

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines AFLAC PAC

ADDRESS (number and street) Worldwide Headquarters 1932 Wynnton Road Columbus GA 31999 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00034157 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 06 01 2006 through 06 30 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Joey M. Loudermilk Signature of Treasurer Electronically Filed by Joey M. Loudermilk Date 07 11 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
AFLAC PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		940233.98
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	812816.88									
(c) Total Receipts (from Line 19)	83257.36	500490.61								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	896074.24	1440724.59								
7. Total Disbursements (from Line 31)	147171.70	691822.05								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	748902.54	748902.54								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
AFLAC PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	57545.15	282011.97
(i) Itemized (use Schedule A)	23980.48	214136.52
(ii) Unitemized	81525.63	496148.49
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	81525.63	496148.49
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	1500.00	3500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	231.73	842.12
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	83257.36	500490.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	83257.36	500490.61

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	146500.00	690500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	650.00	650.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	650.00	650.00
29. Other Disbursements.....	21.70	672.05
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	147171.70	691822.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	147171.70	691822.05

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	81525.63	496148.49
34. Total Contribution Refunds (from Line 28(d))	650.00	650.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	80875.63	495498.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 187
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
Sanders For Senate

Mailing Address PO Box 391

City State Zip Code
Burlington VT 05402

FEC ID number of contributing federal political committee. **C** C00411330

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼
 2006 Primary

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 8 / 2 0 0 6

Transaction ID: 15092214

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 187
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) AFLAC PAC
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A. Full Name (Last, First, Middle Initial) Columbus Bank & Trust	
Mailing Address P.O. Box 120	
City Columbus	State Zip Code GA 31902
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 842.12

Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Transaction ID: 15936309
Amount of Each Receipt this Period 231.73

SUBTOTAL of Receipts This Page (optional)	▶	231.73
TOTAL This Period (last page this line number only)	▶	231.73

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
SHAWN C HAMMER

Mailing Address 11418 BENT WAY

City State Zip Code
CYPRESS TX 77429

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

Name of Employer Occupation
AFLAC Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
-375.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 6

Transaction ID: 15937120

Amount of Each Receipt this Period
0.00

[MEMO ITEM]
Refund(s) on Schedule B
Totaling \$450.00 This changes the YTD Total to \$-375.00

B. Full Name (Last, First, Middle Initial)
PAUL J MALO

Mailing Address 1540 WESTBROOK PLAZA DR

City State Zip Code
WINSTON SALEM NC 27103

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

Name of Employer Occupation
AFLAC Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 6 / 2 0 0 6

Transaction ID: 15937121

Amount of Each Receipt this Period
0.00

[MEMO ITEM]
Refund(s) on Schedule B
Totaling \$200.00 This changes the YTD Total to \$200.00

C. Full Name (Last, First, Middle Initial)
JOSEPH SINAPI

Mailing Address 2374 POST ROAD SUITE 3

City State Zip Code
WARWICK RI 02886

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

Name of Employer Occupation
AFLAC ASSOCIATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y

Transaction ID: PR104263746880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) VICKI BUTLER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR107775286880
Mailing Address 404 A WEST PARKWAY PLACE		Amount of Each Receipt this Period 150.00
City RIDGELAND	State MS	Zip Code 39157
FEC ID number of contributing federal political committee. C		P/R Deduction (\$150.00 Monthly)
Name of Employer AFLAC	Occupation ASSOCIATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

B. Full Name (Last, First, Middle Initial) DONALD GREEN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR109217846880
Mailing Address 1081 S. DUTCH JOHN SPRING CT		Amount of Each Receipt this Period 100.00
City GREEN VALLEY	State AZ	Zip Code 85614
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)
Name of Employer AFLAC	Occupation ASSOCIATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C. Full Name (Last, First, Middle Initial) Gerald Shields		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR109452456880
Mailing Address 1932 Wynnton Road		Amount of Each Receipt this Period 50.00
City Columbus	State GA	Zip Code 31999
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer Aflac	Occupation VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) Mark Charrette		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR110680186880	
Mailing Address 22 Corporate Woods Blvd		Amount of Each Receipt this Period 50.00	
City Albany	State NY	Zip Code 12211	P/R Deduction (\$25.00 Semi-Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 275.00	
Name of Employer Aflac	Occupation 2nd VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) CHARLES F GREER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16499316880	
Mailing Address 7035 MIDDLEBROOK PIKE PO BOX 337		Amount of Each Receipt this Period 105.00	
City KNOXVILLE	State TN	Zip Code 37909	P/R Deduction (\$105.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 630.00	
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) LEE J KRAUS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16501126880	
Mailing Address 3401 PARK AVE SUITE 2		Amount of Each Receipt this Period 100.00	
City PADUCAH	State KY	Zip Code 42001	P/R Deduction (\$100.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 600.00	
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	255.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) H PATRICK BRUMLEY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16502266880
Mailing Address PO BOX 770 SUITE 206		Amount of Each Receipt this Period 100.00
City ROANOKE State TX Zip Code 76262		
FEC ID number of contributing federal political committee. C		
Name of Employer Aflac Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial) DONALD L LARSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16502716880
Mailing Address 1528 LOUISVILLE RD SUITE 300		Amount of Each Receipt this Period 110.00
City ALCOA State TN Zip Code 37701		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	P/R Deduction (\$110.00 Monthly)

C. Full Name (Last, First, Middle Initial) ROLLIN C PRICE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16509336880
Mailing Address 758 CEMETERY ROAD		Amount of Each Receipt this Period 65.00
City MUNCY State PA Zip Code 17756		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	P/R Deduction (\$65.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JENNIFER LOWE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 16333 GREAT OAKS DRIVE STE 204		Transaction ID: PR16509476880
City ROUND ROCK	State TX	Zip Code 78681
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) B. CHARLES C HOUGH		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 205 S DUFFY RD STE G		Transaction ID: PR16511716880
City BUTLER	State PA	Zip Code 16001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
		P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) C. TERRIE L RUNOLFFSON		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address PO BOX 1959		Transaction ID: PR16511846880
City COTTONWOOD	State CA	Zip Code 96022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 101.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 606.00	
		P/R Deduction (\$101.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	▶	251.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. BILLY M CRAIN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 97 PICKERING ST		Transaction ID: PR16512656880
City BROOKVILLE	State PA	Zip Code 15825
Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. RUSSELL P LASNER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 15209 MARLBORO PIKE		Transaction ID: PR16513876880
City UPPER MARLBORO	State MD	Zip Code 20772
Amount of Each Receipt this Period _____ 150.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 900.00	P/R Deduction (\$150.00 Monthly)

