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

American Council of Life Insurers PAC

ADDRESS (number and street) ▼

101 Constitution Avenue, NW

Suite 700 West

Check if different than previously reported. (ACC)

Washington | DC | 20001 - 2133

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ — STATE ▲ — ZIPCODE ▲

C00147066

3. IS THIS REPORT — X 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)	X 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 11 01 2003 through 11 30 2003

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: Richard I. Klein

Signature of Treasurer: Electronically Filed by Richard I. Klein — Date 12 18 2003

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
American Council of Life Insurers PAC

Report Covering the Period: From: 11 01 2003 To: 11 30 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2003		61278.63
(b) Cash on Hand at Begining of Reporting Period	69210.63	
(c) Total Receipts (from Line 19)	9311.80	320416.23
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	78522.63	381694.86
7. Total Disbursements (from Line 31)	39600.00	342772.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38922.63	38922.63
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	

X 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
American Council of Life Insurers PAC

Report Covering the Period: From: 11 01 2003 To: 11 30 2003

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		
(i) Itemized (use Schedule A)	3728.18	
(ii) Unitemized	2272.88	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	6001.06	257870.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	3300.00	12700.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ▶	9301.06	270570.58
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	49700.00
17. Other Federal Receipts (Dividends, Interest, etc.)	10.74	145.65
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))	9311.80	320416.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9311.80	320416.23

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	38000.00	329597.43
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	4400.00
(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	4400.00
29. Other Disbursements	1600.00	8774.80
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))	39600.00	342772.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	39600.00	342772.23

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	9301.06	270570.58
34. Total Contribution Refunds (from Line 28(d))	0.00	4400.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9301.06	266170.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Ms. Angela J. Arnett
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 821.62
Date of Receipt: 11 26 2003
Transaction ID: R18535
Amount of Each Receipt this Period: 46.32
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. Michael J. Bartholomew
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 415.00
Date of Receipt: 11 26 2003
Transaction ID: R18537
Amount of Each Receipt this Period: 50.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. C. Bryan Cox
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Legislative Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 495.65
Date of Receipt: 11 26 2003
Transaction ID: R18542
Amount of Each Receipt this Period: 46.06
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ **143.38**

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

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Ms. Linda H. Cunningham
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Director, Conference Development
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 662.95
Date of Receipt: 11 26 2003
Transaction ID: R18543
Amount of Each Receipt this Period: 87.54
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ms. Joanne S. Daly
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Asst PAC Treasurer
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1650.00
Date of Receipt: 11 26 2003
Transaction ID: R18544
Amount of Each Receipt this Period: 150.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ms. Kimberly Dorgan
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President, Federal Relatio
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2864.62
Date of Receipt: 11 26 2003
Transaction ID: R18547
Amount of Each Receipt this Period: 260.42
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 497.96

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

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Mr. J. Bruce Ferguson
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President, State Relations
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 882.21
Date of Receipt: 11 26 2003
Transaction ID: R18549
Amount of Each Receipt this Period: 80.20
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. Morris Goff
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Assistant Vice President, Tax
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 538.97
Date of Receipt: 11 26 2003
Transaction ID: R18551
Amount of Each Receipt this Period: 59.58
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. James D. Hall
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 330.00
Date of Receipt: 11 26 2003
Transaction ID: R18552
Amount of Each Receipt this Period: 30.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 169.78

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Ms. Carrie A. Hartgen
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Legislative Director
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 233.88
Date of Receipt: 11 26 2003
Transaction ID: R18553
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ms. Shawn Hausman
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Vice President, Public Affairs
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 331.33
Date of Receipt: 11 26 2003
Transaction ID: R18554
Amount of Each Receipt this Period: 30.12
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. Gary E. Hughes
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Vice President & General Counse
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2924.23
Date of Receipt: 11 26 2003
Transaction ID: R18555
Amount of Each Receipt this Period: 265.84
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 315.96

