REPORT OF RECEIPTS AND DISBURSEMENTS
FOR OTHER THAN AN AUTHORIZED COMMITTEE
(SUMMARY PAGE)

1. NAME OF COMMITTEE (in full) NATIONAL ASSOCIATION OF LIFE UNDERWRITERS' POLITICAL ACTION COMMITTEE

ADDRESS (number and street) Check if different than previously reported
1922 F STREET, NW

CITY, STATE and ZIP CODE
WASHINGTON, DC 20006

2. FEC IDENTIFICATION NUMBER
C 0000 5249

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report
[ ] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[ ] January 31 Year End Report
[ ] July 31 Mid Year Report (Non-election Year Only)

Monthly Report Due On:

[ ] February 20	[ ] June 20	[ ] October 20
[ ] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

[ ] Termination Report

Twelfth day report preceeding election on _____ in the State of _____

(b) Is this report an Amendment? YES (NO)

Thirtieth day report following the General Election on Nov. 8, 1994 in the State of _____

9 4 0 3 9 4 7 1 6 6 7

SUMMARY

	COLUMN A This Period	COLUMN B Calendar YTD
5. Covering Period 20 Oct. 1994 through 28 Nov. 1994		
6. (a) Cash on Hand January 1, 1994		430,378.26
(b) Cash at Beginning of Reporting Period	361,294.66	
(c) Total Receipts (from line 19)	70,326.35	887,481.41
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	431,621.01	1,317,859.67
7. Total Disbursements (from Line 30)	137,566.36	1,023,805.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	294,054.65	294,054.65
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	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-376-3120

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
JOSEPH E. DILLON, ASSISTANT TREASURER

Signature of Treasurer
Joseph E. Dillon

Date
12/08/94

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

FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X (revised 9/93)

NAME OF COMMITTEE: NATIONAL ASSOCIATION OF LIFE UNDERWITERS' POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM 29 Oct. 1994 TO 28 Nov. 1994

	COLUMN A This Period	COLUMN B Calendar YTD
I. RECEIPTS		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A) ... (add i and ii)	16,327.20	97,459.74
ii. Unitemized	53,999.15	776,948.76
iii. Total	70,326.35	874,408.50
b. Political Party Committees		
c. Other Political Committees (such as PAC's)		
d. Total Contributions ... (add a iii, b and c)	70,326.35	874,408.50
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	5,000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	8,072.91
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts ... (add 11d, 12, 13, 14, 15, 16, 17, and 18)	70,326.35	887,481.41
20. Total Federal Receipts ... (subtract line 18 from line 19)	70,326.35	887,481.41
II. DISBURSEMENTS		
21. Operating Expenditures:		
a. Shared Federal/Non Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non - Federal Share		
b. Other Federal Operating Expenditures	66.36	24,205.02
c. Total Operating Expenditures ... (Add a i, aii, and b)	66.36	24,205.02
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	137,500.00	999,600.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PAC's)		
d. Total Contribution Refunds ... (Add a, b, and c)	0.00	0.00
29. Other Disbursements		
30. Total Disbursements ... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	137,566.36	1,023,805.02
31. Total Federal Disbursements ... (subtract line 21 a ii from line 30)	137,566.36	1,023,805.02
III. Net Contributions/Operating Expenditures		
32. Total Contributons (other than loans) (from line 11d)	70,326.35	874,408.50
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	70,326.35	874,408.50
35. Total Federal Operating Expenditures ... (add 21 a i and 21 b)	66.36	24,205.02
36. Offsets to Operating Expenditures (from line 15)		
37 Net Operating Exenditures ... (subtract line 35 from 35)	66.36	24,205.02

9 4 0 3 9 4 7 1 5 6 3

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 27

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald R. Allen, CLU, ChFC 210 N. Main St., Suite 100 Wheaton, IL 60187-5328	Self-employed	11/11/94	22.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $	288.00

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey Leonard Allison 400 Massasoit Ave., #200 East Providence, RI 02914-2021	Self-employed	11/17/94	62.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $	287.50

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen D. Andersen 7431 "O" Street Lincoln, NE 68510-2444	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $	386.40

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert B. Anderson, CLU P. O. Box 820 Johnson City, TN 37605-0820	Self-employed	11/11/94	30.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $	342.00

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth Eugene Barnes, CLU 5500 Atherton St. S-310 Long Beach, CA 90815-4017	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $	231.00

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lewis H. Beers, CLU 2000 PGA Blvd., #2200 Palm Beach Grdns, FL 33408-2713	Self-employed	10/31/94	150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $	300.00

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terry Bemiss 2901-B N. Lorraine Ste-D Hutchinson, KS 67502-4200	Self-employed	11/11/94	27.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $	289.80

SUBTOTAL of Receipts This Page (optional)	355.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 27

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
V. Stanley Benfell, CLU, ChFC 1290 Broadway Denver, CO 80203-5699	Self-employed	11/22/94	150.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $	250.00

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David B. Bianchi, CLU P. O. Box 10358 Reno, NV 89510-0358	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $	218.40

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack D. Birnbaum, CLU 2333 Ponce De Leon Blvd #700 Coral Gables, FL 33134-5418	Self-employed	11/11/94	18.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $	258.00

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Paul Bishopp, CLU, ChFC West 705 7th Avenue Spokane, WA 99204	Self-employed	11/11/94	25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $	250.00

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene W. Bluemly, Jr. 3535 Grandview Pkwy., #370 Birmingham, AL 35243-1931	Self-employed	10/24/94	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $	250.00

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Blandy Boocock 6001 N Nauni Valley Dr Paradise Valley, AZ 85253-5134	Self-employed	11/11/94	8.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $	585.40

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary A. Bramon, CLU, ChFC 890 Lamont Ave Ste-201 Novato, CA 94945-4100	Self-employed	11/11/94	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent	Aggregate Year-to-Date $	467.50

SUBTOTAL of Receipts This Page (optional)	515.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
S. Lujuana Bull, CLU, LUTCF 5260 N Palm Ave #205 Fresno, CA 93704-2210	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 231.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William D. Burke, CLU, CFP 303 Second St., Ste-660 San Francisco, CA 94107-1366	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 231.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee Butler, Sr., CLU P. O. Box 554 Statesboro, GA 30459-0554	Self-employed	11/17/94	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 200.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert D. Buxbaum, CLU, ChFC 2 University Office Park P.O. Box 9086 Waltham, MA 02254-9086	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 231.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe D. Byars, CLU, LUTCF 218 No. 12th St Ft Smith, AR 72901-2713	Self-employed	11/11/94	36.80
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 282.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David D. Cameron, LUTCF P. O. Box 645 Rupert, ID 83350-0645	Self-employed	11/11/94	25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 243.60		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary A. Cannady, LUTCF P. O. Box 799 Walterboro, SC 29488-0799	Self-employed	11/04/94	52.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 647.50		

SUBTOTAL of Receipts This Page (optional)	287.30
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arcadio Casillas 488 Madison Ave. Flr-7 New York, NY 10022-5702	Self-employed	11/18/94	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent Aggregate Year-to-Date > $ 500.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Yi-Cheng Chang 6215 Western Ave. Clarendon Hills, IL 60514-1870	Self-employed	11/04/94	12.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 420.50		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence A. Chargin 5260 N. Palm Avenue, Suite 205 Fresno, CA 93704-2210	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 462.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gail Choate 1500 NW 49th St #402 Fort Lauderdale, FL 33309-3722	Self-employed	10/21/94	600.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 660.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James R. Christensen, Jr. 440 Regency Pkwy Dr #250 Omaha, NE 68114-3742	Self-employed	10/28/94	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 255.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John O. Clark, CLU, ChFC P. O. Box 26338 St. Louis, MO 63136	Self-employed	11/23/94	63.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 379.70		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas R. Clark, CLU, ChFC 2700 Westown Parkway West Des Moines, IA 50266-1411	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 264.60		