Full Name (Last, First, Middle Initial) C. CAROLINE D MORNINGSTAR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3210 OLD FENCE RD		Transaction ID: PR16514096880
City ELLICOTT CITY	State MD	Zip Code 21042
Amount of Each Receipt this Period _____ 416.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00	P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	666.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. ROBERT W VESTAL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 115 MOONEY DRIVE		Transaction ID: PR16514526880
City State Zip Code BOURBONNAIS IL 60914	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. JAMES O BACON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 10352 HERONS RIDGE COVE		Transaction ID: PR16515056880
City State Zip Code LAKELAND TN 38002	Amount of Each Receipt this Period _____ 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	P/R Deduction (\$35.00 Monthly)

Full Name (Last, First, Middle Initial) C. EDWIN VEGA		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 134 PINECOVE AVENUE		Transaction ID: PR16516606880
City State Zip Code ODENTON MD 21113	Amount of Each Receipt this Period _____ 175.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 450.00	P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 310.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
HARRIET ANNE GARLAND

Mailing Address 6219 MERIDIAN AVE

City State Zip Code
SAN JOSE CA 95120

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16518656880

Amount of Each Receipt this Period
40.00

P/R Deduction (\$40.00 Monthly)

B. Full Name (Last, First, Middle Initial)
CHARLES L GRAY

Mailing Address 10319 DAWSON'S CREEK BLVD

City State Zip Code
FT WAYNE IN 46825

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16519046880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
JAMES M PITZ

Mailing Address 6133 CORNWALL TERRACE

City State Zip Code
FREDERICK MD 21701

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16519066880

Amount of Each Receipt this Period
125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	265.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) DAVID K AGARWAL		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 106 SHEFFIELD LANE		Transaction ID: PR16519336880	
City MCMURRAY	State PA	Zip Code 15317	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

B. Full Name (Last, First, Middle Initial) LOIS A VEGA		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 134 PINECOVE AVENUE		Transaction ID: PR16519486880	
City ODENTON	State MD	Zip Code 21113	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		
		P/R Deduction (\$100.00 Monthly)	

C. Full Name (Last, First, Middle Initial) JUDI A LAWRENCE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 350 DRIFTWOOD PT		Transaction ID: PR16519526880	
City PELL CITY	State AL	Zip Code 35128	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) DAVID G MORNINGSTAR Mailing Address 3210 OLD FENCE ROAD City ELLICOTT CITY State MD Zip Code 21042 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16520016880 Amount of Each Receipt this Period 416.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	P/R Deduction (\$416.00 Monthly)

B. Full Name (Last, First, Middle Initial) DIANNE L MERISKY Mailing Address 3201 N 2ND STREET City HARRISBURG State PA Zip Code 17110 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16520706880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial) PHILIP LYNN Mailing Address 800 LAKE VIEW DR City PADUCAH State KY Zip Code 42003 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16521536880 Amount of Each Receipt this Period 50.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	566.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. BRIAN W PATTEN		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 9500 BROOKTREE ROAD SUITE 210		Transaction ID: PR16522766880	
City WEXFORD	State PA	Amount of Each Receipt this Period 101.00	
Zip Code 15090		P/R Deduction (\$101.00 Monthly)	
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 606.00		

Full Name (Last, First, Middle Initial) B. BARRY A WHITE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1555 RIVER PARK DR #104		Transaction ID: PR16525266880	
City SACRAMENTO	State CA	Amount of Each Receipt this Period 150.00	
Zip Code 95815		P/R Deduction (\$150.00 Monthly)	
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) C. GARY L WHITE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 238 FIRESTONE DRIVE		Transaction ID: PR16525426880	
City ROSEVILLE	State CA	Amount of Each Receipt this Period 185.00	
Zip Code 95678		P/R Deduction (\$185.00 Monthly)	
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1110.00		

SUBTOTAL of Receipts This Page (optional) ▶	436.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. ELADIO MOREN DAVILA		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4900 N 23RD		Transaction ID: PR16528346880
City MCALLEN	State TX	Zip Code 78504
Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. JOE A DEPASQUAL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 740 E CAMPBELL RD STE 134		Transaction ID: PR16529486880
City RICHARDSON	State TX	Zip Code 75081
Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) C. ABBIE W COFFMAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 500 WILSON PIKE CR SUITE 109		Transaction ID: PR16529946880
City BRENTWOOD	State TN	Zip Code 37027
Amount of Each Receipt this Period _____ 416.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00	P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 616.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) RUE ANN EMERSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16530976880
Mailing Address 4820 SOUTHPOINT DR #102		Amount of Each Receipt this Period 100.00
City FREDERICKSBURG	State VA	Zip Code 22407
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
		P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial) MICHAEL C WALKER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16535046880
Mailing Address 450 FRANKLIN STREET SUITE 200		Amount of Each Receipt this Period 416.00
City HAVRE DE GRACE	State MD	Zip Code 21078
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	
		P/R Deduction (\$416.00 Monthly)

C. Full Name (Last, First, Middle Initial) MICHAEL J QUINN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16540706880
Mailing Address 7681 TYLERS PLACE BLVD STE 2		Amount of Each Receipt this Period 416.00
City WEST CHESTER	State OH	Zip Code 45069
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	
		P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	932.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. DUANE BJORGE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 501 BRIAR RD		Transaction ID: PR16541136880
City ROGERSVILLE	State MO	Zip Code 65742
Amount of Each Receipt this Period _____ 60.00		P/R Deduction (\$60.00 Monthly)
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00	

Full Name (Last, First, Middle Initial) B. JOSEPH P KUECHENMEISTER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3275 FORTSON RD		Transaction ID: PR16541156880
City FORTSON	State GA	Zip Code 31808
Amount of Each Receipt this Period _____ 416.00		P/R Deduction (\$416.00 Monthly)
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00	

