

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 284  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Curtis L. Eskew Jr.

Mailing Address 1680 Keely Lane

City State Zip Code  
Sarasota FL 34232-3061

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

Name of Employer  
New York Life Insurance Company

Occupation  
Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.35

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2011

**Transaction ID:** PR11015764

Amount of Each Receipt this Period  
166.67

P/R Deduction (\$166.67 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Mark F. Bailey

Mailing Address 309 Redwing Lane

City State Zip Code  
St. Augustine FL 32080-7981

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

Name of Employer  
New York Life Insurance Company

Occupation  
Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2011

**Transaction ID:** PR11065764

Amount of Each Receipt this Period  
250.00

P/R Deduction (\$250.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Bruce A. Holliday

Mailing Address 8 Mar Vista Circle

City State Zip Code  
Pensacola FL 32507-3485

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

Name of Employer  
New York Life Insurance Company

Occupation  
Agent

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.35

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2011

**Transaction ID:** PR11085764

Amount of Each Receipt this Period  
41.67

P/R Deduction (\$41.67 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **458.34**

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