MR. DAVID C HONERKAMP		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 2712 LIGHTHOUSE LN		Transaction ID: R19700	
City State Zip Code CORONA DEL MAR CA 92625-1314	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP RE ACQUISITIONS	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	225.00
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 38 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. ROBERT C HSU

Mailing Address 1121 EBBTIDE RD

City State Zip Code
CORONA DEL MAR CA 92625-1402

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

Name of Employer Occupation
PACIFIC LIFE SR VP ANN ADMIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1125.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19701

Amount of Each Receipt this Period
125.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. RONALD M HUBBARD

Mailing Address 42 FERN PNE

City State Zip Code
IRVINE CA 92618-3976

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

Name of Employer Occupation
PACIFIC LIFE AVP RE IT/REOC FINANCE

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19702

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. MARYBETH HUGHES

Mailing Address 2283 WATERMAN WAY

City State Zip Code
COSTA MESA CA 92627-1836

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

Name of Employer Occupation
PACIFIC LIFE CORP RISK MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19703

Amount of Each Receipt this Period
30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	180.00
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 39 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. CHRIS M JANOWIAK

Mailing Address 2056 COLUMBUS WAY

City State Zip Code
VISTA CA 92081-8948

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

Name of Employer Occupation
PACIFIC LIFE DIR CORP INTERNET STRATEGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: R19705

Amount of Each Receipt this Period
60.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. CAROL A JENSEN

Mailing Address 2309 162ND ST SE

City State Zip Code
MILL CREEK WA 98012-7835

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

Name of Employer Occupation
PACIFIC LIFE REGIONAL VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: R19706

Amount of Each Receipt this Period
100.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. JEFF R JOHNSON

Mailing Address 19542 OCCIDENTAL LN

City State Zip Code
HUNTINGTON BEACH CA 92646-3423

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

Name of Employer Occupation
PACIFIC LIFE DIR CORPORATE FINANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2006

Transaction ID: R19708

Amount of Each Receipt this Period
45.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	205.00
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 40 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. KENT R JOHNSON		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 25621 DEL NORTE		Transaction ID: R19709	
City State Zip Code LAGUNA NIGUEL CA 92677-4424	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP ACTUARIAL & REINS	Aggregate Year-to-Date ▼ 450.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. MARK J JOHNSON		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 1812 LEADBURN RD		Transaction ID: R19710	
City State Zip Code TOWSON MD 21204-1831	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE SR WHOLESALER	Aggregate Year-to-Date ▼ 900.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. SCOTT E JOHNSON		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 906 NEWTON LN		Transaction ID: R19711	
City State Zip Code PLACENTIA CA 92870-7505	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP HR TECHNOLOGY	Aggregate Year-to-Date ▼ 375.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	200.00
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 41 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. LORI A JOHNSTONE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 27 GRAY STONE WAY		Transaction ID: R19712	
City State Zip Code LAGUNA NIGUEL CA 92677-9330	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP HIGH YIELD	Aggregate Year-to-Date ▼ 270.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. JEFF A JOLLEY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 54 ASHBROOK		Transaction ID: R19713	
City State Zip Code IRVINE CA 92604-3363	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP AMF CHIEF ACTUARY	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. BENJAMIN JUNG		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 115 VIA KORON		Transaction ID: R19714	
City State Zip Code NEWPORT BEACH CA 92663-4910	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE MANAGING DIR & COO	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	80.00
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 42 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. DENNIS S KAMINSKI

Mailing Address 15585 BELLANCA LN

City Wellington State FL Zip Code 33414-8355

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

Name of Employer PACIFIC LIFE Occupation EXEC VP, CHIEF ADMIN OFCR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
09 / 30 / 2006

Transaction ID: R19715

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. SUZANNE T KAMPA

Mailing Address 5531 STANFORD AVE

City Garden Grove State CA Zip Code 92845-2434

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

Name of Employer PACIFIC LIFE Occupation IT AUDIT CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
09 / 30 / 2006

Transaction ID: R19716

Amount of Each Receipt this Period
60.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. JAMES KARAFKA

Mailing Address 182 STANHOPE RD

City Sparta State NJ Zip Code 07871-2702

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

Name of Employer PACIFIC LIFE Occupation REGIONAL VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
09 / 30 / 2006

Transaction ID: R19718

Amount of Each Receipt this Period
50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 135.00

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 43 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. ANITA KARANJIA

Mailing Address 9 MONTECILO

City State Zip Code
FOOTHILL RANCH CA 92610-1733

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

Name of Employer Occupation
PACIFIC LIFE SR BUS ANA

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19719

Amount of Each Receipt this Period
60.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. ANDREW C KARLINSKI

Mailing Address PO BOX 6664

City State Zip Code
SNOWMASS VILLAGE CO 81615

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

Name of Employer Occupation
PACIFIC LIFE AGENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19866

Amount of Each Receipt this Period
100.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. MARK A KARPE

Mailing Address 16 AUTUMNLEAF

City State Zip Code
IRVINE CA 92614-7596

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

Name of Employer Occupation
PACIFIC LIFE DIR COMPLIANCE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19720

Amount of Each Receipt this Period
30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	190.00
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 44 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. CHRISTINE L KELLERMAN

Mailing Address 26571 VIA CALIFORNIA

City State Zip Code
CASTRANO BEACH CA 92624-1209

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

Name of Employer Occupation
PACIFIC LIFE MGR APPLICATION DEVELOPMENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 299.97

Date of Receipt
MM / DD / YYYY
09 / 30 / 2006

Transaction ID: R19722

Amount of Each Receipt this Period
33.33

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. KRISTINA L KENNEDY

Mailing Address 6 CAMARIN ST

City State Zip Code
FOOTHILL RANCH CA 92610-1939

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

Name of Employer Occupation
PACIFIC LIFE AVP ANN PRICING ACTUARY

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

Date of Receipt
MM / DD / YYYY
09 / 30 / 2006

Transaction ID: R19723

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. BRIAN D KLEMENS

Mailing Address 24611 BENJAMIN CIR

City State Zip Code
DANA POINT CA 92629-6013

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

Name of Employer Occupation
PACIFIC LIFE VP & TREASURER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 660.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2006