SUBTOTAL of Receipts This Page (optional)	1339.00
TOTAL This Period (last page this line number only)	

94034713572

SCHEDULE A ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Richard E. Cooke, CLU, ChFC PO Box 1702 Boise, ID 83701-1702 Receipt For: Primary General Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 258.85	21.00
B. Leonard M. Coris, CLU, ChFC 800 South Street Waltham, MA 02154-1439 Receipt For: Primary General Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/17/94 300.00	100.00
C. L. M. Courtney, CLU, ChFC, LUTCF 3511 Haney's Br Rd Huntington, WV 25704-9114 Receipt For: Primary General Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 231.00	21.00
D. R. Scott Culbertson, CFP 2023 Cato Drive State College, PA 16801-2765 Receipt For: Primary General Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 238.80	25.20
E. Sam J. Cunningham, CLU, ChFC 2495 Campus Drive Irvine, CA 92715-1502 Receipt For: Primary General Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/18/94 11/18/94 287.50	250.00 37.50
F. Vincent M. D'Addona, CLU, ChFC 130 William Street, 6th Floor New York, NY 10038-3882 Receipt For: Primary General Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 467.50	42.50
G. Steven M. Daniel, CLU, ChFC Box 430 Butte, MT 59703-0430 Receipt For: Primary General Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 448.84	21.00

SUBTOTAL of Receipts This Page (optional)	518.20
TOTAL This Period (last page this line number only)	

9 4 0 3 9 4 7 1 6 7 3

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 27

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National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James A. Davis, CLU 701 Cherry Street, Suite 200 Chattanooga, TN 37402-1939	Self-employed	11/07/94	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert W. Decoursey, CLU 555 E City Line Ave #900 Bala Cynwyd, PA 19004-1105	Self-employed	11/11/94	25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	277.20	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louis P. Dicerbo, II, CLU, ChFC 360 Lexington Avenue New York, NY 10017-6502	Self-employed	10/20/94 11/07/94	500.00 45.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	545.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David S. Dickenson, II, CLU ChFC 1901 East 13th Street Suite 506 Cleveland, OH 44114-3583	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	462.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William H. Dodd, CLU 71 Broadway 14th Floor New York, NY 10006-2601	Self-employed	11/09/94	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	650.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anthony J. Domino, Jr. CLU, ChFC 1025 Westchester Ave. White Plains, NY 10604-3508	Self-employed	11/18/94	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
H. James Dodds 732 Tantallon Dr Fort Washington, MD 20744-7032	Self-employed	10/31/94	38.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	577.50	

SUBTOTAL of Receipts This Page (optional)	1400.70
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Joseph E. Dunn, LUTCF PO Box 14595 Grand Forks, ND 58208-4595 Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date > $	11/11/94 299.25	25.00
B. Daniel Eddleman 1065 East Hillsdale Blvd Suite 230 Foster City, CA 94404-1614 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $	11/11/94 462.00	42.00
C. Donald A. Eichelberger, CLU 209 East San Marnan Drive Waterloo, IA 50702-5839 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $	11/11/94 529.20	42.00
D. C. Robert Elrod, CLU, LUTCF 3874 E 250 S Wabash, IN 46992-8947 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $	11/21/94 212.50	12.50
E. Ronald L. Engel, CLU, ChFC 1042 West Hedding #200 San Jose, CA 95126-1291 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $	11/11/94 231.00	21.00
F. Gerald E. Ferrier, LUTCF 1117 Ellis Street #C-D Bellingham, WA 98225-5203 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $	11/11/94 273.00	42.00
G. Jeffery L. Ferrier, LUTCF 1117 Ellis St. #C & D Bellingham, WA 98225-5203 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $	11/11/94 462.00	42.00

SUBTOTAL of Receipts This Page (optional)	226.50
TOTAL This Period (last page this line number only)	

9 4 5 3 9 4 7 1 6 7 5

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 8 OF 27

FOR LINE NUMBER 11(a)(1)

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)
National Association of Life Underwriters Political Action Committee

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Alan R. Finkelstein, CLU 120 West 45th Street, Suite 602 New York, NY 10036-4041	Self-employed	11/14/94	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	500.00
B. Full Name, Mailing Address and ZIP Code Thomas F. Flournoy, Jr., CLU P. O. Box 1013 Macon, GA 31201	Name of Employer: Self-employed	Date (month, day, year): 11/11/94	Amount of Each Receipt this Period: 22.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	247.50
C. Full Name, Mailing Address and ZIP Code Steven M. Frank, CLU 21700 Oxnard St #1160 Woodland Hills, CA 91367-7302	Name of Employer: Self-employed	Date (month, day, year): 11/11/94	Amount of Each Receipt this Period: 42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	420.00
D. Full Name, Mailing Address and ZIP Code Lowell R. Frantz, CLU Greenwood Med Ctr P. O. Box M. Millerstown, PA 17062-0278	Name of Employer: Self-employed	Date (month, day, year): 10/24/94	Amount of Each Receipt this Period: 90.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	330.00
E. Full Name, Mailing Address and ZIP Code James E. Frazier, LUTCF P. O. Box 22 Ursa, IL 62376-0022	Name of Employer: Self-employed	Date (month, day, year): 10/28/94	Amount of Each Receipt this Period: 100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	220.00
F. Full Name, Mailing Address and ZIP Code Gary R. Froid, CLU, ChFC P.O. Box 3642 St. Petersburg, FL 33731-3642	Name of Employer: Self-employed	Date (month, day, year): 11/11/94	Amount of Each Receipt this Period: 50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	554.40
G. Full Name, Mailing Address and ZIP Code Peter Fulchiron, CLU, LUTCF 405 Enfrente Dr #100 Novato, CA 94949	Name of Employer: Self-employed	Date (month, day, year): 11/11/94	Amount of Each Receipt this Period: 42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	462.00

SUBTOTAL of Receipts This Page (optional) 596.90

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 9 OF 27

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Del D. Gab, CLU Box 2094 Dickinson, ND 58602-2094 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $ 238.98	11/11/94	21.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Elaine Gallagher 813 East Gate Drive Mt. Laurel, NJ 08054-1238 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $ 201.60	11/11/94	25.20
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mary Pat Gallivan 8300 Norman Center Drive Suite 1270 Minneapolis, MN 55437-1033 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $ 740.00	11/11/94	84.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Charles E. Garrity, CLU, ChFC 9977 Valley View Road Suite 220 Eden Prairie, MN 55344-3586 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $ 700.00	11/04/94	700.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Seymour Geller, CFP, ChFC, CLU 11 West 42nd St., 29th Flr. New York, NY 10036-8002 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $ 525.00	10/31/94	125.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Harold A. Gillet, LUTCF P. O. Box 2907 Missoula, MT 59806-2907 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $ 288.40	11/11/94	12.50
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Patrick J. Goodenough, CLU 873 Santa Cruz Avenue, Suite 202 Menlo Park, CA 94025-4629 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date > $ 400.00	11/23/94	250.00

SUBTOTAL of Receipts This Page (optional) 1217.70

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

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SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger Goren, CLU, ChFC 261 Madison Ave., 12th Flr. New York, NY 10016-2393	Self-employed	11/18/94	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 650.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George K. Greene, CLU 333 7th Avenue, 3rd Floor New York, NY 10001-5096	Self-employed	11/18/94	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 200.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Gutman 10 East 40th St., Ste-1307 New York, NY 10016-0200	Self-employed	11/11/94	21.25
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 233.75		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas H. Hagen First Bank Bldg Suite 610 Great Falls, MT 59401	Self-employed	11/11/94	4.25
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 323.32		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen A. Hamilton, CLU, ChFC 1001 Howard Ave Ste-3200 New Orleans, LA 70113-2087	Self-employed	11/11/94	21.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 236.50		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce M. Hankins, CLU, ChFC 2340 Detroit Avenue Maumee, OH 43537-3766	Self-employed	11/28/94	125.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 250.00		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karl Erik Hansen, CLU, ChFC 419 N. Shoreline Blvd. Mountain View, CA 94043-4605	Self-employed	11/11/94	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 467.50		