Full Name (Last, First, Middle Initial) C. WILLIAM O CORNELL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 121 LIME RD NE		Transaction ID: PR16541576880
City LAKE PLACID	State FL	Zip Code 33852
Amount of Each Receipt this Period _____ 100.00		P/R Deduction (\$100.00 Monthly)
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	576.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 187						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. CHARLES E BAILEY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5110 MISTY OAKES DR #1821 APT 1821		Transaction ID: PR16542046880	
City CHARLOTTE	State NC	Zip Code 28269	Amount of Each Receipt this Period 140.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00		
		P/R Deduction (\$140.00 Monthly)	

Full Name (Last, First, Middle Initial) B. GERRIT J VIS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1533 14TH STREET		Transaction ID: PR16544116880	
City ROCK VALLEY	State IA	Zip Code 51247	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00		
		P/R Deduction (\$51.00 Monthly)	

Full Name (Last, First, Middle Initial) C. JOHN SHELBY AMOS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address PO BOX 5365		Transaction ID: PR16544196880	
City COLUMBUS	State GA	Zip Code 31906	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	607.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
KENNY A ANDERSON

Mailing Address PO BOX 1002

City CONWAY State SC Zip Code 29526

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 / /

Transaction ID: PR16545396880

Amount of Each Receipt this Period
 45.00

P/R Deduction (\$45.00 Monthly)

B. Full Name (Last, First, Middle Initial)
JESUS O'NEILL

Mailing Address P O BOX 30277
65TH INF STATION

City RIO PIEDRAS State PR Zip Code 00929

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

Date of Receipt
 / /

Transaction ID: PR16546056880

Amount of Each Receipt this Period
 108.50

P/R Deduction (\$108.50 Monthly)

C. Full Name (Last, First, Middle Initial)
DANNY S FITZGERALD

Mailing Address 108 WHEELER EXEC. CTR.

City AUGUSTA State GA Zip Code 30909

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 / /

Transaction ID: PR16546186880

Amount of Each Receipt this Period
 125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	278.50
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JUDITH J ROSEBERRY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 200 GRAND AVE #319		Transaction ID: PR16548846880	
City GRAND JUNCTION	State CO	Zip Code 81501	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. THOMAS A CARMICHAEL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4821 BRANTFORD COURT SUITE G		Transaction ID: PR16549436880	
City WEST CHESTER	State OH	Zip Code 45069	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) C. ANNE H MARTIN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3239 MT TABOR ROAD		Transaction ID: PR16550326880	
City CRESWELL	State NC	Zip Code 27928	Amount of Each Receipt this Period _____ 35.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00		
		P/R Deduction (\$35.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	235.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER: PAGE 25 / 187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
ANDREW K GLAUB

Mailing Address 1133 UNIVERSITY PARK DRIVE STE #60

City State Zip Code
OKEMOS MI 48864

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16550386880

Amount of Each Receipt this Period
416.00

P/R Deduction (\$416.00 Monthly)

B. Full Name (Last, First, Middle Initial)
FLOYD D KIMBROUGH

Mailing Address 875 BRIARWOOD DR

City State Zip Code
JACKSON MS 39211

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16551346880

Amount of Each Receipt this Period
51.00

P/R Deduction (\$51.00 Monthly)

C. Full Name (Last, First, Middle Initial)
KENDALL C HUDSON

Mailing Address 1201 US HWY 1 STE 420

City State Zip Code
N PALM BEACH FL 33408

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16551426880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **567.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) MOYA WARRICK		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 7820 PROV N.S. ROAD		Transaction ID: PR16551896880	
City SWANTON	State OH	Zip Code 43558	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		
		P/R Deduction (\$35.00 Monthly)	

B. Full Name (Last, First, Middle Initial) BRADLEY S JONES		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1 MARCUS BLVD		Transaction ID: PR16554286880	
City ALBANY	State NY	Zip Code 12205	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

C. Full Name (Last, First, Middle Initial) BRUCE J HOHLER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2658 PANTALL ROAD		Transaction ID: PR16554656880	
City THOMPSONS STATION	State TN	Zip Code 37179	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		
		P/R Deduction (\$125.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	576.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. GERALD D HILL		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 8806 DAPPLE GREY		Transaction ID: PR16556466880	
City OAK RIDGE	State NC	Zip Code 27310	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		
		P/R Deduction (\$35.00 Monthly)	

Full Name (Last, First, Middle Initial) B. GRACE O LONG		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 872		Transaction ID: PR16556946880	
City TUPELO	State MS	Zip Code 38802	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00		
		P/R Deduction (\$51.00 Monthly)	

Full Name (Last, First, Middle Initial) C. WILLIAM D WENBERG		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 11809 HINSON RD #300		Transaction ID: PR16559056880	
City LITTLE ROCK	State AR	Zip Code 72212	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	502.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. DANIEL L JONES		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 201 NORTH MAIN STREET		Transaction ID: PR16559316880
City DELPHOS State OH Zip Code 45833	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$125.00 Monthly)
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. GARY R HAHN		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 329 CEDAR STREET		Transaction ID: PR16560946880
City FOUNTAIN State MN Zip Code 55935	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$35.00 Monthly)
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MARIAN POISSON		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address P O BOX 127		Transaction ID: PR16561216880
City DAFTER State MI Zip Code 49724	Amount of Each Receipt this Period 37.50	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$37.50 Monthly)
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ 225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	197.50
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
ROBERT E HOUSEWORTH

Mailing Address PO BOX 1695

City MARTINSVILLE State IN Zip Code 46151

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 / /

Transaction ID: PR16561256880

Amount of Each Receipt this Period
 60.00

P/R Deduction (\$60.00 Monthly)

B. Full Name (Last, First, Middle Initial)
WYONITA J ADAMS

Mailing Address 10440 HARRELLS HWY

City HARRELLS State NC Zip Code 28444

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 / /

Transaction ID: PR16563066880

Amount of Each Receipt this Period
 55.00

P/R Deduction (\$55.00 Monthly)

C. Full Name (Last, First, Middle Initial)
DENISE F BEAMAN

Mailing Address 4212 MISTY RIDGE DRIVE SUITE 105

City HAYMARKET State VA Zip Code 20169

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
 / /

Transaction ID: PR16563386880

Amount of Each Receipt this Period
 120.00

P/R Deduction (\$120.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	235.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. C CARROLL YARBOROUGH		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2252 CORBETT AVE		Transaction ID: PR16563606880	
City NORFOLK	State VA	Zip Code 23518	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. RONALD INFANTINO		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address P.O. BOX 140127		Transaction ID: PR16564076880	
City CORAL GABLES	State FL	Zip Code 33114	Amount of Each Receipt this Period _____ 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00		
		P/R Deduction (\$125.00 Monthly)	