Transaction ID: R19725

Amount of Each Receipt this Period
75.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	133.33
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 45 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. RONALD S KLINGE

Mailing Address 995 QUIVERA ST

City State Zip Code
LAGUNA BEACH CA 92651-3821

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

Name of Employer Occupation
PACIFIC LIFE SR PRODUCT ANA

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19726

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. JUNE E KNUTH

Mailing Address 30862 PASEO DEL NIGUEL

City State Zip Code
LAGUNA NIGUEL CA 92677-2309

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

Name of Employer Occupation
PACIFIC LIFE VP & INVEST COUNSEL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19727

Amount of Each Receipt this Period
30.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. JOHN P KONTOS

Mailing Address 547 N LAS PALMAS AVE

City State Zip Code
LOS ANGELES CA 90004-1017

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

Name of Employer Occupation
PACIFIC LIFE AVP IND PROD CHANNEL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 990.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19728

Amount of Each Receipt this Period
110.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	165.00
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 46 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. LINDA L KOTOWICZ		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6	
Mailing Address 795 TREPANNY LN		Transaction ID: R19729	
City State Zip Code WAYNE PA 19087-1931	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE FVP M MKTG	Aggregate Year-to-Date ▼ 820.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. JOSEPH W KRUM		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6	
Mailing Address 43 LEMANS		Transaction ID: R19730	
City State Zip Code NEWPORT COAST CA 92657-0115	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP STRATEGIC PROGRAMS	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. FLETCHER C LARSON		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6	
Mailing Address 709 AVENIDA MIROLA		Transaction ID: R19732	
City State Zip Code PALOS VERDES EST CA 90274-4307	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE REGIONAL VP	Aggregate Year-to-Date ▼ 900.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	185.00
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 47 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) MR. DAVID LAWS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 10935 E BERRY AVE		Transaction ID: R19733	
City ENGLEWOOD	State CO	Zip Code 80111-3903	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation REGIONAL VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

B. Full Name (Last, First, Middle Initial) MS. DARCY L LEWIS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 7322 RESIDENCIA		Transaction ID: R19735	
City NEWPORT BEACH	State CA	Zip Code 92660	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation AVP CREDIT ANALYSIS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

C. Full Name (Last, First, Middle Initial) MR. PAUL V LIGEROS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 44 RABANO		Transaction ID: R19736	
City RCHO STA MARGARITA	State CA	Zip Code 92688-4961	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation PROD & COMPETITION CONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

SUBTOTAL of Receipts This Page (optional)	155.00
TOTAL This Period (last page this line number only)	(Empty box)

**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 48 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. JODY L LINNEMAN

Mailing Address 262 S FAIRFIELD LN

City State Zip Code
ORANGE CA 92869-5907

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

Name of Employer Occupation
PACIFIC LIFE ATTORNEY CONSULTANT

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19737

Amount of Each Receipt this Period
60.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. REED J LLOYD

Mailing Address 6 SANDERLING LN

City State Zip Code
ALISO VIEJO CA 92656-1220

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

Name of Employer Occupation
PACIFIC LIFE AVP ADVANCED MKTG

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 510.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19738

Amount of Each Receipt this Period
60.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. TERESA M LORD

Mailing Address 16432 CAMINO CANADA LN

City State Zip Code
HUNTINGTON BEACH CA 92649-5206

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

Name of Employer Occupation
PACIFIC LIFE APPLICATIONS ANA

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19739

Amount of Each Receipt this Period
30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	150.00
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 49 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. LAURENE E MAC ELWEE

Mailing Address 1033 SECRETARIAT CIR

City State Zip Code
COSTA MESA CA 92626-1620

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

Name of Employer Occupation
PACIFIC LIFE AVP VARIABLE REG COMPLIANCE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19740

Amount of Each Receipt this Period
100.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. TIMOTHY P MANN

Mailing Address 3115 PENINSULA DR

City State Zip Code
JAMESTOWN NC 27282-7502

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19741

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. DESMOND G MARSH

Mailing Address 74 SETON RD

City State Zip Code
IRVINE CA 92612-2114

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

Name of Employer Occupation
PACIFIC LIFE AVP TECHNOLOGY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1080.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19742

Amount of Each Receipt this Period
120.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	270.00
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 50 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. THOMAS J MAYS

Mailing Address 7406 PALOMA DR

City State Zip Code
HUNTINGTON BEACH CA 92648-6847

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

Name of Employer Occupation
PACIFIC LIFE VP GOVT RELNS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19743

Amount of Each Receipt this Period
50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. GAIL H MC INTOSH

Mailing Address 622 18TH ST

City State Zip Code
HUNTINGTON BEACH CA 92648-3808

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

Name of Employer Occupation
PACIFIC LIFE AVP INS CNSL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 720.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19744

Amount of Each Receipt this Period
80.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. TRAVIS R MC KAY

Mailing Address 24719 JOLEE CT

City State Zip Code
PLAINFIELD IL 60544-2449

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19745

Amount of Each Receipt this Period
100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	230.00
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 51 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. JULIA C MC KINNEY

Mailing Address 207 N ELLERY DR

City State Zip Code
SAN PEDRO CA 90732-2701

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

Name of Employer Occupation
PACIFIC LIFE AVP INS CNSL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19746

Amount of Each Receipt this Period
75.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. MORGAN C MC KNIGHT

Mailing Address 1217 HIGHCREST DR

City State Zip Code
BURLESON TX 76028-7467

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

Name of Employer Occupation
PACIFIC LIFE SR SOFTWARE ENG-CS (G)