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Michael J. Hunter
Mailing Address 101 Consitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Executive Vice President & COO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1750.00
Date of Receipt: 11 26 2003
Transaction ID: R18556
Amount of Each Receipt this Period: 250.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. Christopher L. Jacobs
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Chief Information Liasion
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 458.71
Date of Receipt: 11 26 2003
Transaction ID: R18557
Amount of Each Receipt this Period: 41.70
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Frank Keating
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: President & CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1750.00
Date of Receipt: 11 26 2003
Transaction ID: R18559
Amount of Each Receipt this Period: 250.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ **541.70**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Mr. Richard I. Klein
Mailing Address 101 Constitution Avenue, NW
Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Treasurer
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 11 26 2003
Transaction ID: R18560
Amount of Each Receipt this Period: 80.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ms. Linda L. Lanam
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Vice President, Annuities
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 660.00
Date of Receipt: 11 26 2003
Transaction ID: R18561
Amount of Each Receipt this Period: 60.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. David M. Leifer
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 842.36
Date of Receipt: 11 26 2003
Transaction ID: R18562
Amount of Each Receipt this Period: 79.96
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 219.96

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Daniel J. Mahoney
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Sr. Vice President, Public Affairs and
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1074.96
Date of Receipt: 11 26 2003
Transaction ID: R18585
Amount of Each Receipt this Period: 179.16
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Mr. John W. Mangan, CEBS
Mailing Address 2650 SW Montgomery Drive
City: Portland State: OR Zip Code: 97201
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Director, Pacific Region
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 11 26 2003
Transaction ID: R18586
Amount of Each Receipt this Period: 50.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Ms. Roberta B. Meyer
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel, Risk Classification
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 220.00
Date of Receipt: 11 26 2003
Transaction ID: R18587
Amount of Each Receipt this Period: 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 249.16

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Brenda Nation
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 650.00
Date of Receipt: 11 26 2003
Transaction ID: R18566
Amount of Each Receipt this Period: 100.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ms. Barbara A. Price
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Director, Legislative & Regulatory Inf
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 305.55
Date of Receipt: 11 26 2003
Transaction ID: R18570
Amount of Each Receipt this Period: 40.00
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. Thomas E. Rettmann
Mailing Address 836 Overbrook Drive
City: Vestal State: NY Zip Code: 13850
FEC ID number of contributing federal political committee: C
Name of Employer: Columbian Mutual Life Insurance Compan
Occupation: President & CEO
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1125.00
Date of Receipt: 11 10 2003
Transaction ID: R18252
Amount of Each Receipt this Period: 1125.00
Check

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1285.00

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Ms. Kathryn A. Ricard
Mailing Address 101 Constitution Avenue, NW
Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Vice President, Retirement & Pensions
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 11 26 2003
Transaction ID: R18572
Amount of Each Receipt this Period: 50.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Ms. Theresa Sorota
Mailing Address 101 Constitution Avenue, NW
Suite 700 West
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 644.82
Date of Receipt: 11 26 2003
Transaction ID: R18578
Amount of Each Receipt this Period: 58.62
Payroll Deduction

C.
Full Name (Last, First, Middle Initial)
Mr. Kristopher W. Wackerman
Mailing Address 101 Constitution Avenue, NW
Suite 700
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Council of Life Insurers
Occupation: Programmer & Project Manager
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 226.64
Date of Receipt: 11 26 2003
Transaction ID: R18580
Amount of Each Receipt this Period: 56.66
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶ 165.28

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 27
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Mr. David R. Wentworth

Mailing Address 101 Constitution Avenue, NW
Suite 700 West

City: Washington
State: DC
Zip Code: 20001

FEC ID number of contributing federal political committee: C

Name of Employer: American Council of Life Insurers
Occupation: Vice President, Research

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 660.00

Date of Receipt: 11 26 2003
Transaction ID: R18581
Amount of Each Receipt this Period: 60.00
Payroll Deduction