Full Name (Last, First, Middle Initial) C. DENNIS R BELGER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 201		Transaction ID: PR16565056880	
City RICHMOND	State MI	Zip Code 48062	Amount of Each Receipt this Period _____ 116.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 996.00		
		P/R Deduction (\$116.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 341.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) B W TAYLOR		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 507		Transaction ID: PR16565646880	
City PHENIX CITY	State AL	Zip Code 36868	Amount of Each Receipt this Period 37.50
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		
		P/R Deduction (\$37.50 Monthly)	

B. Full Name (Last, First, Middle Initial) LYNETTE A HANSON		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 340 E 2ND ST #310		Transaction ID: PR16566766880	
City LOS ANGELES	State CA	Zip Code 90012	Amount of Each Receipt this Period 110.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00		
		P/R Deduction (\$110.00 Monthly)	

C. Full Name (Last, First, Middle Initial) JOSE D COLON		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 471 AVENIDA EUGENIO M HOSTOS ESQUINA ALMIRANTE PINZON		Transaction ID: PR16569036880	
City URB. ROOSEVELT HAT	State PR	Zip Code 00918	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$50.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	197.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. GEORGE M BELCHER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address PO BOX 761		Transaction ID: PR16569976880	
City HARRISONBURG	State VA	Zip Code 22803	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. WILSON BENJAMIN FIELDS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 579		Transaction ID: PR16570326880	
City CLEVELAND	State OK	Zip Code 74020	Amount of Each Receipt this Period 42.50
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		
		P/R Deduction (\$42.50 Monthly)	

Full Name (Last, First, Middle Initial) C. FAY JETER MARTIN		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 19220 FOREST ROAD		Transaction ID: PR16571256880	
City LYNCHBURG	State VA	Zip Code 24502	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	558.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MICHAEL J TOMLINSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1600 4TH ST NE		Transaction ID: PR16571556880	
City WATERTOWN	State SD	Zip Code 57201	Amount of Each Receipt this Period _____ 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00		
		P/R Deduction (\$125.00 Monthly)	

Full Name (Last, First, Middle Initial) B. RONALD J GRETHEL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address AMERICAN FAMILY LIFE 8520 E KEMPER ROAD SUITE 5		Transaction ID: PR16574536880	
City CINCINNATI	State OH	Zip Code 45249	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) C. ESTA KORNSTEIN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 555 DOUGLAS AVENUE		Transaction ID: PR16575326880	
City PROVIDENCE	State RI	Zip Code 02908	Amount of Each Receipt this Period _____ 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00		
		P/R Deduction (\$125.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. TOMMY RAY HEARN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5011 22ND AVE		Transaction ID: PR16576446880
City State Zip Code PHENIX CITY AL 36867	Amount of Each Receipt this Period _____ 55.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 330.00	P/R Deduction (\$55.00 Monthly)

Full Name (Last, First, Middle Initial) B. RONALD E KIRKLAND		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4967 SO BUCKINGHAM LANE		Transaction ID: PR16576756880
City State Zip Code SPRINGFIELD MO 65810	Amount of Each Receipt this Period _____ 416.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00	P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial) C. JAMES D WELBORN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address PO BOX 44		Transaction ID: PR16576906880
City State Zip Code GAINESVILLE GA 30503	Amount of Each Receipt this Period _____ 55.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 330.00	P/R Deduction (\$55.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 526.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JAMES A SMAARDYK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4438 114ST PO BOX 2560		Transaction ID: PR16578386880
City URBANDALE	State IA	Zip Code 50322
Amount of Each Receipt this Period _____ 416.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00	
P/R Deduction (\$416.00 Monthly)		

Full Name (Last, First, Middle Initial) B. LYNN G BARNSON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1225 EAST FORT UNION BLVD #125		Transaction ID: PR16578556880
City MIDVALE	State UT	Zip Code 84047
Amount of Each Receipt this Period _____ 150.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 900.00	
P/R Deduction (\$150.00 Monthly)		

Full Name (Last, First, Middle Initial) C. RALPH E JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 14475 JOHN HUMPHREY DR		Transaction ID: PR16578816880
City ORLAND PARK	State IL	Zip Code 60462
Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	
P/R Deduction (\$50.00 Monthly)		

SUBTOTAL of Receipts This Page (optional) ▶	616.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JOHN P THOMPSON SR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2195 N HWY 83 SUITE #2		Transaction ID: PR16580166880
City FRANKTOWN State CO Zip Code 80116	Amount of Each Receipt this Period _____ 416.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$416.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00	

Full Name (Last, First, Middle Initial) B. GARY W PHILLIPS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 12015 GREENWOOD ESTATES ST		Transaction ID: PR16580176880
City HOUSTON State TX Zip Code 77066	Amount of Each Receipt this Period _____ 65.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$65.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 390.00	

Full Name (Last, First, Middle Initial) C. RONALD W MARTIN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address P O BOX 3986		Transaction ID: PR16581386880
City CHESTER State VA Zip Code 23831	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$100.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 581.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 187						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. KENNETH B COFER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5030 SADLER PLACE SUITE 200		Transaction ID: PR16581876880	
City State Zip Code GLEN ALLEN VA 23060	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)	
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) B. JUDY M BIRD		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1905 RICHLAND LANE		Transaction ID: PR16581946880	
City State Zip Code DALTON GA 30720	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$200.00 Monthly)	
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) C. DORIS L BRACKETT		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 7076 PEACHTREE IND BLVD STE 101		Transaction ID: PR16581966880	
City State Zip Code NORCROSS GA 30071	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)	
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional) ▶	400.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. STEPHEN BEAMAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 17 CALENDAR COURT #3		Transaction ID: PR16583626880
City State Zip Code COLUMBIA SC 29206	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. C SUE MCKENZIE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2501 S KIWANIS AVE APT 207		Transaction ID: PR16583906880
City State Zip Code SIOUX FALLS SD 57105	Amount of Each Receipt this Period _____ 51.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 306.00	P/R Deduction (\$51.00 Monthly)