SUBTOTAL of Receipts This Page (optional)	814.50
TOTAL This Period (last page this line number only)	

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alex Hanson, CLU, ChFC P. O. Box 1138 Portsmouth, NH 03802	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 267.12		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Lee Harlow, CLU 10600 Arrowhead Dr. #310 Fairfax, VA 22030-7306	Self-employed	10/24/94	20.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 270.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard M. Harrison, CLU, ChFC 6 Becker Farm Road Roseland, NJ 07068-1735	Self-employed	10/27/94	360.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 360.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William E. Hazel, CLU, ChFC 3250 W. Big Beaver Rd #327 Troy, MI 48084-2902	Self-employed	11/11/94	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 467.50		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terry K. Headley, LUTCF 8990 West Dodge Road #205 Omaha, NE 68114-3391	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 491.40		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Melvin R. Hebert, CLU, ChFC 1150 Foothill Blvd., Suite L La Canada, CA 91011	Self-employed	11/11/94	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 467.50		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis L. Helgeson, CLU, LUTCF 2001 8th Avenue SE Minot, ND 58701-5099	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent Aggregate Year-to-Date > $ 221.75		

SUBTOTAL of Receipts This Page (optional)	570.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER: 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald E. Hicks G-6020 West Pierson Rd. Flushing, MI 48433	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $ 462.00	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward C. Hiers, CLU, ChFC 18 Constitution Drive Bedford, NH 03110-6000	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $ 246.12	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard L. Hill, CLU, ChFC P. O. Box 30275 Lincoln, NE 68503-0275	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $ 491.40	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
H. Thomas Hollinger, CLU, ChFC 220 Continental Dr Ste-315 Newark, DE 19713-4304	Self-employed	10/28/94	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $ 430.00	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James R. Holt, Jr., ChFC, CLU P.O. Box 838 Logansport, IN 46947-0838	Self-employed	11/11/94	8.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $ 213.50	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John P. Huntington, CLU, ChFC 21 College Hill Road Suite 300 Warwick, RI 02886-2745	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $ 529.20	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jon C. Hutchison, LUTCF 1555 River Park Dr #105 Sacramento, CA 95815-4603	Self-employed	11/11/94 11/28/94	21.00 -21.00
Receipt For ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $ 222.50	

SUBTOTAL of Receipts This Page (optional)	255.50
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER: 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William V. Irons, CLU, LUTCF 469 Centerville Rd #203 Warwick, RI 02886-4328	Self-employed Occupation: Insurance agent	11/11/94	22.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	283.50	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul R. Jeffers, CLU, ChFC P.O. Box 941 Carmichael, CA 95609-0941	Self-employed Occupation: Insurance agent	11/11/94	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	480.00	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Richard Jones, LUTCF P. O. Box 4886 Macon, GA 31208-4886	Self-employed Occupation: Insurance agent	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	231.00	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George N. Justice, CLU P.O. Box 308 Cedar Rapids, IA 52406-0308	Self-employed Occupation: Insurance agent	11/11/94	4.25
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	454.40	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Kageleiry Box 823 Dover, NH 03821-0823	Self-employed Occupation: Insurance agent	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	246.12	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terry M. Kaltenbach, CLU, ChFC 1455 Frazee Rd #515 San Diego, CA 92108-4378	Self-employed Occupation: Insurance agent	11/11/94	25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	267.00	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen M. Karp, CLU, ChFC 400 Hillside Avenue Needham, MA 02194-1226	Self-employed Occupation: Insurance agent	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	231.00	

SUBTOTAL of Receipts This Page (optional)	157.25
TOTAL This Period (last page this line number only)	

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SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Jordon R. Katz, CLU 105 Revere Drive, Suite G Northbrook, IL 60062-1594 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $	11/04/94 250.00	250.00
B. Michael C. Keenan, CLU, ChFC 5750 Old Orchard Rd. #300 Skokie, IL 60077-1095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $	11/25/94 250.00	250.00
C. Michael L. Kerley 9424 Talisman Drive Vienna, VA 22182-3419 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $	10/31/94 250.24	19.25
D. Robert H. Kerrigan, Jr. CLU ChFC 888 West Sixth Street Los Angeles, CA 90017-2703 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $	11/28/94 600.00	100.00
E. Gershen Konikow, CLU, ChFC #1 Stephen Drive P.O. Box 1546 Englewood Cliffs, NJ 07632-0546 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $	11/04/94 500.00	500.00
F. Richard A. Koob, CLU, ChFC 626 West Moreland Blvd. Waukesha, WI 53188-2433 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $	11/11/94 268.80	21.00
G. Michael J. Kraft, CLU 70 Washington St. #200 Oakland, CA 94607-3738 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance agent Aggregate Year-to-Date > $	11/11/94 467.50	42.50

SUBTOTAL of Receipts This Page (optional)	1182.75
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full): National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Stephen A. Kramer, CLU 370 Lexington Avenue New York, NY 10017-6503 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/10/94 500.00	125.00
B. James H. Krueger, CLU, ChFC, MSM 4321 West College Ave. Ste 395 Appleton, WI 54914-3901 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 268.80	21.00
C. Larry M. Lambert, CLU, CFP 3780 Kilroy Airport Way Suite 510 Long Beach, CA 90806-2459 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/01/94 375.00	125.00
D. Norman G. Levine, CLU, ChFC 1 California Street #2900 San Francisco, CA 94111-5468 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/23/94 750.00	125.00
E. Leon L. Levy, CLU Broad and Walnut St 4th Fl Philadelphia, PA 19102 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	10/31/94 480.00	360.00
F. Bruce C. Lichtenberg, LUTCF 830 Hillview Ct. #255 Milpitas, CA 95035 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 11/28/94 420.00	42.00 -42.00
G. Lawrence E. Lounds, CLU G-3526 Miller Rd. Ste-B Flint, MI 48507-1236 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 462.00	42.00

SUBTOTAL of Receipts This Page (optional) 798.00

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

9 4 0 3 9 4 7 1 6 3

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Peter Lyons, CLU, ChFC 800 South Street, Suite 660 Watermill Center Waltham, MA 02154-1439	Self-employed	11/11/94	33.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	368.50
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael J. Main 100 Century Ctr. Ct #300 San Jose, CA 95112-4512	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	378.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Waylon T. Mangum, LUTCF 2712 Chamberlayne Avenue Richmond, VA 23222-3504	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	231.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John B. Martell, CLU 901 West 10th Street Topeka, KS 66604-1101	Self-employed	11/11/94	25.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	277.20
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Darren Scott Mason, CLU, ChFC 30092 Ivy Glenn #230 Laguna Niguel, CA 92677-5019	Self-employed	11/11/94	25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	300.50
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene G. McCarthy, CLU, ChFC 380 Madison Avenue 22nd Floor New York, NY 10017-2585	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	378.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William L. McCulley, LUTCF 2608 Kirkwood Hwy. Wilmington, DE 19805-4994	Self-employed	11/17/94	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date $	250.00