B.
Full Name (Last, First, Middle Initial)
Debra K. West

Mailing Address 101 Constitution Avenue, NW
Suite 700 West

City: Washington
State: DC
Zip Code: 20001

FEC ID number of contributing federal political committee: C

Name of Employer: American Council of Life Insurers
Occupation: Senior Counsel & Director, Southern Re

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 600.00

Date of Receipt: 11 26 2003
Transaction ID: R18582
Amount of Each Receipt this Period: 100.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ▶	160.00
TOTAL This Period (last page this line number only) ..... ▶	3728.18

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 27
(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A. Full Name (Last, First, Middle Initial)
Modern Woodmen of America PAC

Mailing Address Mississippi River and 17th Street

City: Rock Island
State: IL
Zip Code: 61201

FEC ID number of contributing federal political committee. C C00184382

Name of Employer

Occupation

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
3300.00

Date of Receipt
11 13 2003

Transaction ID: R18481

Amount of Each Receipt this Period
3300.00

Check

SUBTOTAL of Receipts This Page (optional) ..... ▶	3300.00
TOTAL This Period (last page this line number only) ..... ▶	3300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 27
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial)
Prudential Securities
Mailing Address 1130 Connecticut Avenue, NW
11th Floor
City: Washington State: DC Zip Code: 20036
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 15.38

Date of Receipt: 11 28 2003
Transaction ID: R18585
Amount of Each Receipt this Period: 1.50
Account Interest

B.
Full Name (Last, First, Middle Initial)
Sun Trust Bank
Mailing Address 445 11th Street, NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 43.14

Date of Receipt: 11 28 2003
Transaction ID: R18587
Amount of Each Receipt this Period: 2.97
Account Interest

C.
Full Name (Last, First, Middle Initial)
SunTrust Bank
Mailing Address 445 11th Street, NW
City: Washington State: DC Zip Code: 20004
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 87.13

Date of Receipt: 11 28 2003
Transaction ID: R18586
Amount of Each Receipt this Period: 6.27
Account Interest