Full Name (Last, First, Middle Initial) C. JESS M DELA-CRUZ		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 231 HESSLER PLACE		Transaction ID: PR16583996880
City State Zip Code HAGATNA GU 96910	Amount of Each Receipt this Period _____ 51.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 306.00	P/R Deduction (\$51.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 202.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. RONALD WAYNE WILKINS		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address PO BOX 46		Transaction ID: PR16584756880
City LOTTSBURG	State VA	Zip Code 22511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
		P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. TERRY K ALLEN		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address P O BOX 13406		Transaction ID: PR16585846880
City SPOKANE	State WA	Zip Code 99213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
		P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) C. DAVID L PRINGLE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 6929 PSALMOND RD		Transaction ID: PR16586236880
City MIDLAND	State GA	Zip Code 31820
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer AFLAC	Occupation VP, Federal Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
		P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JEFFREY PAUL SEPESI		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1215 W BALTIMORE PIKE STE 1		Transaction ID: PR16586266880	
City MEDIA State PA Zip Code 19063	Amount of Each Receipt this Period 416.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) B. MARK E FRIEHE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 241 W GRANT ST		Transaction ID: PR16586456880	
City PAPILLION State NE Zip Code 68046	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$50.00 Monthly)	

Full Name (Last, First, Middle Initial) C. DAVID M COUGHLIN		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 95 SPRING MEADOW DRIVE #6		Transaction ID: PR16587506880	
City WILLIAMSVILLE State NY Zip Code 14221	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00		
		P/R Deduction (\$120.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	586.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) RANDALL LEE MURRAY Mailing Address P O BOX 38		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16587956880 Amount of Each Receipt this Period 40.00
City DELPHOS State OH Zip Code 45833		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$40.00 Monthly)

B. Full Name (Last, First, Middle Initial) DUANE A ADAMS Mailing Address 100 ARBOR OAK DR STE 302 SUITE 200		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16588726880 Amount of Each Receipt this Period 100.00
City ASHLAND State VA Zip Code 23005		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial) MARTIN D ADAMS Mailing Address P O BOX 1927		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16589126880 Amount of Each Receipt this Period 100.00
City CLINTON State NC Zip Code 28328		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. DONALD B ORRELL		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1581 CHERRY GROVE RD N		Transaction ID: PR16589756880	
City SUFFOLK	State VA	Zip Code 23432	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. NEIL M MORGAN JR		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 16053 FAIRWAY DR		Transaction ID: PR16589846880	
City DUMFRIES	State VA	Zip Code 22026	Amount of Each Receipt this Period 115.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.00		
		P/R Deduction (\$115.00 Monthly)	

Full Name (Last, First, Middle Initial) C. JAMES R BARS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 276		Transaction ID: PR16590546880	
City COVE	State OR	Zip Code 97824	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		
		P/R Deduction (\$35.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
DAVID L HEWITT

Mailing Address AFLAC NEW YORK
ONE MARCUS BLVD SU 102

City ALBANY State NY Zip Code 12205

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16592576880

Amount of Each Receipt this Period
175.00

P/R Deduction (\$175.00 Monthly)

B. Full Name (Last, First, Middle Initial)
TONY J DELBEN

Mailing Address 862 BRAWLEY SCHOOL RD
SUITE 204

City MOORESVILLE State NC Zip Code 28117

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2496.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16594286880

Amount of Each Receipt this Period
416.00

P/R Deduction (\$416.00 Monthly)

C. Full Name (Last, First, Middle Initial)
GLEN T SCHWEIKERT

Mailing Address 15400 W CAPITOL DRIVE
SUITE 100

City BROOKFIELD State WI Zip Code 53005

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2496.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16594346880

Amount of Each Receipt this Period
416.00

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	▶	1007.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MARY HANNIG		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 725 STRAFFORD RIDGE DR		Transaction ID: PR16594546880	
City BALLWIN	State MO	Zip Code 63021	Amount of Each Receipt this Period 45.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		
		P/R Deduction (\$45.00 Monthly)	

Full Name (Last, First, Middle Initial) B. GREGORY F STENZEL		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1427 N 3RD ST SUITE 200		Transaction ID: PR16595366880	
City PHOENIX	State AZ	Zip Code 85004	Amount of Each Receipt this Period 135.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 810.00		
		P/R Deduction (\$135.00 Monthly)	

Full Name (Last, First, Middle Initial) C. KATHRYN E HOFFMAN		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 8170 CORPORATE PARK DR SUITE 144		Transaction ID: PR16595796880	
City CINCINNATI	State OH	Zip Code 45242	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$50.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	230.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JEFFREY M HANSEN		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1022 4TH ST SE STE #104		Transaction ID: PR16597046880
City ST CLOUD	State MN	Zip Code 56304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	
P/R Deduction (\$225.00 Monthly)		

Full Name (Last, First, Middle Initial) B. BETTY C PAYNE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 257 TILLERY BRANCH ROAD SUITE 402		Transaction ID: PR16597436880
City MARSHALL	State NC	Zip Code 28753
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
P/R Deduction (\$50.00 Monthly)		

Full Name (Last, First, Middle Initial) C. OWEN K FOX		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4547 SO 700 E STE 208		Transaction ID: PR16597766880
City SALT LAKE CITY	State UT	Zip Code 84107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
P/R Deduction (\$35.00 Monthly)		

SUBTOTAL of Receipts This Page (optional)	310.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
LANCE OSBORNE

Mailing Address 2849 PACES FERRY ROAD SE #635

City ATLANTA State GA Zip Code 30339

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y

Transaction ID: PR16598186880

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
PERI KYRIACOS

Mailing Address 329 EISENHOWER DR

City SAVANNAH State GA Zip Code 31406

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y

Transaction ID: PR16598356880

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
RANDAL R YURCZYK

Mailing Address 8790 PURDUE ROAD #125

City INDIANAPOLIS State IN Zip Code 46268

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y

Transaction ID: PR16598796880

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **300.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MICHAEL R MARTIN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address PO BOX 20523		Transaction ID: PR16603876880
City ROANOKE	State VA	Zip Code 24018
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 50.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	
		P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) B. JEFFERY L SOLINSKY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 427 NORTH PINE ST STE B		Transaction ID: PR16604636880
City DERIDDER	State LA	Zip Code 70634
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 50.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	
		P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) C. STEVEN R MARKHAM		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 165 KEAWE STREET #101		Transaction ID: PR16606146880
City HILO	State HI	Zip Code 96720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period _____ 40.00
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	
		P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 140.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. LISA K UHLIR		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 608 N. WEST AVE.		Transaction ID: PR16607306880	
City SIOUX FALLS	State SD	Zip Code 57104	Amount of Each Receipt this Period 51.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00		
		P/R Deduction (\$51.00 Monthly)	