SUBTOTAL of Receipts This Page (optional) 438.70

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Rick L. McDavid P.O. Box 943 Kingsport, TN 37662-0943 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 231.00	11/11/94	25.00
B. Charles E. McIntyre, CLU, ChFC 2101 W. Commercial Blvd. #5100 Ft Lauderdale, FL 33309-7111 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 600.00	11/04/94	600.00
C. Robert F. McKown, CLU, ChFC 2020 Commonwealth Avenue Newton, MA 02166-2006 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 467.50	11/11/94	42.50
D. Peter A. McMahon 100 Corporate Pky #118 Amherst, NY 14226-1293 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 256.00	11/11/94	21.00
E. Robert T. Merchen, CLU, ChFC 7002 Hodgson Memorial Drive Savannah, GA 31406-1517 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 242.00	11/11/94	22.00
F. Dennis R. Merideth, CLU, ChFC 5151 E Broadway Ste-750 Tucson, AZ 85711-3734 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 520.80	11/11/94	42.00
G. David A. Middaugh, CLU P. O. Box 2543 Fargo, ND 58108-2543 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $ 581.50	11/11/94	50.00

SUBTOTAL of Receipts This Page (optional)	802.50
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Jack D. Minner, CLU, ChFC 701 Market Street, Suite 1000 St. Louis, MO 63101-1869	Self-employed Insurance agent $ 240.00	10/26/94	120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James W. Monteverde, CLU, ChFC 710 Fifth Avenue Pittsburgh, PA 15219-3000	Self-employed Insurance agent $ 554.40	11/11/94	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
C. Jerome Moore 500 S Main St #900 Orange, CA 92668-4533	Self-employed Insurance agent $ 200.00	11/11/94	10.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Raymond H. Moran, CLU, ChFC 1 Commerce Sq. Suite #2250 Memphis, TN 38103	Self-employed Insurance agent $ 422.10	11/11/94	33.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Steven G. Mulder, LUTCF 3275 W. 4th Street P.O. Box 1230 Waterloo, IA 50704-1230	Self-employed Insurance agent $ 529.20	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lynn H. Naden 333 S. Green Bay Rd. Waukegan, IL 60085-4859	Self-employed Insurance agent $ 537.60	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James F. O'Connell, CLU S. 400 Jefferson Ste-304 Spokane, WA 99204	Self-employed Insurance agent $ 247.50	11/11/94	22.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional) 320.40

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Timothy J. O'Connor, CLU P.O. Box 1061 Grand Island, NE 68802-1061	Self-employed	11/10/94	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	200.00	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rae Lee Olson 419 North Shoreline Blvd. Mountain View, CA 94043-4605	Self-employed	11/11/94	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	467.50	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene J. Pender, CLU 3678 N. Peachtree Rd. #200 Atlanta, GA 30341-2345	Self-employed	11/18/94	100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	200.00	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John B. Peyton, CLU, ChFC One Commerce Square, Suite 2250 Memphis, TN 38103	Self-employed	11/11/94	4.25
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	473.55	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cody H. Phillips, JD, CLU, ChFC P.O. Box 5160 Chapel Hill, NC 27514	Self-employed	11/11/94	46.75
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	344.85	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
B. Randall Pierson P.O. Box 2158 Salinas, CA 93902-2158	Self-employed	11/11/94	50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	550.00	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
R. Jan Pinney, CLU, ChFC, CPCU 1750 Howe Avenue Suite 100 Sacramento, CA 95825-3368	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Occupation: Insurance agent		
	Aggregate Year-to-Date > $	462.00	

SUBTOTAL of Receipts This Page (optional)	385.50
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code James D. Pittman, CLU, ChFC 222 S.W. Columbia, Suite 900 Portland, OR 97201-6693 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date > $ 574.50	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 25.00
B. Full Name, Mailing Address and ZIP Code William Poe, Jr., CLU 3207 Willowcreek Rd #B Portage, IN 46368-5013 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date > $ 231.00	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 21.00
C. Full Name, Mailing Address and ZIP Code Jack L. Polley, LUTCF 500 W. 20th Suite #101 Hutchinson, KS 67502-4173 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date > $ 277.20	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 25.20
D. Full Name, Mailing Address and ZIP Code Ralph Prescott, CLU, LUTCF, ChFC 601 South Park Street Dahlonega, GA 30533-1827 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date > $ 231.00	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 21.00
E. Full Name, Mailing Address and ZIP Code John S. Pugh, CLU, MSFS 1100 Laskin Road Virginia Beach, VA 23451-5210 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date > $ 275.00	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 25.00
F. Full Name, Mailing Address and ZIP Code Richard L. Rawlings, CLU, ChFC 650 Elm St. #350 Manchester, NH 03101-2502 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date > $ 470.00	Date (month, day, year) 10/31/94	Amount of Each Receipt this Period 50.00
G. Full Name, Mailing Address and ZIP Code William F. Richmond, CLU P. O. Box 50 Jackson, MI 49201-1914 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date > $ 200.00	Date (month, day, year) 11/07/94	Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)	267.20
TOTAL This Period (last page this line number only)	

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SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Robert B. Ritter, Jr. 2274 Camino Ramon San Ramon, CA 94583-1353 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/10/94 500.00	500.00
B. D. David Russell, CLU, ChFC P. O. Box 15468 Sarasota, FL 34277-1468 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 277.20	25.20
C. Daniel L. Rust, LUTCF P.O. Box 1335 Bozeman, MT 59771-1335 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 505.14	8.50
D. Robert L. Sanditz, CLU 9393 W. 110th Street #500 Overland Park, KS 66210-1406 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	10/28/94 450.00	150.00
E. G. Douglas Schellman, CLU, ChFC P. O. Box 9969 Colorado Springs, CO 80932-0969 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 231.00	21.00
F. James D. Schulz, CLU, ChFC 7431 "O" Street Lincoln, NE 68510-2444 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 491.40	42.00
G. Mark B. Schwendeman 103 Putnam Street Marietta, OH 45750-2924 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 231.00	21.00

SUBTOTAL of Receipts This Page (optional)	767.70
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Walter J. Scott, Jr., CLU 240 Algoma Blvd. Oshkosh, WI 54902-1600 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 537.60	42.00
B. Vince R. Settineri, RHU 420 Lake Cook Rd. #111 Deerfield, IL 60015-4914 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 310.80	42.00
C. Arthur D. Shankman, CLU 101 Eisenhower Parkway Second Floor Roseland, NJ 07068-1028 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/21/94 11/21/94 360.00	120.00 240.00
D. Stephen C. Shaw, CLU 3730 Mt. Diablo Blvd., Suite 220 Lafayette, CA 94549-3613 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	10/24/94 500.00	500.00
E. Richard S. Simpson, CLU, ChFC 1736 Jefferson Street Napa, CA 94559-1703 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 275.00	25.00
F. David Skjerven, LUTCF P. O. Box 9799 Fargo, ND 58106-9799 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 583.75	50.00
G. Paul M. Smith, Sr., CLU 5101 College Blvd., #100 Leawood, KS 66211-1614 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 561.00	51.00

SUBTOTAL of Receipts This Page (optional)	1070.00
TOTAL This Period (last page this line number only)	

9 4 0 5 9 4 7 1 5 9 0

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard S. Smith, CLU 44 Woods Lane Los Altos, CA 94024-7153	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $ 462.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Sneed 1305 Franklin Street #400 Oakland, CA 94612-3223	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $ 231.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wilbur W. St. Clair, Jr., CLU 11221-B Lockwood Drive Silver Spring, MD 20901-4554	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $ 264.60	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis N. Stansbury, CLU, ChFC 200 Eel River Avenue Logansport, IN 46947-3125	Self-employed	11/11/94	8.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $ 223.50	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Juliana M. Steverson, CLU P.O. Box 600842 San Diego, CA 92160-0842	Self-employed	11/11/94	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $ 231.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frederick H. Stitt, CLU 175 West Jackson Boulevard Suite 1831 Chicago, IL 60604-2801	Self-employed	11/07/94	200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $ 200.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David L. Stratton, CLU, ChFC 8300 Briarwood Ste-B Anchorage, AK 99518-3331	Self-employed	11/11/94	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance agent	Aggregate Year-to-Date > $ 420.00	