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19747

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. HENRY M MC MILLAN

Mailing Address 4006 INLET ISLE DR

City State Zip Code
CORONA DEL MAR CA 92625-1606

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

Name of Employer Occupation
PACIFIC LIFE SR VP & CHIEF RISK OFCR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 787.50

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19749

Amount of Each Receipt this Period
87.50

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	187.50
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 52 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. MARY K MCWARD

Mailing Address 2 GLASTONBURY PL

City State Zip Code
LAGUNA NIGUEL CA 92677-5310

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

Name of Employer Occupation
PACIFIC LIFE VP MARKETING

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19750

Amount of Each Receipt this Period
50.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. JOHN E MILBERG

Mailing Address 33811 DONEGAL LN

City State Zip Code
SN JUAN CAPISTRANO CA 92675-4973

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

Name of Employer Occupation
PACIFIC LIFE SR VP RISK FIN & IM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1275.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19751

Amount of Each Receipt this Period
150.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. AUDREY L MILFS

Mailing Address 26922 ROCKING HORSE LN

City State Zip Code
LAGUNA HILLS CA 92653-5835

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

Name of Employer Occupation
PACIFIC LIFE VP & SECRETARY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19752

Amount of Each Receipt this Period
200.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	400.00
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 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	

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

A. Full Name (Last, First, Middle Initial)
MR. ERIC B MILLS

Mailing Address 25202 LA ESTRADA DR

City State Zip Code
LAGUNA NIGUEL CA 92677-1806

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

Name of Employer Occupation
PACIFIC LIFE AVP ADVANCED DESIGN

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19753

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. JOSE T MISCOLTA

Mailing Address 20 BRYCE CYN

City State Zip Code
ALISO VIEJO CA 92656-8037

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

Name of Employer Occupation
PACIFIC LIFE DIR PROD & PORT MKTG

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 405.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19754

Amount of Each Receipt this Period
45.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. STEPHAN P MITCHELL

Mailing Address 18111 THEODORA DR

City State Zip Code
TUSTIN CA 92780-2643

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

Name of Employer Occupation
PACIFIC LIFE SR PROD & COMPETITION ANA

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19755

Amount of Each Receipt this Period
45.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	115.00
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 54 / 95
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. ELIZABETH A MOORE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 6412 N 159TH ST		Transaction ID: R19756	
City OMAHA	State NE	Zip Code 68116-4055	Amount of Each Receipt this Period 45.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR BUS SYS ANA (LD)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) B. MR. JAMES T MORRIS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 29022 PINTAIL CIR		Transaction ID: R19757	
City LAGUNA NIGUEL	State CA	Zip Code 92677-1366	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation CHIEF OPERATING OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3744.00		

Full Name (Last, First, Middle Initial) C. MS. VALERIE MORRIS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 48 W YALE LOOP		Transaction ID: R19758	
City IRVINE	State CA	Zip Code 92604-3619	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation VP EE BEN & ADMIN SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	536.00
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 55 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. JOHN C MULVIHILL		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 27822 HOMESTEAD RD		Transaction ID: R19759	
City State Zip Code LAGUNA NIGUEL CA 92677-3763	Amount of Each Receipt this Period 175.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP RE ASSET MGMT	Aggregate Year-to-Date ▼ 1500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MS. KATHLEEN N NITTA		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 39 BAYCREST CT		Transaction ID: R19761	
City State Zip Code NEWPORT BEACH CA 92660-2919	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE SR TECH PROGRAM MGR	Aggregate Year-to-Date ▼ 270.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MS. MICHAELE S NOZAKI		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 24441 CASWELL CT		Transaction ID: R19762	
City State Zip Code LAGUNA NIGUEL CA 92677-7008	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP INFO SECURITY	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	230.00
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 56 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. ROBERT C O'BRIEN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 35 HERITAGE AVE		Transaction ID: R19763	
City ASHLAND State MA Zip Code 01721-1087	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR WHOLESALER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) B. MR. JOHN F O'DONNELL		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 30 BRIAN RD		Transaction ID: R19764	
City BRIDGEWATER State MA Zip Code 02324-3000	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation REGIONAL VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) C. MR. DARAGH M O'SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 177 22ND ST APT 14		Transaction ID: R19765	
City COSTA MESA State CA Zip Code 92627-1764	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation VP PRODUCT DESIGN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1230.00		

SUBTOTAL of Receipts This Page (optional) ▶	300.00
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 57 / 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

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

A. Full Name (Last, First, Middle Initial)
MR. EVAN P OHS

Mailing Address 8124 WESTLAWN AVE

City State Zip Code
LOS ANGELES CA 90045-2753

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

Name of Employer Occupation
PACIFIC LIFE FIELD VICE PRES

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19766

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. REX A OLSON

Mailing Address 1963 PORT LAURENT PL

City State Zip Code
NEWPORT BEACH CA 92660-7118

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

Name of Employer Occupation
PACIFIC LIFE VP CREDIT ANALYSIS

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19769

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. RICHARD P OLSON

Mailing Address 24852 CAMBERWELL ST

City State Zip Code
LAGUNA HILLS CA 92653-4602

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

Name of Employer Occupation
PACIFIC LIFE MGR SECURITY SVCS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19770

Amount of Each Receipt this Period
50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	100.00
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 58 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. TENNYSON S OYLER

Mailing Address 112 CLEARBROOK

City State Zip Code
IRVINE CA 92614-7984

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

Name of Employer Occupation
PACIFIC LIFE PUBLIC AFFAIRS MGR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19771

Amount of Each Receipt this Period
35.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. SHARON E PACHECO

Mailing Address 21611 BLUEJAY ST

City State Zip Code
TRABUCO CANYON CA 92679-3469

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

Name of Employer Occupation
PACIFIC LIFE VP CHIEF COMPLIANCE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19772

Amount of Each Receipt this Period
40.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. HEATHER A PAIGE

Mailing Address 29352 BOBOLINK DR

City State Zip Code
LAGUNA NIGUEL CA 92677-1336

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

Name of Employer Occupation
PACIFIC LIFE AVP IMD OPS & COMPL

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19773

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	100.00
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 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. SEBRON K PARTRIDGE