Full Name (Last, First, Middle Initial) B. R TERRY GILMORE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2301 MOODY PARKWAY SUITE 2G		Transaction ID: PR16607386880	
City MOODY	State AL	Zip Code 35004	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$50.00 Monthly)	

Full Name (Last, First, Middle Initial) C. BRUCE E MEYER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 30 NORTHWOODS BLVD SUITE 100		Transaction ID: PR16607436880	
City COLUMBUS	State OH	Zip Code 43235	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	517.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 / 187
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. DEAN B GRIFFITH		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 510 WINDY RIDGE ROAD		Transaction ID: PR16608316880	
City State Zip Code FRONT ROYAL VA 22630	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)	
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) B. KENNETH J HOFFMAN		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 9875 SOUTH FRANKLIN DR STE 100		Transaction ID: PR16608606880	
City State Zip Code FRANKLIN WI 53132	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)	
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. MICHAEL E MILLARD		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 802 W BROADWAY		Transaction ID: PR16608846880	
City State Zip Code MADISON WI 53713	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Monthly)	
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. PEGGY K SALMON		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2203 AVENIDA OLIVA		Transaction ID: PR16609046880
City State Zip Code SAN CLEMENTE CA 92672	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. MIRZA N PINZON		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 13683 HARTSVILLE STREET		Transaction ID: PR16609296880
City State Zip Code LA PUENTE CA 91746	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) C. DONALD LARRY REYNOLDS		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address PO BOX 95		Transaction ID: PR16609486880
City State Zip Code AFTON MN 55001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. SHARYL K MILLER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 425 SOUTH CASHUA # B		Transaction ID: PR16611566880	
City FLORENCE	State SC	Zip Code 29501	Amount of Each Receipt this Period _____ 135.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 810.00		
		P/R Deduction (\$135.00 Monthly)	

Full Name (Last, First, Middle Initial) B. RALPH E HOPKINS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 606		Transaction ID: PR16612396880	
City GEORGETOWN	State KY	Zip Code 40324	Amount of Each Receipt this Period _____ 75.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 450.00		
		P/R Deduction (\$75.00 Monthly)	

Full Name (Last, First, Middle Initial) C. MICHAEL J THRASHER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 19307 TIMBER TREE CT		Transaction ID: PR16612466880	
City HUMBLE	State TX	Zip Code 77346	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$50.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 260.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. BONITA H WALKER		Date of Receipt M M / D D / Y Y Y Y Y <input type="text"/>	
Mailing Address 3536 BRAMBLETON AVE S W		Transaction ID: PR16612806880	
City ROANOKE	State VA	Zip Code 24018	Amount of Each Receipt this Period <input type="text" value="40.00"/>
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>		
		P/R Deduction (\$40.00 Monthly)	

Full Name (Last, First, Middle Initial) B. M SCOTT ENOS		Date of Receipt M M / D D / Y Y Y Y Y <input type="text"/>	
Mailing Address P O BOX 833		Transaction ID: PR16613216880	
City SULPHUR	State LA	Zip Code 70664	Amount of Each Receipt this Period <input type="text" value="125.00"/>
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>		
		P/R Deduction (\$125.00 Monthly)	

Full Name (Last, First, Middle Initial) C. MELODY P IRELAND		Date of Receipt M M / D D / Y Y Y Y Y <input type="text"/>	
Mailing Address 4237 BLAKE DRIVE		Transaction ID: PR16614056880	
City MODESTO	State CA	Zip Code 95356	Amount of Each Receipt this Period <input type="text" value="100.00"/>
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="600.00"/>		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="265.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. HELEN M KUECHENMEISTER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 3275 FORTSON ROAD		Transaction ID: PR16614586880	
City FORTSON	State GA	Zip Code 31808	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) B. CYNTHIA D WELKEN-PLACE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1110 COLLEGE DRIVE STE #207		Transaction ID: PR16616536880	
City BISMARK	State ND	Zip Code 58501	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) C. PAUL M MARTINDALE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 322 N MICHIGAN ST		Transaction ID: PR16616806880	
City PLYMOUTH	State IN	Zip Code 46563	Amount of Each Receipt this Period 101.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 606.00		
		P/R Deduction (\$101.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	617.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) EVERETT C BENNETT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1661696880
Mailing Address 902 POPLAR ST		Amount of Each Receipt this Period 100.00
City MILFORD State DE Zip Code 19963	FEC ID number of contributing federal political committee. C	
Name of Employer AFLAC Occupation Associate	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 600.00		P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial) DENNIS W CAMDEN		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16617206880
Mailing Address 146 2ND STREET NORTH SUITE 1240		Amount of Each Receipt this Period 50.00
City ST PETERSBURG State FL Zip Code 33701	FEC ID number of contributing federal political committee. C	
Name of Employer AFLAC Occupation Associate	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 300.00		P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial) MICHAEL B HAYES		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16617346880
Mailing Address 1315 S GLENBURNIE RD		Amount of Each Receipt this Period 100.00
City NEW BERN State NC Zip Code 28562	FEC ID number of contributing federal political committee. C	
Name of Employer AFLAC Occupation Associate	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 600.00		P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. STEVEN KAISER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6400 N ANDREWS AVE		Transaction ID: PR16617536880	
City FT LAUDERDALE	State FL	Zip Code 33309	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1200.00		
		P/R Deduction (\$200.00 Monthly)	