SUBTOTAL of Receipts This Page (optional)	355.50
TOTAL This Period (last page this line number only)	

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SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)
National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code Steven M. Stratton 1999 S. Bascomave #300 Campbell, CA 95008 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date $ 243.50	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 21.00
B. Full Name, Mailing Address and ZIP Code William E. Sunderlage, LUTCF P.O. Box 1407 Woodstock, IL 60098-1407 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date $ 537.60	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 42.00
C. Full Name, Mailing Address and ZIP Code John J. Tarditi, Jr., FLMI, LUTCF 118 Ellis Street Haddonfield, NJ 08033-1601 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date $ 495.00	Date (month, day, year) 10/24/94	Amount of Each Receipt this Period 195.00
D. Full Name, Mailing Address and ZIP Code John M. Taylor, CLU, ChFC P. O. Box 7546 Columbus, GA 31908-7546 Receipt For ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date $ 231.00	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 21.00
E. Full Name, Mailing Address and ZIP Code Robert L. Tedoldi, CLU, ChFC P. O. Box H Vernon, CT 06066-1369 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date $ 462.00	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 42.00
F. Full Name, Mailing Address and ZIP Code Gregory M. Telge, CLU, ChFC 1779 Elm Street Manchester, NH 03104-2952 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date $ 246.12	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 21.00
G. Full Name, Mailing Address and ZIP Code Jacob N. Temkin 400 Westminster Street Providence, RI 02903-3215 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Self-employed Occupation Insurance agent Aggregate Year-to-Date $ 218.40	Date (month, day, year) 10/31/94 11/11/94	Amount of Each Receipt this Period -21.00 21.00

SUBTOTAL of Receipts This Page (optional)	342.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER: 11(a)(i)

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NAME OF COMMITTEE (In Full)
National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. John L. Thomas, CLU, ChFC 450 Country Club Rd #330 Eugene, OR 97401-6053 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 231.00	21.00
B. Gary L. Tipton, LUTCF 418 E. Rosser Ave. #350 Bismarck, ND 58501-4046 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 387.73	8.50
C. Raymond F. Truncellito, CLU 66 Hanover St 301 Manchester, NH 03101-2230 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 246.12	21.00
D. Adam Varrenti, Jr., CLU, ChFC 114 W. Gay Street #200 West Chester, PA 19380-2923 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 277.20	25.20
E. Sylvia J. Walker, LUTCF, CPIW 805 Terrace Drive Newport News, VA 23601-2240 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	10/31/94 11/11/94 251.00	20.00 21.00
F. David R. Watson, CLU, ChFC One Liberty Place, Suite 680 Philadelphia, PA 19103 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 442.20	40.20
G. Thomas L. Webb, CLU, ChFC 4356 Commercial St. SE Salem, OR 97302-3914 Receipt For: Primary / General / Other (specify)	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 462.00	42.00

SUBTOTAL of Receipts This Page (optional) 198.90

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

9 4 0 3 9 4 7 1 6 9 2

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full): National Association of Life Underwriters Political Action Committee

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. William T. Whitmore, Jr., LUTCF P. O. Box 4748 Virginia Beach, VA 23454-0748 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 251.00	21.00
B. Lawrence Wiener, CLU 1506 N. E. 162nd Street N. Miami Beach, FL 33162-4716 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/08/94 240.00	120.00
C. Alvin N. Williams, LUTCF 332 East 75th Street Chicago, IL 60619-2219 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 448.80	42.00
D. Gary W. Williams PO Box 397 Vinton, VA 24179-0397 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	10/31/94 11/04/94 211.00	21.00 140.00
E. Robert M. Wilson, CLU P. O. Box 4607 South Bend, IN 46634-4607 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 218.50	8.50
F. Larry J. Winkelnake, CLU, ChFC P. O. Bx 26909 Milwaukee, WI 53226-0909 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/11/94 268.80	21.00
G. Barry L. Wolfe, CLU P. O. Box 4091 Woodland Hills, CA 91365-4091 Receipt For: Primary / General / Other (specify):	Self-employed Insurance agent Aggregate Year-to-Date $	11/21/94 362.50	50.00

SUBTOTAL of Receipts This Page (optional) 423.50

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

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SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER: 11(a)(1)

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NAME OF COMMITTEE (In Full): National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code Mark L. Yavornitzki, CAE 38 Sheridan Avenue Albany, NY 12210-2714	Name of Employer Self-employed	Date (month, day, year) 11/11/94	Amount of Each Receipt this Period 21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance agent Aggregate Year-to-Date > $ 206.00		
B. Full Name, Mailing Address and ZIP Code Roger G. Zener, CLU 2514 N.E. 28th Ave Portland, OR 97212-4916	Name of Employer Self-employed	Date (month, day, year) 10/25/94	Amount of Each Receipt this Period 100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance agent Aggregate Year-to-Date > $ 217.50		
C. Full Name, Mailing Address and ZIP Code Robert M. Zinn, CLU 1279 Route 46 East Parsippany, NJ 07054-4904	Name of Employer Self-employed	Date (month, day, year) 11/07/94	Amount of Each Receipt this Period 600.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Insurance agent Aggregate Year-to-Date > $ 600.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	721.00
TOTAL This Period (last page this line number only)	16327.20

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER: 23

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Callahan For Congress PO Box 7641 Mobile, AL 36607	Sonny Callahan AL-1 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Everett For Congress Committee PO Box 1460 Enterprise, AL 36331	R. Terry Everett AL-2 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Tom Bevill PO Box 1453 Jasper, AL 35501	Tom Bevill AL-4 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Bud Cramer for Cgs PO Box 2621 Huntsville, AL 35804	Bud Cramer AL-5 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Hilliard for Congress P.O. Box 11385 Birmingham, AL 35202	Earl Hilliard AL-7 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Thornton For Congress PO Box 826 Little Rock, AR 72203	Ray Thornton AR-2 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Hutchinson For Congress PO Box 933 Bentonville, AR 72712	Tim Hutchinson AR-3 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Jay Bradford Congressional Cmt PO Box 6467 Pine Bluff, AR 71611	Jay T. Bradford AR-4 $10,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$2,500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Wally Herger For Congress PO Box 2223 Marysville, CA 95901	Wally Herger CA-2 $2,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$8,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Doolittle For Congress 11954 Prospect Hill Dr Gold River, CA 95670	John Doolittle CA-4 $2,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$2,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Baker For Congress 1825 Mt. Diablo Blvd. Box 4544 Walnut Creek, CA 94596	Bill Baker CA-10 $2,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Richard Pombo for Congress 7549 West Linne Road Tracy, CA 95376	Richard Pombo CA 11 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Condit For Congress Box 1710 Modesto, CA 95354	Gary A. Condit CA-18 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dooley For Congress 711 N. Court Street, Suite E Visalia, CA 93291	Calvin Dooley CA-20 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Thomas Campaign Comm. Box 395 Bakersfield, CA 93302	William M. Thomas CA-21 $6,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$2,500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gallegly For Congress Box 3789 Simi Vallley, CA 93093	Elton Gallegly CA-23 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Buck McKeon for Congress 18960 Soledad Canyon Road Saugus, CA 91351	Howard P. McKeon CA-25 $3,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$1,500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ed Royce For Congress PO Box 6765 Fullerton, CA 92634	Ed Royce CA-39 $500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$500.00