SUBTOTAL of Receipts This Page (optional) ..... ▶ **10.74**

TOTAL This Period (last page this line number only) ..... ▶ **10.74**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Barrett for Congress
Mailing Address: P.O. Box 869
City: Westminster State: SC Zip Code: 29693
Purpose of Disbursement: Contr.
Candidate Name: Gresham Barrett
Category/Type
Office Sought: X House / Senate / President
State: SC District: 03
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D9304
Date of Disbursement: 11/19/2003
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): Blue Dog PAC
Mailing Address: 227 Massachusetts Ave, NE Suite 101
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr. Blue Dog PAC (-D)
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2003 Primary / General / X Other (specify)
Other
Transaction ID: D9303
Date of Disbursement: 11/19/2003
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Blue Grass Committee
Mailing Address: 400 N. Capitol Street Suite 485
City: Washington State: DC Zip Code: 20001
Purpose of Disbursement: Contr. Bluegrass Committee (DC-R)
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2003 Primary / General / X Other (specify)
Other
Transaction ID: D9300
Date of Disbursement: 11/19/2003
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 4000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Buyer for Congress
Mailing Address: P.O. Box 712
City: Monticello State: IN Zip Code: 47960
Purpose of Disbursement: Contr.
Candidate Name: Steve Buyer
Category/Type
Office Sought: X House / Senate / President
State: IN District: 04
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D9295
Date of Disbursement: 11/19/2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): CHRIS PAC
Mailing Address: 236 Massachusetts Avenue, NE Suite 310
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr. CHRIS PAC (DC-D)
Candidate Name:
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2003 Primary / General / X Other (specify) Other
Transaction ID: D9302
Date of Disbursement: 11/19/2003
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): Chafee US Senate
Mailing Address: P.O. Box 7329
City: Warwick State: RI Zip Code: 02887
Purpose of Disbursement: Contr.
Candidate Name: Lincoln D. Chafee
Category/Type
Office Sought: House / X Senate / President
State: RI District:
Disbursement For: 2006 X Primary / General / Other (specify)
Transaction ID: D9291
Date of Disbursement: 11/19/2003
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 4000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Evan Bayh Committee
Mailing Address: 420 C Street, NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr.
Candidate Name: Evan Bayh
Category/Type
Office Sought: House / X Senate / President / State: IN District:
Disbursement For: 2004 / X Primary / General / Other (specify)
Transaction ID: D9286
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): FRONTLINE Democrats
Mailing Address: 499 South Capitol Street, SW
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contr. FRONTLINE Democrats (DC-D)
Candidate Name:
Category/Type
Office Sought: House / Senate / President / State: District:
Disbursement For: 2003 / Primary / General / X Other (specify) Other
Transaction ID: D9288
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial): First State PAC
Mailing Address: 428 C Street, NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr. First State PAC (DC-D)
Candidate Name:
Category/Type
Office Sought: House / Senate / President / State: District:
Disbursement For: 2003 / Primary / General / X Other (specify) Other
Transaction ID: D9290
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 9500.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Friends for Harry Reid
Mailing Address: 422 C Street, NE, Lower Level
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr.
Candidate Name: Harry Reid
Category/Type
Office Sought: House / X Senate / President / State: NV District:
Disbursement For: 2004 / X Primary / General / Other (specify)
Transaction ID: D9297
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Friends of Chris Dodd 2004
Mailing Address: 236 Massachusetts Ave, NE, Suite 209
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr.
Candidate Name: Christopher J. Dodd
Category/Type
Office Sought: House / X Senate / President / State: CT District:
Disbursement For: 2004 / X Primary / General / Other (specify)
Transaction ID: D9292
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Catering by Windows
Mailing Address: 1125 North Royal Street
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: In-Kind
Candidate Name: Ernest J. Istook, Jr.
Category/Type
Office Sought: X House / Senate / President / State: OK District: 05
Disbursement For: 2004 / X Primary / General / Other (specify)
Transaction ID: D9285
Date of Disbursement: 11 / 17 / 2003
Amount of Each Disbursement this Period: 1486.19

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 3486.19

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Friends of Ernest Istook
Mailing Address: 3323 N. Washington Blvd.
City: Arlington State: VA Zip Code: 22201
Purpose of Disbursement: Contr.
Candidate Name: Ernest J. Istook, Jr.
Category/Type
Office Sought: X House / Senate / President
State: OK District: 05
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D9299
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 513.81

B.
Full Name (Last, First, Middle Initial): Friends of Jeb Hensarling
Mailing Address: PO Box 820504
City: Dallas State: TX Zip Code: 75382
Purpose of Disbursement: Contr.
Candidate Name: Jeb Hensarling
Category/Type
Office Sought: X House / Senate / President
State: TX District: 05
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D9305
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): Hooley for Congress
Mailing Address: PO Box 2050
City: Salem State: OR Zip Code: 97308
Purpose of Disbursement: Contr.
Candidate Name: Darlene Hooley
Category/Type
Office Sought: X House / Senate / President
State: OR District: 05
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D9289
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 3513.81