Full Name (Last, First, Middle Initial) B. J DAVID DAVID BUTLER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 404 A W PARKWAY PLACE SUITE #207		Transaction ID: PR16618656880	
City RIDGELAND	State MS	Zip Code 39157	Amount of Each Receipt this Period _____ 416.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) C. THOMAS A HOUSE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 13575 58TH ST N STE 156		Transaction ID: PR16619126880	
City CLEARWATER	State FL	Zip Code 33760	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.00		
		P/R Deduction (\$0.00)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 716.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. SCOTT E ROGERS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 3150 LIVERNOIS SUITE 135 645 LOMASNEY LANE		Transaction ID: PR16619436880	
City TROY State MI Zip Code 48083	Amount of Each Receipt this Period 115.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$115.00 Monthly)	
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ 690.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. KENNETH J BOWERY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 68690 MAIN STREET		Transaction ID: PR16619486880	
City RICHMOND State MI Zip Code 48062	Amount of Each Receipt this Period 416.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$416.00 Monthly)	
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ 2496.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. S PREBLE WARE III		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1512 E NORTHSHORE DR		Transaction ID: PR16619666880	
City TEMPE State AZ Zip Code 85283	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)	
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	631.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) RONALD C GRETHEL		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address AMERICAN FAMILY LIFE 8520 E KEMPER ROAD SUITE 5		Transaction ID: PR16620406880	
City State Zip Code CINCINNATI OH 45249		Amount of Each Receipt this Period 72.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFLAC Associate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 435.00	
		P/R Deduction (\$72.50 Monthly)	

B. Full Name (Last, First, Middle Initial) BRAD J SCHUMACHER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 718 MAIN SUITE 205		Transaction ID: PR16620586880	
City State Zip Code HAYS KS 67601		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFLAC Associate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	
		P/R Deduction (\$100.00 Monthly)	

C. Full Name (Last, First, Middle Initial) GLEN E TWAITES		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1111 BURLINGTON AVE STE 104		Transaction ID: PR16622146880	
City State Zip Code LISLE IL 60532		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFLAC Associate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	
		P/R Deduction (\$35.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	207.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 187
(check only one)	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) JAYNE A FAUST		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 10497 CURRY PALM LANE		Transaction ID: PR16622466880	
City State Zip Code FT MYERS FL 33912	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">105.00</div>		
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	P/R Deduction (\$105.00 Monthly)		
Name of Employer Occupation AFLAC Associate	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 5px; text-align: right;">630.00</div>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) TRACEY KEISER		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 5465 BLUE RIDGE DRIVE STE 120		Transaction ID: PR16622876880	
City State Zip Code YORBA LINDA CA 92887	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">416.00</div>		
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	P/R Deduction (\$416.00 Monthly)		
Name of Employer Occupation AFLAC Associate	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 5px; text-align: right;">2496.00</div>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) TODD C DEVOSS		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2205 POINT BLVD STE 104		Transaction ID: PR16623056880	
City State Zip Code ELGIN IL 60123	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">50.00</div>		
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	P/R Deduction (\$50.00 Monthly)		
Name of Employer Occupation AFLAC Associate	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 5px; text-align: right;">300.00</div>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	571.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. LEO SUPAK		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 501 S 48TH STREET #110		Transaction ID: PR16623536880
City State Zip Code TEMPE AZ 85281	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Monthly)	
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. GENA GRACE GALINDO		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1513 S LA VENTA RD		Transaction ID: PR16623746880
City State Zip Code WESTLAKE VILLAGE CA 91361	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Monthly)	
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. HERBERT P SHNIDER		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2800 CORPORATE EXCHANGE DRIVE		Transaction ID: PR16623906880
City State Zip Code COLUMBUS OH 43231	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Monthly)	
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. WILLIAM R REGISTER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address P O BOX 2386		Transaction ID: PR16624106880
City State Zip Code THOMASVILLE GA 31799	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) B. CINDY T WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2923 CHESTERFIELD WAY		Transaction ID: PR16624566880
City State Zip Code CONYERS GA 30013	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Aflac Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) C. SHARMAIN L MYKLEBY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2500 CHANDLER		Transaction ID: PR16625036880
City State Zip Code LAS VEGAS NV 89120	Amount of Each Receipt this Period _____ 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00	P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 210.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) FRED A KRESSATY Mailing Address 1055 PARSIPPANY BLVD City PARSIPPANY State NJ Zip Code 07054 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16625586880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial) CHRIS BOULDREY Mailing Address 340 WOOD HILLS DR City CONCORD State MI Zip Code 49237 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16625886880 Amount of Each Receipt this Period 80.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	P/R Deduction (\$80.00 Monthly)

C. Full Name (Last, First, Middle Initial) KENNETH W SHOLAR Mailing Address 4608 WESTGROVE COURT City VA BEACH State VA Zip Code 23455 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16626036880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	280.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. DAVID P AESOPH Full Name (Last, First, Middle Initial) Mailing Address 9150 SOUTH HILLS BLVD City BROADVIEW HEIGHTS State OH Zip Code 44147 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16626976880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

B. WILLIAM P FLEMING Full Name (Last, First, Middle Initial) Mailing Address 525 DEEPWOOD DR City HENDERSON State NC Zip Code 27536 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16627026880 Amount of Each Receipt this Period 50.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Monthly)

C. RONALD B SALMON Full Name (Last, First, Middle Initial) Mailing Address 2203 AVENIDA OLIVA City SAN CLEMENTE State CA Zip Code 92673 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16627556880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) CHARLES A BUSBEE		Date of Receipt
Mailing Address 901 WASHINGTON AVE		<input type="text"/> / <input type="text"/> / <input type="text"/>
City MACON	State GA	Zip Code 31201
FEC ID number of contributing federal political committee. C		Transaction ID: PR16629796880
Name of Employer AFLAC		Amount of Each Receipt this Period
Occupation Associate		<input type="text"/> 101.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$101.00 Monthly)
	<input type="text"/> 606.00	

B. Full Name (Last, First, Middle Initial) CAROL J THOMPSON		Date of Receipt
Mailing Address 51717 SUMMERWOOD CT 515 LINCOLNWAY WEST		<input type="text"/> / <input type="text"/> / <input type="text"/>
City GRANGER	State IN	Zip Code 46530
FEC ID number of contributing federal political committee. C		Transaction ID: PR16631376880
Name of Employer AFLAC		Amount of Each Receipt this Period
Occupation Associate		<input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$50.00 Monthly)
	<input type="text"/> 300.00	