Mailing Address 2549B EASTBLUFF DR # 269

City State Zip Code
NEWPORT BEACH CA 92660-3504

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

Name of Employer Occupation
PACIFIC LIFE BUS CONTINUITY CONS

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19774

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. DALE W PATRICK

Mailing Address 6 SUNNYVALE

City State Zip Code
IRVINE CA 92602-1067

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

Name of Employer Occupation
PACIFIC LIFE AVP PORT MGMT, IG TRADING

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 435.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19775

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. GEORGE A PAULIK

Mailing Address 2990 WINDSTONE CIRCLE

City State Zip Code
MARRIETTA GA 30062-5685

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

Name of Employer Occupation
PACIFIC LIFE FVP FIELD WHOLESALING

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19776

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	100.00
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 60 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) MS. JOYCE J PEAD		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 25 SUNRISE		Transaction ID: R19777	
City IRVINE	State CA	Zip Code 92603-3719	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation AVP EMPLOYMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

B. Full Name (Last, First, Middle Initial) MR. TERRY R PERKINS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 25522 SAWMILL LN		Transaction ID: R19778	
City LAKE FOREST	State CA	Zip Code 92630-4333	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation VP ADVANCE DESIGN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

C. Full Name (Last, First, Middle Initial) MS. ALYCE PETERSON		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 2908 VIA HIDALGO		Transaction ID: R19779	
City SAN CLEMENTE	State CA	Zip Code 92673-3026	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation VP MARKETING SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00		

SUBTOTAL of Receipts This Page (optional) ▶	150.00
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 61 / 95
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Full Name (Last, First, Middle Initial) MR. B P PILLION Mailing Address 915 STOKE RD City VILLANOVA State PA Zip Code 19085-2023 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: R19780 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Payroll Deduction	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	6	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		3	0		2	0	0	6														
40.00																							
Name of Employer PACIFIC LIFE Occupation REGIONAL VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>360.00</td> </tr> </table>		360.00																					
360.00																							

B. Full Name (Last, First, Middle Initial) MS. JULIET A PINKERTON Mailing Address 2826 STUART MNR City HOUSTON State TX Zip Code 77082-3126 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: R19781 Amount of Each Receipt this Period <table border="1"> <tr> <td>30.00</td> </tr> </table> Payroll Deduction	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	6	30.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		3	0		2	0	0	6														
30.00																							
Name of Employer PACIFIC LIFE Occupation REGIONAL VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00																					
250.00																							

C. Full Name (Last, First, Middle Initial) MR. YVES F PINKOWITZ Mailing Address 20541 VIA EL TAJO City YORBA LINDA State CA Zip Code 92887-3202 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: R19782 Amount of Each Receipt this Period <table border="1"> <tr> <td>35.00</td> </tr> </table> Payroll Deduction	M	M	/	D	D	/	Y	Y	Y	Y	0	9		3	0		2	0	0	6	35.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		3	0		2	0	0	6														
35.00																							
Name of Employer PACIFIC LIFE Occupation VP FINANCIAL CONTROLS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>375.00</td> </tr> </table>		375.00																					
375.00																							

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td>105.00</td> </tr> </table>	105.00
105.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td></td> </tr> </table>	

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 62 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. THEODORE A PREMIER		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 20 MOLINO		Transaction ID: R19784	
City NEWPORT BEACH	State CA	Zip Code 92660-9116	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation VP COMM MORT PROD		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00		

Full Name (Last, First, Middle Initial) B. MS. CATHLEEN H PULFORD		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 33742 PEQUITO DR		Transaction ID: R19785	
City DANA POINT	State CA	Zip Code 92629-2034	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation REG RPTG & ANA CONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. MR. JOSEPH A PUM		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 33 BOLERO		Transaction ID: R19786	
City MISSION VIEJO	State CA	Zip Code 92692-5160	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation MGR INTERNAL AUDIT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	185.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 63 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. JAMES R RICE

Mailing Address 11 STILLWATER

City State Zip Code
IRVINE CA 92603-3426

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

Name of Employer Occupation
PACIFIC LIFE VP M FINANCIAL DISTRIBUTION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 960.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19790

Amount of Each Receipt this Period
110.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL S ROBB

Mailing Address 27481 VANTAGE CIR

City State Zip Code
SN JUAN CAPISTRANO CA 92675-1543

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

Name of Employer Occupation
PACIFIC LIFE EXEC VP RE INVEST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19792

Amount of Each Receipt this Period
250.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. GERALD W ROBINSON

Mailing Address 38347 N 104TH PL

City State Zip Code
SCOTTSDALE AZ 85262-5115

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

Name of Employer Occupation
PACIFIC LIFE EXEC VP ANNUITIES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2430.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19794

Amount of Each Receipt this Period
275.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	635.00
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 64 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. THOMAS M RONCE

Mailing Address 19 GLEN ELLEN

City IRVINE State CA Zip Code 92602-2002

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

Name of Employer PACIFIC LIFE Occupation VP & TAX COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19798

Amount of Each Receipt this Period
 30.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. CHAD A ROSS

Mailing Address 851 VIA BARQUERO

City SAN MARCOS State CA Zip Code 92069-7395

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

Name of Employer PACIFIC LIFE Occupation KEY ACCOUNT SUPR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19799

Amount of Each Receipt this Period
 30.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. DAVID K ROSUCK

Mailing Address 1222 REGENT DR

City MUNDELEIN State IL Zip Code 60060-2063

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

Name of Employer PACIFIC LIFE Occupation FIELD VICE PRES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19800

Amount of Each Receipt this Period
 30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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 65 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial) MR. JAMES M RUGGERIO		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 449 SAINT ANNES DR		Transaction ID: R19802	
City BIRMINGHAM	State AL	Zip Code 35244-3266	Amount of Each Receipt this Period 65.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR WHOLESALER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00		