SUBTOTAL of Disbursements This Page (optional)	$10,500.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Rohrabacher for Congress Box 2158 Palos Verdes, CA 90274	Dana Rohrabacher CA 45 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/21/94	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Chris Cox Congressional Comm. Box 8088-C Newport Beach, CA 92658	C. Christopher Cox CA-47 $1,500.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/21/94	$1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Ron Packard Box 1549 Carlsbad, CA 92008	Ronald C. Packard CA-48 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/21/94	$500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Comm. to Elect Duke Cunningham 737 3rd Avenue, Suite E Chula Vista, CA 92010	Randy Cunningham CA-51 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/21/94	$500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Hunter for Congress Box 1036 Coronado, CA 92118	Duncan L. Hunter CA-52 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/21/94	$500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Joel Hefley for Congress P.O. Box 62268 Colorado Springs, CO 80962-2268	Joel Hefley CO-5 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/21/94	$500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Peterson for U.S. Congress P.O. Box 3186 Tallahassee, FL 32315	Pete Peterson FL-2 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/21/94	$500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Corrine Brown for Congress 421 New Jersey Ave. S.E. Washington, DC 20003	Corrine Brown FL-3 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/21/94	$500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Tillie Fowler PO Box 380087 Jacksonville, FL 32205	Tillie K. Fowler FL-4 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/21/94	$500.00

SUBTOTAL of Disbursements This Page (optional)	$5,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Cliff Stearns Cmte Box 308 Silver Springs, FL 34489	Cliff Stearns FL-6 $2,000.00 [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Mica for Congress PO Box 181546 Casselberry, FL 32718-1546	John Mica FL-7 $1,000.00 [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Committee for Sam Gibbons Box 2884 Washington, DC 20013	Sam Gibbons FL-11 $9,000.00 [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$2,500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Dan Miller Attn: Geoff Becker PO Box 743 Bradenton, FL 34205	Dan Miller FL-13 $1,000.00 [ ] Primary [X] General [ ] Other (specify) 1994	10/21/94	$500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Carrie Meek For Congress Box 10-6012 Miami, FL 33101-6012	Carrie P. Meek FL-17 $500.00 [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Jack Kingston 7360 Skidaway Road Savannah, GA 31406	Jack Kingston GA-1 $3,000.00 [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$2,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Bishop for Congress P.O. Box 709 Columbus, GA 31902	Sanford Bishop GA-2 $1,000.00 [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Collins for Congress P.O. Box 35 Jonesboro, GA 30237	Michael A. Collins GA-3 $1,000.00 [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Linder for Congress P.O. Box 942060 Atlanta, GA 31141	John Linder GA-4 $1,000.00 [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00

SUBTOTAL of Disbursements This Page (optional)	$9,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Darden for Congress P.O. Box 4545 Marietta, GA 30016	George W. Darden GA-7 $500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
B. Nathan Deal for Congress 311 Green St, N.E., Ste-300 Gainesville, GA 30503	Nathan Deal GA-9 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
C. Committee to Re-elect Johnson For Congress Committee 3869 Beech Down Drive Chantilly, VA 22021	Don Johnson GA-10 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
D. Cynthia McKinney for Congress P.O. Box 371125 Decatur, GA 30037	Cynthia McKinney GA-11 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
E. Rush for Congress 1507 East 53rd St, #310 Chicago, IL 60615	Bobby Rush IL-1 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
F. Henry J. Hyde For Congress Box 332 Des Plaines, IL 60016	Henry J. Hyde IL-6 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
G. Costello For Congress PO Box 8250 Belleville, IL 62222	Jerry Costello IL-12 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
H. Harris Fawell For Congress Box 946 Naperville, IL 60566	Harris Fawell IL-13 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
I. Hoosiers Supporting Buyer P.O. Box 712 Monticello, IN 47960	Stephen E. Buyer IN-5 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00

SUBTOTAL of Disbursements This Page (optional) $6,500.00

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

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SCHEDULE B ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. John Myers For Congress Commit PO Box 11 Covington, IN 47932	John T. Myers IN-7 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
B. Pat Roberts For Congress Box 15 Dodge City, KS 67801	Pat Roberts KS-1 $500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
C. Jan Meyers For Congress Commit 7315 West 79th Street Overland Park, KS 66212	Jan Meyers KS-3 $2,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
D. Ron Lewis For Congress 1705 N. Dixie Star Light Plaza Box 23 Elizabethtown, KY 42701	Ron Lewis KY-2 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
E. Harold Rogers For Congress 103 S. Maple Somerset, KY 42501	Harold Rogers KY-5 $500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
F. Friends of Bob Livingston 5163 Gen. DeGaulle, #210 New Orleans, LA 70131	Robert L. Livingston LA-1 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
G. Albert Wynn for Congress 8700 Central Ave., Ste-306 Landover, MD 20785	Albert Wynn MD-4 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
H. Bartlett For Congress PO Box 3662 Frederick, MD 21701-3662	Roscoe Bartlett MD-6 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
I. Friends for Connie Morella 7315 Wisconsin Ave. NW Bethesda, MD 20814	Connie Morella MD-8 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00

SUBTOTAL of Disbursements This Page (optional)	$4,500.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Peter Blute For Congress PO Box 246 Worcester, MA 01613	Peter I. Blute MA-3 $500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
B. Full Name, Mailing Address and ZIP Code Citizens for Peter Torkildsen 80 Prospect Street Peabody, MA 01960	Purpose of Disbursement Peter G. Torkildsen MA-6 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
C. Full Name, Mailing Address and ZIP Code Vern Ehlers for Congress 1848 Morningside Drive, SE Grand Rapids, MI 49506	Purpose of Disbursement Vern Ehlers MI-3 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
D. Full Name, Mailing Address and ZIP Code Barcia For Congress 1600 Center Street Bay City, MI 48708	Purpose of Disbursement James A. Barcia MI-5 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
E. Full Name, Mailing Address and ZIP Code Friends of David Minge c/o Rick Jauert 410 New Jersey Ave. S.E. Washington, DC 20003	Purpose of Disbursement David Minge MN-2 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
F. Full Name, Mailing Address and ZIP Code Taylor for Congress Box 2639 Bay St Louis, MS 39521	Purpose of Disbursement Gene Taylor MS-5 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
G. Full Name, Mailing Address and ZIP Code Talent for US Congress PO Box 23683 Washington, DC 20026-3683	Purpose of Disbursement James M. Talent MO-2 $3,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$2,000.00
H. Full Name, Mailing Address and ZIP Code Ike Skelton For Congress PO Box A Harrisonville, MO 64701	Purpose of Disbursement Ike Skelton MO-4 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
I. Full Name, Mailing Address and ZIP Code Danner For Congress PO Box 15213 Washington, DC 20003	Purpose of Disbursement Pat Danner MO-6 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00

SUBTOTAL of Disbursements This Page (optional) $6,000.00

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

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Friends of Bill Emerson 1924 N St. NW Washington, DC 20036	Bill Emerson MO-8 $2,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
B. Full Name, Mailing Address and ZIP Code Vucanovich for Congress Box 21435 Reno, NV 89515	Purpose of Disbursement Barbara Vucanovich NV-2 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Bill Zeliff PO Box 25026 Washington, DC 20007	Purpose of Disbursement Bill Zeliff NH-1 $3,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $1,000.00
D. Full Name, Mailing Address and ZIP Code Lots of People For Jim Saxton Box 795 Mt. Holly, NJ 08060	Purpose of Disbursement James Saxton NJ-3 $4,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $1,000.00
E. Full Name, Mailing Address and ZIP Code Comm to Re-elect Chris Smith 217 Hancock Ave. Bridgewater, NJ 08807	Purpose of Disbursement Christopher H. Smith NJ-4 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $500.00
F. Full Name, Mailing Address and ZIP Code Franks for Congress 219 South Street New Providence, NJ 07974	Purpose of Disbursement Bob Franks NJ-7 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $500.00
G. Full Name, Mailing Address and ZIP Code Robert Torricelli For Cong. Box 809 Teaneck, NJ 07666	Purpose of Disbursement Robert G. Torricelli NJ-9 $4,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $1,000.00
H. Full Name, Mailing Address and ZIP Code Donald Payne for Congress Box 2406 Newark, NJ 07112	Purpose of Disbursement Donald M. Payne NJ-10 $500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $500.00
I. Full Name, Mailing Address and ZIP Code Zimmer For Congress PO Box 107 Flemington, NJ 08822	Purpose of Disbursement Richard Zimmer NJ-12 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $1,500.00