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)
[ ] 21b [ ] 22 [x] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Jon Kyl for U.S. Senate
Mailing Address: 507 Capitol Court, NE, Suite 100
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr.
Candidate Name: Jon Kyl
Category/Type
Office Sought: House / X Senate / President — State: AZ District:
Disbursement For: 2006 — X Primary / General / Other (specify)
Transaction ID: D9287
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): Linder for Congress
Mailing Address: P. O. Box 4026
City: Duluth State: GA Zip Code: 30096
Purpose of Disbursement: Contr.
Candidate Name: John Linder
Category/Type
Office Sought: X House / Senate / President — State: GA District: 07
Disbursement For: 2004 — X Primary / General / Other (specify)
Transaction ID: D9293
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): Louise Slaughter Re-Election Committee
Mailing Address: PO Box 366
City: Fairport State: NY Zip Code: 14450
Purpose of Disbursement: Contr.
Candidate Name: Louise M. Slaughter
Category/Type
Office Sought: X House / Senate / President — State: NY District: 28
Disbursement For: 2004 — X Primary / General / Other (specify)
Transaction ID: D9301
Date of Disbursement: 11 / 19 / 2003
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 3000.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Lucas for Congress
Mailing Address: 499 South Capitol Street, SW, Suite 103
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Contr.
Candidate Name: Ken Lucas
Category/Type
Office Sought: X House / Senate / President
State: KY District: 04
Disbursement For: 2004 X Primary / General / Other (specify)
Transaction ID: D9294
Date of Disbursement: 11/19/2003
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): NRSC
Mailing Address: 425 Second Street, NE
City: Washington State: DC Zip Code: 20002
Purpose of Disbursement: Contr. NRSC (-R)
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2003 Primary / General / X Other (specify)
Other
Transaction ID: D9308
Date of Disbursement: 11/19/2003
Amount of Each Disbursement this Period: 7500.00

C.
Full Name (Last, First, Middle Initial): PRYCE Project
Mailing Address: 2042 Peach Orchard Drive, Suite 316
City: Falls Church State: VA Zip Code: 22043
Purpose of Disbursement: Contr. Pryce Project (OH-R)
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: 2003 Primary / General / X Other (specify)
Other
Transaction ID: D9309
Date of Disbursement: 11/19/2003
Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 9500.00

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

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

Transaction ID: D9266
Date of Disbursement
11 / 19 / 2003

Mailing Address Attn: Ekern and Company
1310 G Street, NW, Suite 600

City: Washington
State: DC
Zip Code: 20005

Amount of Each Disbursement this Period
1000.00

Purpose of Disbursement
Contr.

Candidate Name
Jo Ann Emerson

Category/Type

Office Sought: X House / Senate / President
State: MO District: 08

Disbursement For: 2004
X Primary / General
Other (specify)

SUBTOTAL of Disbursements This Page (optional) ..... ▶	1000.00
TOTAL This Period (last page this line number only) ..... ▶	38000.00

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A.
Full Name (Last, First, Middle Initial): Bill Keffer Campaign
Mailing Address: 203 Lake Ridge Village #116
City: Dallas State: TX Zip Code: 75238
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D9315
Date of Disbursement: 11/24/2003
Amount of Each Disbursement this Period: 300.00
Non-federal contribution to Bill R. Keffer (TX-107-R)

B.
Full Name (Last, First, Middle Initial): Joe Driver Campaign
Mailing Address: 201 S. Glenbrook
City: Garland State: TX Zip Code: 75040
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D9271
Date of Disbursement: 11/13/2003
Amount of Each Disbursement this Period: 300.00
Non-federal contribution to Joe Driver (TX-113-R)

C.
Full Name (Last, First, Middle Initial): John Carona Campaign
Mailing Address: P. O. Box 800035
City: Dallas State: TX Zip Code: 75380-0035
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: House / Senate / President / State: District
Disbursement For: Primary / General / Other (specify)
Transaction ID: D9270
Date of Disbursement: 11/13/2003
Amount of Each Disbursement this Period: 500.00
Non-federal contribution to John J. Carona (TX-16-R)

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1100.00**

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

A. Full Name (Last, First, Middle Initial)
Kim Brimer Campaign

Mailing Address 1600 W. 7th Street
Suite 650

City: Ft. Worth
State: TX
Zip Code: 76102

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D9269
Date of Disbursement: 11 / 13 / 2003

Amount of Each Disbursement this Period: 500.00

Non-federal contribution to Kim Brimer (TX-10-R)

SUBTOTAL of Disbursements This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	1600.00