B. Full Name (Last, First, Middle Initial) MS. CAROL E RUMSEY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 25221 SPINDLEWOOD		Transaction ID: R19803	
City LAGUNA NIGUEL	State CA	Zip Code 92677-1967	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation IMD OPS COMPLIANCE PROJ MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

C. Full Name (Last, First, Middle Initial) MR. ROBERT D RUSSELL		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 51202 EASTCHURCH		Transaction ID: R19804	
City CHAPEL HILL	State NC	Zip Code 27517-8340	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation AVP RE INVESTMENTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	165.00
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 66 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. SHERIL RYAN

Mailing Address 452 CAPISTRANO DR

City State Zip Code
PALM BEACH GARDENS FL 33410-4300

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

Name of Employer Occupation
PACIFIC LIFE SR VP DIR MKTG

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19805

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. PHILLIP L SALEMNO

Mailing Address 47 BETSY LN

City State Zip Code
AMBLER PA 19002-5737

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

Name of Employer Occupation
PACIFIC LIFE BROKERAGE MGR

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19806

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. CARRIE A SALVINO

Mailing Address 2394 WESTMINSTER AVE

City State Zip Code
COSTA MESA CA 92627-1560

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

Name of Employer Occupation
PACIFIC LIFE PROJECT MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19807

Amount of Each Receipt this Period
30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	80.00
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 67 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. PATRICIA A SANDBERG		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 2967 MICHELSON DR STE G206		Transaction ID: R19808	
City IRVINE	State CA	Zip Code 92612-0657	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation AVP INVEST CNSL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) B. MR. RICHARD J SCHINDLER		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 28792 APPLETREE		Transaction ID: R19809	
City MISSION VIEJO	State CA	Zip Code 92692-1089	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR VP SALES OFFICE MKTG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00		

Full Name (Last, First, Middle Initial) C. MR. S GENE SCHOFIELD		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 5 CARILLON PL		Transaction ID: R19812	
City FOOTHILL RANCH	State CA	Zip Code 92610-2612	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR VP OPERATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00		

SUBTOTAL of Receipts This Page (optional) ▶	275.00
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 68 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. KIMBERLY K SCHULTZ

Mailing Address 28392 CALLE PINON

City State Zip Code
SN JUAN CAPISTRANO CA 92675-5802

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19814

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. CATHY L SCHWARTZ

Mailing Address 87 PELICAN CT

City State Zip Code
NEWPORT BEACH CA 92660-2930

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

Name of Employer Occupation
PACIFIC LIFE AVP CREDIT ANALYSIS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19815

Amount of Each Receipt this Period
100.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. ALAN L SCHWITZGEBEL

Mailing Address 18612 MORONGO ST

City State Zip Code
FOUNTAIN VALLEY CA 92708-6208

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

Name of Employer Occupation
PACIFIC LIFE SR MGMT/PROF EMPLOYMT COORD

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19816

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	150.00
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 69 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. SONJA V SCOTT

Mailing Address 16 MCLEAN

City State Zip Code
IRVINE CA 92620-6207

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

Name of Employer Occupation
PACIFIC LIFE AVP COMPENSATION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19817

Amount of Each Receipt this Period
35.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. BRADLEY W SHERRELL

Mailing Address 2315 VIA ZAFIRO

City State Zip Code
SAN CLEMENTE CA 92673-3901

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

Name of Employer Occupation
PACIFIC LIFE AVP INFO TECHNOLOGY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19819

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. ELIZABETH H SKINNER

Mailing Address 57 CORAL LK

City State Zip Code
IRVINE CA 92614-5487

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

Name of Employer Occupation
PACIFIC LIFE AVP TECHNOLOGY

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19820

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	110.00
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 70 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. PENNY S SPARKS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 1661 UTAH CIR		Transaction ID: R19822	
City COSTA MESA	State CA	Zip Code 92626-2239	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation DIR COMPLIANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00		

Full Name (Last, First, Middle Initial) B. MR. MARVIN C STEAKLEY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 100 HARBOR WOODS PL		Transaction ID: R19823	
City NEWPORT BEACH	State CA	Zip Code 92660-7823	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR SOFTWARE ENG-CS (G)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00		

Full Name (Last, First, Middle Initial) C. MR. WILLIAM E STODDART		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 2413 W 123RD TER		Transaction ID: R19824	
City LEAWOOD	State KS	Zip Code 66209-1225	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation REG LIFE CONS (FVP)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	160.00
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 71 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. ROBERT S STREVELL

Mailing Address 1213 25TH ST

City State Zip Code
GALVESTON TX 77550-4539

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19825

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. CAROL R SUDBECK

Mailing Address 11 SOMMET

City State Zip Code
NEWPORT COAST CA 92657-0104

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

Name of Employer Occupation
PACIFIC LIFE VP CORP AUDIT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19826

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. THOMAS C SUTTON

Mailing Address 111 SHORECLIFF RD

City State Zip Code
CORONA DEL MAR CA 92625-2646

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

Name of Employer Occupation
PACIFIC LIFE CHRNM & CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3749.94

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19827

Amount of Each Receipt this Period
416.66

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	491.66
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 72 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. SAMUEL TANG		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 9 KEMPTON LN		Transaction ID: R19828	
City State Zip Code LADERA RANCH CA 92694-0226	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP PVT PLCMT	Aggregate Year-to-Date ▼ 270.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. RICHARD A TAUBE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 24081 NUTHATCH LN		Transaction ID: R19829	
City State Zip Code LAGUNA NIGUEL CA 92677-1382	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE AVP ACCUM PRODUCTS	Aggregate Year-to-Date ▼ 675.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR. PHILIP A TEETER		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 73 WOODHAVEN DR		Transaction ID: R19831	
City State Zip Code LAGUNA NIGUEL CA 92677-2819	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP ANN TECHNOLOGY	Aggregate Year-to-Date ▼ 825.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	205.00
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 73 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. ALICE P TERLECKY