SUBTOTAL of Disbursements This Page (optional) $8,000.00

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Menendez For Congress PO Box 7919 Washington, DC 20013	Bob Menendez NJ-13 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
B. Full Name, Mailing Address and ZIP Code Committee to Re-elect Congress Box 25185 Albuquerque, NM 87125	Purpose of Disbursement Steven H. Schiff NM-1 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
C. Full Name, Mailing Address and ZIP Code Joe Skeen for Congress P.O. Box 2466 Roswell, NM 88202	Purpose of Disbursement Joe Skeen NM-2 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
D. Full Name, Mailing Address and ZIP Code Friends of Congressman Hochbrueckner Box 426 Coram, NY 11727	Purpose of Disbursement George Hochbrueckner NY-1 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
E. Full Name, Mailing Address and ZIP Code Lazio For Congress '94 PO Box 5063 Bayshore, NY 11706	Purpose of Disbursement Rick A. Lazio NY-2 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
F. Full Name, Mailing Address and ZIP Code Pete King For Congress PO Box 1428 Seaford, NY 11783	Purpose of Disbursement Peter King NY-3 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
G. Full Name, Mailing Address and ZIP Code Susan Molinari For Congress Box 060248, New Dorp Station Staten Island, NY 10306	Purpose of Disbursement Susan Molinari NY-13 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
H. Full Name, Mailing Address and ZIP Code Serrano for Congress 175 West 93rd Street #16H New York, NY 10025	Purpose of Disbursement Jose E. Serrano NY-16 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
I. Full Name, Mailing Address and ZIP Code Engel for Congress 115 D Street SE Washington, DC 20003	Purpose of Disbursement Eliot L. Engel NY-17 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00

SUBTOTAL of Disbursements This Page (optional)	$5,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Nita Lowey for Congress Comm. 3467 Mildred Drive Falls Church, VA 22042	Nita M. Lowey NY-18 $3,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
B. Citizens For Gilman Box 3001 Middletown, NY 10940	Benjamin A. Gilman NY-20 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
C. John McHugh for Congress 683 So. Hamilton Street Watertown, NY 13601	John McHugh NY-24 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
D. Walsh For Congress Committee Box 1974 Syracuse, NY 13201	James T. Walsh NY-25 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
E. Friends of Maurice Hinchey 276 Fair Street Kingston, NY 12401	Maurice D. Hinchey NY-26 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
F. Quinn For Congress PO Box 2012 Blasdell, NY 14219	Jack Quinn NY-30 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
G. Lancaster for Congress Cmte. Box 1475 Goldsboro, NC 27533	Martin Lancaster NC-3 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
H. Charlie Rose for Congress P.O. Box 1891 Fayetteville, NC 28202	Charlie Rose NC-7 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
I. Hefner for Congress Committee Box 3016 Concord, NC 28025	Bill Hefner NC-8 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00

SUBTOTAL of Disbursements This Page (optional) $6,500.00

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

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ballenger for Congress Committ P.O. Box 2552 Hickory, NC 28603	Cass Ballenger NC-10 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
B. Full Name, Mailing Address and ZIP Code Taylor for Congress P.O. Box 2355 Ashville, NC 28802	Purpose of Disbursement Charles H. Taylor NC-11 $2,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $500.00
C. Full Name, Mailing Address and ZIP Code Hobson for Congress Committee 333 N Limestone St. Springfield, OH 45503	Purpose of Disbursement David Hobson OH-7 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $1,000.00
D. Full Name, Mailing Address and ZIP Code Friends of John Boehner 7908 Cincinnati-Dayton Rd. West Chester, OH 45069	Purpose of Disbursement John Boehner OH-8 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $500.00
E. Full Name, Mailing Address and ZIP Code Kaptur for Congress Box 899 Toledo, OH 43691	Purpose of Disbursement Marcy Kaptur OH-9 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $1,000.00
F. Full Name, Mailing Address and ZIP Code Citizens for Kasich 2668 Cannon Point Court Columbus, OH 43209	Purpose of Disbursement John R. Kasich OH-12 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $500.00
G. Full Name, Mailing Address and ZIP Code Sherrod Brown For Congress 111 Edgefield Drive Elyria, OH 44035	Purpose of Disbursement Sherrod Brown OH-13 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $500.00
H. Full Name, Mailing Address and ZIP Code Istook for Congress 5400 N.W. Grand Blvd Oklahoma City, OK 73112	Purpose of Disbursement Ernest Istook OK-5 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $1,000.00
I. Full Name, Mailing Address and ZIP Code Lucas for Congress P.O. Box 26825 Oklahoma City, OK 73126	Purpose of Disbursement Frank D. Lucas OK-6 $6,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	Date (month, day, year) 10/24/94	Amount of Each Disbursement This Period $1,000.00

SUBTOTAL of Disbursements This Page (optional)	$7,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DeFazio for Congress Comm. Box 1316 Springfield, OR 97477	Peter DeFazio OR-4 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Borski for Congress Committee 7759 Frankford Ave. Philadelphia, PA 19125	Robert A. Borski PA-3 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Cong. Bill Clinger Box 631 Warren, PA 16365	William F. Clinger, Jr. PA-5 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Weldon For Congress Committee 336 8th St. NE Washington, DC 20002	Curt Weldon PA-7 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bud Shuster For Congress PO Box 23917 L'Enfant Plaza Station Washington, DC 20024	Bud Shuster PA-9 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Murtha for Re-election Comm. Box 1091 Johnstown, PA 15907	John P. Murtha PA-12 $4,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Paul McHale c/o David Schwartz 462 Walnut Street Allentown, PA 18101	Paul McHale PA-15 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Walker For Congress PO Box 51 Millersville, PA 17551	Robert S. Walker PA-16 $1,800.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gekas for Congress Committee Box 11760 Harrisburg, PA 17108	George W. Gekas PA-17 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00

SUBTOTAL of Disbursements This Page (optional)	$7,500.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Spence for Congress Committee P.O. Box 1475 Columbia, SC 29202	Floyd Spence SC-2 $500.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/24/94	$500.00
B. Full Name, Mailing Address and ZIP Code John Spratt for Congress Comm P.O. Box 830 York, SC 29745	Purpose of Disbursement John Spratt SC-5 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/24/94	$500.00
C. Full Name, Mailing Address and ZIP Code Clyburn for Congress P.O. Box 12567 Columbia, SC 29211	Purpose of Disbursement Jamee E. Clyburn SC-6 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/24/94	$500.00
D. Full Name, Mailing Address and ZIP Code Chapman for Congress Box 388 Sulphur Springs, TX 75482	Purpose of Disbursement Jim Chapman TX-1 $2,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/24/94	$1,500.00
E. Full Name, Mailing Address and ZIP Code Hall for Congress Committee Box 711 Rockwall, TX 75087	Purpose of Disbursement Ralph M. Hall TX-4 $3,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/24/94	$1,000.00
F. Full Name, Mailing Address and ZIP Code Edwards For Congress 2100 Washington Waco, TX 76701	Purpose of Disbursement Chet Edwards TX-11 $2,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/24/94	$1,000.00
G. Full Name, Mailing Address and ZIP Code Laughlin For Congress Box 2884 Washington, DC 20013	Purpose of Disbursement Greg H. Laughlin TX-14 $3,200.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/24/94	$2,000.00
H. Full Name, Mailing Address and ZIP Code Tejeda For Congress 702 Colorado Street, Suite 280 Austin, TX 78701	Purpose of Disbursement Frank Tejeda TX-28 $1,500.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/24/94	$500.00
I. Full Name, Mailing Address and ZIP Code Sen. Gene Green Cgsnl Cmte PO Box 16128 Houston, TX 77222	Purpose of Disbursement Gene Green TX-29 $4,500.00 Disbursement for ☐ Primary ☒ General ☐ Other (specify) 1994	10/24/94	$1,500.00

