

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

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

FOR LINE NUMBER: PAGE 89 OF 365  
(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**

Full Name (Last, First, Middle Initial)  
**A. Mr. Kevin R. Johnson**

Mailing Address 4001 W 105th Street Apt. 227

City Overland Park	State KS	Zip Code 66207-4053
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FEC ID number of contributing federal political committee. **C**

Name of Employer New York Life Insurance Company	Occupation Agent
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
08 / 31 / 2013

**Transaction ID : PR18858920**

Amount of Each Receipt this Period  
250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)  
**B. Mr. C. L. Meigs**

Mailing Address 20040 Southeast Grandview Avenue

City Pratt	State KS	Zip Code 67124-0000
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FEC ID number of contributing federal political committee. **C**

Name of Employer New York Life Insurance Company	Occupation Agent
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
666.72

Date of Receipt  
08 / 31 / 2013

**Transaction ID : PR18878920**

Amount of Each Receipt this Period  
83.34

P/R Deduction (\$83.34 Monthly)

Full Name (Last, First, Middle Initial)  
**C. Mr. John Mc Kenna Jr.**

Mailing Address 110 Churn Creek Drive

City Bozeman	State MT	Zip Code 59715-7872
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FEC ID number of contributing federal political committee. **C**

Name of Employer New York Life Insurance Company	Occupation Agent
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
08 / 31 / 2013

**Transaction ID : PR18918920**

Amount of Each Receipt this Period  
150.00

P/R Deduction (\$150.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	483.34
<b>TOTAL</b> This Period (last page this line number only).....▶	