Mailing Address 2130 CAMINO LAUREL

City State Zip Code
SAN CLEMENTE CA 92673-5650

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

Name of Employer Occupation
PACIFIC LIFE AVP NEW BUSINESS SVCS

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19832

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. CHERYL L TOBIN

Mailing Address 818 BAYWOOD DR

City State Zip Code
NEWPORT BEACH CA 92660-7146

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

Name of Employer Occupation
PACIFIC LIFE AVP INS CNSL

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19833

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. JOHN G TORELL

Mailing Address 355 S LORETTA DR

City State Zip Code
ORANGE CA 92869-4633

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

Name of Employer Occupation
PACIFIC LIFE VP ACCTG & RPTG

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 615.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19834

Amount of Each Receipt this Period
70.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	120.00
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 74 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. STEPHEN J TORETTO

Mailing Address 22862 ORENSE

City State Zip Code
MISSION VIEJO CA 92691-1723

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

Name of Employer Occupation
PACIFIC LIFE VP & INSURANCE COUNS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 345.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19835

Amount of Each Receipt this Period
45.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. KHANH T TRAN

Mailing Address 47 VERNAL SPRING

City State Zip Code
IRVINE CA 92603-0404

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

Name of Employer Occupation
PACIFIC LIFE EXEC VP CFO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3749.94

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19836

Amount of Each Receipt this Period
416.66

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. JULIE E TRASK

Mailing Address 181 S CRAIG DR

City State Zip Code
ORANGE CA 92869-3731

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

Name of Employer Occupation
PACIFIC LIFE MGR CUSTOMER SVC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19837

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	501.66
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 75 / 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. SUSAN L TULLY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 6929 N HAYDEN RD PMB 157		Transaction ID: R19838	
City SCOTTSDALE	State AZ	Zip Code 85250-7978	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation SR WHOLESALER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00		

Full Name (Last, First, Middle Initial) B. MR. EDDIE D TUNG		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address PO BOX 10386		Transaction ID: R19839	
City NEWPORT BEACH	State CA	Zip Code 92658-0386	Amount of Each Receipt this Period 55.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation AVP REGULATORY PROD ACCTG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) C. MR. CHRISTOPHER E ULRICH		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 152 TROFELLO LN		Transaction ID: R19840	
City ALISO VIEJO	State CA	Zip Code 92656-6257	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer PACIFIC LIFE	Occupation INTRNL WHLSLR SUPR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	140.00
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 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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. DOUGLAS J URATA		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 28202 MILLWOOD RD		Transaction ID: R19841	
City State Zip Code TRABUCO CANYON CA 92679-1210	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE SR PROJECT COORD	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR. CHRISTOPHER VAN MIERLO		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 400 EL VUELO		Transaction ID: R19842	
City State Zip Code SAN CLEMENTE CA 92672-7513	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE VP NATL ACCOUNTS	Aggregate Year-to-Date ▼ 435.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MS. CATHRYN L VAN WEY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006	
Mailing Address 41974 CARSON CT		Transaction ID: R19843	
City State Zip Code MURRIETA CA 92562-2254	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Payroll Deduction		
Name of Employer Occupation PACIFIC LIFE DIR BROKER DEALER SVCS	Aggregate Year-to-Date ▼ 270.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	105.00
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 77 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM K VINSON

Mailing Address 4113 CAPOBELLA

City State Zip Code
ALISO VIEJO CA 92656-1950

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

Name of Employer Occupation
PACIFIC LIFE ACTUARIAL CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19844

Amount of Each Receipt this Period
24.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. MELANIE G WAGNER

Mailing Address 1842 MOORPARK DR

City State Zip Code
BREA CA 92821-6045

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

Name of Employer Occupation
PACIFIC LIFE DIR HR & PR SVCS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19845

Amount of Each Receipt this Period
30.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. JOHN M WALDECK

Mailing Address 67 LAURELHURST DR

City State Zip Code
LADERA RANCH CA 92694-0204

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

Name of Employer Occupation
PACIFIC LIFE AVP RE UNDERWRITING

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 690.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19846

Amount of Each Receipt this Period
85.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	139.00
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 78 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. DARLENE A WALLACE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address PO BOX 2462		Transaction ID: R19848
City NEWPORT BEACH	State CA	Zip Code 92659-1462
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer PACIFIC LIFE	Occupation SR APPLICATIONS ANA	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. MS. KAREN S WALL		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 1811 RIVERFORD RD		Transaction ID: R19847
City TUSTIN	State CA	Zip Code 92780-3949
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer PACIFIC LIFE	Occupation DIR DATA WHSE & DB ADMIN	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. MR. MICHAEL J WAUTERS		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2006
Mailing Address 2942 COPA DE ORO DR		Transaction ID: R19851
City LOS ALAMITOS	State CA	Zip Code 90720-5207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer PACIFIC LIFE	Occupation AVP FIN REPTG & PLNG	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional) ▶	105.00
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 79 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. NANCY A WEBB

Mailing Address 36 BLACK HAWK

City IRVINE State CA Zip Code 92603-0311

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

Name of Employer PACIFIC LIFE Occupation VP FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19852

Amount of Each Receipt this Period
 100.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. KEITH C WERSCHKE

Mailing Address 25252 NORTHRUP DR

City LAGUNA HILLS State CA Zip Code 92653-5223

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

Name of Employer PACIFIC LIFE Occupation AVP ACTUARIAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19853

Amount of Each Receipt this Period
 50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. JOHN WHITE

Mailing Address 32122 VIA CARLOS

City SN JUAN CAPISTRANO State CA Zip Code 92675-3927

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

Name of Employer PACIFIC LIFE Occupation VP INTERNAL WHLSLNG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19855

Amount of Each Receipt this Period
 65.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	215.00
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 80 / 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. KAREN S WILEY