SUBTOTAL of Disbursements This Page (optional)	$9,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code The Jim Hansen Committee Box 654 Farmington, UT 84025	James V. Hansen UT-1 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
B. Full Name, Mailing Address and ZIP Code Bateman For Congress Committee PO Box 1668 Grafton, VA 23692	Herbert H. Bateman VA-1 $3,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$2,500.00
C. Full Name, Mailing Address and ZIP Code Pickett for Congress P.O. Box 2127 Virginia Beach, VA 23452	Owen B. Pickett VA-2 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
D. Full Name, Mailing Address and ZIP Code Sisisky for Congress Cmte P.O. Box 2062 Petersburg, VA 23804	Norman Sisisky VA-4 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
E. Full Name, Mailing Address and ZIP Code Bob Goodlatte for Congress Cmte c/o Kenneth Prickett 111 Franklin Road, #302 Roanoke, VA 24011	Robert W. Goodlatte VA-6 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
F. Full Name, Mailing Address and ZIP Code Bliley for Congress Committee Box 9871 Alexandria, VA 22304	Thomas J. Bliley, Jr. VA-7 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
G. Full Name, Mailing Address and ZIP Code Friends of Frank Wolf Box 6596 McLean, VA 22106	Frank R. Wolf VA-10 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
H. Full Name, Mailing Address and ZIP Code Norm Dicks For Congress PO Box 1663 Tacoma, WA 98401	Norman D. Dicks WA-6 $500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
I. Full Name, Mailing Address and ZIP Code Friends of Jennifer Dunn PO Box 40110 Bellevue, WA 98004	Jennifer B. Dunn WA-8 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00

SUBTOTAL of Disbursements This Page (optional)	$9,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Mike Kreidler For Congress PO Box 4839 Federal Way, WA 98063	Mike Kreidler WA-9 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
B. Full Name, Mailing Address and ZIP Code Wise for Congress Committee Box 5336 Charleston, WV 25361	Purpose of Disbursement Robert B. Wise, Jr. WV-2 $500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
C. Full Name, Mailing Address and ZIP Code Barca For Congress 5605 6th Avenue Kenosha, WI 53140	Purpose of Disbursement Peter Barca WI-1 $1,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
D. Full Name, Mailing Address and ZIP Code Scott Klug For Congress PO Box 5619 Madison, WI 53705-7456	Purpose of Disbursement Scott Klug WI-2 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
E. Full Name, Mailing Address and ZIP Code Friends & Neighbors of Steve PO Box 1990 Osseo, WI 54758	Purpose of Disbursement GSteven Gunderson WI-3 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
F. Full Name, Mailing Address and ZIP Code The Sensenbrenner Committee PO Box 575 Brookfield, WI 53008	Purpose of Disbursement F. James Sensenbrenner WI-9 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$1,000.00
G. Full Name, Mailing Address and ZIP Code Clayton For Congress PO Box 479 Warrenton, NC 27589	Purpose of Disbursement Eva Clayton NC-1 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
H. Full Name, Mailing Address and ZIP Code Stupak For Congress PO Box 143 Menominee, MI 49858	Purpose of Disbursement Bart Stupak MI-1 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/24/94	$500.00
I. Full Name, Mailing Address and ZIP Code Friends of Glen Browder Box 634 Jacksonville, AL 36265	Purpose of Disbursement Glen Browder AL-3 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/25/94	$1,000.00
SUBTOTAL of Disbursements This Page (optional)			$6,000.00
TOTAL This Period (last page this line number only)			

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE OF

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Inglis Reclaim Congress P.O. Box 361 Greenville, SC 29602	Bob Inglis SC-4 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/25/94	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Reed Committee Box 8628 Cranston, RI 02920	Jack Reed RI-2 $1,500.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/26/94	$1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ehrlich for Congress Committee 1527 York Road Lutherville, MD 21093	Robert Ehrlich MD-2 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	10/31/94	$1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LaTourette for Congress Cmte. 35401 Euclid Ave; #215 Willoughby, OH 44094	Steve Latourette OH-19 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	11/02/94	$1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Frisa for Congress 631 The Plain Road Westbury, NY 11590	Daniel Frisa NY-4 $1,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	11/02/94	$1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hayworth for Congress P.O. Box 9207 Mesa, AZ 85214	J.D. Hayworth AZ-6 $2,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	11/02/94	$2,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Delay For Congress 4010 Franconia Road Alexandria, VA 22310	Tom DeLay TX-22 $1,500.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	11/02/94	$1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bachus for Congress P.O. Box 36004 Birmingham, AL 35236-6004	Spencer T. Bachus AL-6 $1,500.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	11/02/94	$500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Coble for Congress Box 177 Greensboro, NC 27402	Howard Coble NC-6 $2,000.00 Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1994	11/02/94	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$9,500.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Diane Feinstein for Senate 3200 Wilshire Blvd South Tower, 14th Floor Los Angeles, CA 90010	Dianne Feinstein CA-SEN $5,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$2,500.00
B. Slade Gorton 1994 2366 Eastlake Ave. East Suite 313 Seattle, WA 98102	Slade Gorton WA-SEN $6,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$2,500.00
C. Vince Whibbs for Congress 1602 N. 9th Avenue Pensacola, FL 32503	Vince Whibbs FL 1 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$1,000.00
D. Susan Stokes for Congress 3900 Shelbyville Rd, Ste-5 Louisville, KY 40207	Susan Stokes KY-3 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$1,000.00
E. Dutremble for Congress P.O. Box 1133 Portland, ME 04104	Dennis Dutremble ME-1 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$1,000.00
F. Bennett for Congress Cmte P.O. Box 220 Auburn, ME 04212	Richard Bennett ME-2 $1,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$1,000.00
G. Walter Jones for Congress Cmte P.O. Box 7332 Greenville, NC 27835	Walter Jones, Jr. NC-3 $500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$500.00
H. Lehman For Congress 2059 W. Bullard, Suite 324 Fresno, CA 93711	Richard Lehman CA-19 $9,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$2,500.00
I. People For Lightfoot PO Box 1992 Shenandoah, IA 51601	Jim Ross Lightfoot IA-3 $2,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$1,500.00

SUBTOTAL of Disbursements This Page (optional)	$13,500.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 24

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Jan Meyers For Congress Committee 7315 West 79th Street Overland Park, KS 66212	Jan Meyers KS-3 $2,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$1,000.00
B. Glickman for Congress 328 North Main Wichita, KS 67202	Dan Glickman KS-4 $4,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$1,000.00
C. Quillen For Congress Box 2769 Washington, DC 20013	James H. Quillen TN-1 $3,500.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$1,000.00
D. Souder for Congress Committee P.O. Box 400 Grabill, IN 46741	Mark Souder IN-4 $2,000.00 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	11/02/94	$2,000.00
E. Ros-Lehtinen for Congress Box 522784 Miami, FL 33152	Ileana Ros-Lehtinen FL-18 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/25/94	500.00
F. Nick Smith for Congress P.O. Box 20142 Lansing, MI 48901	Nick Smith MI-7 Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1994	10/25/94	500.00
G. Citizens for Harkin Box 75221 Washington, DC 20013	Tom Harkin IA-SEN Disbursement for: [X] Primary [ ] General [ ] Other (specify) 1996	12/6/94	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	$7,000.00
TOTAL This Period (last page this line number only)	$137,500.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☑	Hand Delivered	DATE OF RECEIPT 12-8-94
☐	First Class Mail	POSTMARKED
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☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

[signature] PREPARER

12-8-94 DATE PREPARED

FEC FORM 70-2 (12/92)

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