Mailing Address 2410 MIRA MONTE COURT

City State Zip Code
TUSTIN CA 92782-9000

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

Name of Employer Occupation
PACIFIC LIFE DIR COMMUNICATIONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19856

Amount of Each Receipt this Period
35.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MR. RICHARD M WILKES

Mailing Address 7124 HAWKSBEARD DR

City State Zip Code
WESTERVILLE OH 43082-9577

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19857

Amount of Each Receipt this Period
100.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. KATHLEEN N WILSON

Mailing Address 2525 JUANITA WAY

City State Zip Code
LAGUNA BEACH CA 92651-4018

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

Name of Employer Occupation
PACIFIC LIFE SR PROJECT ANALYST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19858

Amount of Each Receipt this Period
30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	165.00
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 81 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. JEFFREY R WILT

Mailing Address 1 DORCHESTER DR

City State Zip Code
SUSSEX NJ 07461-4918

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

Name of Employer Occupation
PACIFIC LIFE FIELD VICE PRES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19859

Amount of Each Receipt this Period
55.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. JANE K WONG-HSU

Mailing Address 1121 EBBTIDE RD

City State Zip Code
CORONA DEL MAR CA 92625-1402

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

Name of Employer Occupation
PACIFIC LIFE VP QUANTITATIVE STRAT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19860

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MR. KYLE R WOODDELL

Mailing Address 137 KNIPPENBERG DR

City State Zip Code
SAINT LOUIS MO 63129-5013

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

Name of Employer Occupation
PACIFIC LIFE SR WHOLESALER

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19861

Amount of Each Receipt this Period
75.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	180.00
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 82 / 95
	<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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MR. ALAN D WUEST

Mailing Address 32 COLORIDO

City State Zip Code
RCHO STA MARGARITA CA 92688-3413

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

Name of Employer Occupation
PACIFIC LIFE DIR FACILITIES SUPPORT

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19862

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
MS. ROBIN S YONIS

Mailing Address 8 CASTLEBAR

City State Zip Code
IRVINE CA 92618-4043

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

Name of Employer Occupation
PACIFIC LIFE VP VAR REGULATORY COMPL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19863

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
MS. KATHARINE B YOUNG

Mailing Address 18647 SANTA ISADORA ST

City State Zip Code
FOUNTAIN VALLEY CA 92708-6232

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

Name of Employer Occupation
PACIFIC LIFE AVP STMT & VALTN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 660.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2006

Transaction ID: R19864

Amount of Each Receipt this Period
75.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	150.00
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 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"/> 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)
Pacific Life Insurance Company Political Action Committee

A. Full Name (Last, First, Middle Initial)
MS. MARIA ZAMBELLI-DOUGHERTY

Mailing Address 525 LOMBARDY RD

City DREXEL HILL State PA Zip Code 19026-1330

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

Name of Employer PACIFIC LIFE Occupation SUPR OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: R19865

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	25.00
TOTAL This Period (last page this line number only)	▶	15681.81

**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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. Barney Frank for Congress Committee		Transaction ID: D1591 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 38 Ivy Street, S.E.		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Contrib: Barney Frank (MA-4-D) Candidate Name Barney Frank Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 04		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ben Nelson for U.S. Senate Committee		Transaction ID: D1581 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 420 C Street, NE		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Contrib: Ben Nelson (NE-D) Candidate Name Ben Nelson Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Buck McKeon for Congress		Transaction ID: D1579 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 2875 Towerview Road, Suite 1000		Amount of Each Disbursement this Period 1000.00
City Herndon State VA Zip Code 20171	Purpose of Disbursement Contrib: Howard P. McKeon (CA-25-R) Candidate Name Howard P. McKeon Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 25		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. Cardin for Congress		Transaction ID: D1602 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address P.O. Box 21093		Amount of Each Disbursement this Period 5000.00
City Catonsville State MD Zip Code 21228	Category/ Type	
Purpose of Disbursement Ctrb: Ben Cardin (MD-3-D)		
Candidate Name Benjamin L. Cardin		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Chafee for Senate		Transaction ID: D1573 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO Box 7329		Amount of Each Disbursement this Period 3000.00
City Warwick State RI Zip Code 02887	Category/ Type	
Purpose of Disbursement Contrib: Lincoln Chafee (RI-R)		
Candidate Name Lincoln Chafee		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Chafee for Senate		Transaction ID: D1603 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address PO Box 7329		Amount of Each Disbursement this Period 5000.00
City Warwick State RI Zip Code 02887	Category/ Type	
Purpose of Disbursement Ctrb: Lincoln Chafee (RI-R)		
Candidate Name Lincoln Chafee		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	13000.00
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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. DAKPAC		Transaction ID: D1601 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 607 14th Street NW, Suite 800		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20006	Category/ Type	
Purpose of Disbursement Contr. DAKPAC		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ensign for Senate		Transaction ID: D1593 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address Post Office Box 26568		Amount of Each Disbursement this Period 5000.00
City Las Vegas State NV Zip Code 89126	Category/ Type	
Purpose of Disbursement Contrib: John E. Ensign (NV-R)		
Candidate Name John E. Ensign		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FRIENDS OF BLANCHE LINCOLN		Transaction ID: D1595 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 301 4th Street, NE, 2nd Floor		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Contrib: Blanche Lincoln (AR-D)		
Candidate Name Blanche Lambert Lincoln		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	12000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. Feinstein for Senate		Transaction ID: D1597 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address 420 C Street, NE		Amount of Each Disbursement this Period 5000.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement Contrib: Dianne Feinstein (CA-D)	Category/ Type	
Candidate Name Dianne Feinstein	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District:			

Full Name (Last, First, Middle Initial) B. Friends of Congressman George Miller		Transaction ID: D1592 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address 301 4th Street, NE, Suite 202		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement Contrib: George Miller (CA-7-D)	Category/ Type	
Candidate Name George Miller	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 07			

Full Name (Last, First, Middle Initial) C. Friends of Joe Baca		Transaction ID: D1575 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6	
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 2000.00	
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Contr.	Category/ Type	
Candidate Name Joseph Baca	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 43			

SUBTOTAL of Disbursements This Page (optional) ▶	8000.00
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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. Friends of Joe Lieberman		Transaction ID: D1570 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 236 Massachusetts Ave NE Suite 206		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement Contrib: Joseph I. Lieberman (CT-I)	<input type="checkbox"/> Category/ Type	
Candidate Name Joseph I. Lieberman		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of John Boehner		Transaction ID: D1574 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 7808 Cincinnati Dayton Road, Suite		Amount of Each Disbursement this Period 2500.00
City West Chester State OH Zip Code 45069		
Purpose of Disbursement Contrib: John A. Boehner (OH-8-R)	<input type="checkbox"/> Category/ Type	
Candidate Name John A. Boehner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of John Tanner		Transaction ID: D1585 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 236 Massachusetts Ave., NE Suite 508		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement Contrib: John S. Tanner (TN-8-D)	<input type="checkbox"/> Category/ Type	
Candidate Name John S. Tanner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. Friends of Mary Landrieu		Transaction ID: D1577 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 10 G Street, NE, Suite 470		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Contrib: Mary L. Landrieu (LA-D)		
Candidate Name Mary L. Landrieu		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gary Miller for Congress		Transaction ID: D1571 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 721 S Brea Canyon Road Suite 7		Amount of Each Disbursement this Period 2000.00
City Diamond Bar State CA Zip Code 91789	Category/ Type	
Purpose of Disbursement Contrib: Gary G. Miller (CA-42-R)		
Candidate Name Gary G. Miller		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 42	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. HOOPSPAC		Transaction ID: D1589 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address P.O. Box 3498		Amount of Each Disbursement this Period 2500.00
City Portland State OR Zip Code 97208	Category/ Type	
Purpose of Disbursement Contr. HoopsPAC		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
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)

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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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. Hatch Election Committee		Transaction ID: D1596 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 1480		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20013	Category/ Type	
Purpose of Disbursement Contrib: Orrin G. Hatch (UT-R)		
Candidate Name Orrin G. Hatch		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Matsui for Congress		Transaction ID: D1600 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 1738		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95812	Category/ Type	
Purpose of Disbursement Ctrb: Doris Matsui (CA-5-D)		
Candidate Name Doris Matsui		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mike Thompson for Congress		Transaction ID: D1586 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 236 Massachusetts Avenue, NE Suite 508		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Contrib: Mike Thompson (CA-1-D)		
Candidate Name Mike Thompson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. New Republican Majority Fund		Transaction ID: D1578 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 201 North Union Street, Suite 530		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22314	Category/ Type	
Purpose of Disbursement Contrib: New Republican Majority Fund		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. People for English		Transaction ID: D1590 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6
Mailing Address PO Box 1940		Amount of Each Disbursement this Period 4000.00
City Erie State PA Zip Code 16507	Category/ Type	
Purpose of Disbursement Contrib: Phil English (PA-3-R)		
Candidate Name Phil English		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Pomeroy for Congress		Transaction ID: D1572 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address PO Box 75214		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20013-5214	Category/ Type	
Purpose of Disbursement Contrib: Earl Pomeroy (ND-1-D)		
Candidate Name Earl Pomeroy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. Re-Elect Nancy Johnson to Congress Committee		Transaction ID: D1576 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address PO Box 1986		Amount of Each Disbursement this Period 5000.00
City New Britain State CT Zip Code 06050	Category/ Type	
Purpose of Disbursement Contrib: Nancy L. Johnson (CT-5-R)		
Candidate Name Nancy L. Johnson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Richard E Neal for Congress Committee		Transaction ID: D1580 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 76 Magnolia Terrace		Amount of Each Disbursement this Period 2500.00
City Springfield State MA Zip Code 01108	Category/ Type	
Purpose of Disbursement Contrib: Richard E. Neal (MA-2-D)		
Candidate Name Richard E. Neal		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. SCHIFF FOR CONGRESS		Transaction ID: D1598 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 38 Ivy Street, S.E.		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Contrib: Adam B. Schiff (CA-29-D)		
Candidate Name Adam B. Schiff		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 29	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s)
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Detailed Summary Page

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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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. Searchlight Leadership Fund		Transaction ID: D1604 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6
Mailing Address 422 C Street, NE, Lower Level		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Ctrb: Searchlight Leadership Fund (DC-D)		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Sherman for Congress		Transaction ID: D1583 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address P.O. Box 75214		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20013	Category/ Type	
Purpose of Disbursement Contrib: Brad Sherman (CA-27-D)		
Candidate Name Brad Sherman		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Stabenow for U.S. Senate		Transaction ID: D1584 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 122 Maryland Avenue, NE		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Contrib: Debbie Stabenow (MI-D)		
Candidate Name Debbie Stabenow		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	12000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. Stephanie Tubbs Jones for US Congress		Transaction ID: D1599 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 918 Beverly Drive		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22302	Category/ Type	
Purpose of Disbursement Ctrb: Stephanie Tubbs Jones (OH-11-D)		
Candidate Name Stephanie Tubbs Jones		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. TOMPAC		Transaction ID: D1582 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address P.O. Box 16488		Amount of Each Disbursement this Period 2000.00
City Arlington State VA Zip Code 22215	Category/ Type	
Purpose of Disbursement Contrib: Together for Our Majority PAC		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Voinovich for Senate Committee		Transaction ID: D1587 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 865 Macon Alley		Amount of Each Disbursement this Period 2000.00
City Columbus State OH Zip Code 43206	Category/ Type	
Purpose of Disbursement Contrib: George V. Voinovich (OH-R)		
Candidate Name George V. Voinovich		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Washington Senate Victory Fund

Mailing Address 1848 West Lake Ave., North

City State Zip Code
Seattle WA 98109

Purpose of Disbursement
Contrib: Washington Senate Victory

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D1594

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)