C. Full Name (Last, First, Middle Initial) KRISTIN E HORTON		Date of Receipt
Mailing Address 6275 THEISEN RD		<input type="text"/> / <input type="text"/> / <input type="text"/>
City ELMIRA	State MI	Zip Code 49730
FEC ID number of contributing federal political committee. C		Transaction ID: PR16632036880
Name of Employer AFLAC		Amount of Each Receipt this Period
Occupation Associate		<input type="text"/> 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$50.00 Monthly)
	<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> 201.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 68 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. GEORGE LEE WASHINGTON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3395 LAWRENCEVILLE HWY SUITE 340		Transaction ID: PR16632136880
City LAWRENCEVILLE State GA Zip Code 30044	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$100.00 Monthly)
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ _____ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JOSEPH E PUPEK JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 905 BROADWAY		Transaction ID: PR16632156880
City CAPE GIREADEAU State MO Zip Code 63701	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$50.00 Monthly)
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ _____ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ROSALYN C SYLVESTER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address P O BOX 7059		Transaction ID: PR16632226880
City JACKSON State MS Zip Code 39282	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$50.00 Monthly)
Name of Employer Aflac Occupation Associate	Aggregate Year-to-Date ▼ _____ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 200.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MITCHELL J MCCALL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 629 BLONDEAU ST STE 201		Transaction ID: PR16632836880
City State Zip Code KEOKUK IA 52632	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. SUSAN J TAORMINA		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 24561 N RIVER RD		Transaction ID: PR16632996880
City State Zip Code MT CLEMENS MI 48043	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) C. JOSEPH EVANS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 9922 BREWSTER LANE		Transaction ID: PR16633176880
City State Zip Code POWELL OH 43065	Amount of Each Receipt this Period _____ 82.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 492.00	P/R Deduction (\$82.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 282.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 70 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) RICHARD SMITHSON Mailing Address PO BOX 22358 City HOT SPRINGS State AR Zip Code 71903 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16633526880 Amount of Each Receipt this Period 120.00 P/R Deduction (\$120.00 Monthly)
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

B. Full Name (Last, First, Middle Initial) SHIRLEE HEARD Mailing Address 2526 C 82ND ST City LUBBOCK State TX Zip Code 79423 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16633796880 Amount of Each Receipt this Period 50.00 P/R Deduction (\$50.00 Monthly)
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) JEFFREY C WEST Mailing Address 12941 North Frwy Suite 416 City HOUSTON State TX Zip Code 77060 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16633966880 Amount of Each Receipt this Period 416.00 P/R Deduction (\$416.00 Monthly)
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	

SUBTOTAL of Receipts This Page (optional) ▶	586.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 187
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
CHRIS (JOHN) WALKER

Mailing Address **7460 LANCASTER PIKE**
SUITE #2

City **HOCKESSIN** State **DE** Zip Code **19707**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16634066880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
JANET R WATERS

Mailing Address **7272 PEPPERMILL PKWY**

City **NORTH CHARLESTON** State **SC** Zip Code **29418**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16634336880

Amount of Each Receipt this Period
110.00

P/R Deduction (\$110.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MARC J HAIRE

Mailing Address **151 ORCHARD VIEW ROAD**

City **SEVEN HILLS** State **OH** Zip Code **44131**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16637056880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **210.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. DEE W SLATER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 10 TOWER OFFICE PARK		Transaction ID: PR16637196880	
City WOBURN	State MA	Zip Code 01801	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		
		P/R Deduction (\$40.00 Monthly)	

Full Name (Last, First, Middle Initial) B. JAVIER AYARDE SR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1650 SAND LAKE ROAD		Transaction ID: PR16637976880	
City ORLANDO	State FL	Zip Code 32809	Amount of Each Receipt this Period _____ 55.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 330.00		
		P/R Deduction (\$55.00 Monthly)	

Full Name (Last, First, Middle Initial) C. MICHAEL B MURPHY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2010 AVENUE G SUITE 1101		Transaction ID: PR16639696880	
City PLANO	State TX	Zip Code 75074	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 195.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 73 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JAMES GREG HOGUE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address PO BOX 2301		Transaction ID: PR16639736880
City MONROE	State LA	Zip Code 71207
Amount of Each Receipt this Period _____ 50.00		Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	

Full Name (Last, First, Middle Initial) B. JAY P HIGGINS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 211 MARSHAL ST		Transaction ID: PR16639856880
City JEFFERSON CITY	State MO	Zip Code 65101
Amount of Each Receipt this Period _____ 50.00		Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Monthly)
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	

Full Name (Last, First, Middle Initial) C. BOYD M GLOVER JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 69 MOORECLIFF LANE		Transaction ID: PR16640366880
City VERONA	State VA	Zip Code 24482
Amount of Each Receipt this Period _____ 100.00		Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)
Name of Employer AFLAC		Occupation Associate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 200.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) RANDALL L KIMBLER		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4565 WILSON AVENUE		Transaction ID: PR16640626880
City GRANDVILLE State MI Zip Code 49418	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial) MARSHA S SHAW		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address P O BOX 190		Transaction ID: PR16641686880
City N CARROLLTON State MS Zip Code 38947	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial) ALAN W MARTIN		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 8820 TRINITY RD		Transaction ID: PR16641726880
City CORDOVA State TN Zip Code 38018	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JAMES R HILL SR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 62 BROAD STREET ROAD STE 3 SUITE 3		Transaction ID: PR16642206880
City MANAKIN-SABOT State VA Zip Code 23103	Amount of Each Receipt this Period _____ 416.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$416.00 Monthly)
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ _____ 2496.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ERIC R MACDOUGALL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 301 OXFORD VALLEY RD STE 205A		Transaction ID: PR16643586880
City YARDLEY State PA Zip Code 19067	Amount of Each Receipt this Period _____ 416.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$416.00 Monthly)
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ _____ 2180.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JOHN M JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7511 ERINWOOD DR		Transaction ID: PR16644576880
City SPRING State TX Zip Code 77379	Amount of Each Receipt this Period _____ 120.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$120.00 Monthly)
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ _____ 720.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 952.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. STEPHEN A GRACIN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4488 JACKSON RD STE 7		Transaction ID: PR16648756880
City ANN ARBOR State MI Zip Code 48103	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$100.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	

Full Name (Last, First, Middle Initial) B. TINA M LASSUY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4544 3RD STREET		Transaction ID: PR16650246880
City MOLINE State IL Zip Code 61265	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$100.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	

Full Name (Last, First, Middle Initial) C. MARK R DECKARD		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address P O BOX 358		Transaction ID: PR16651076880
City PLYMOUTH State IN Zip Code 46563	Amount of Each Receipt this Period _____ 35.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$35.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 235.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
NANCY J EARLE

Mailing Address 2251 S ALDRICH

City State Zip Code
MILWAUKEE WI 53207

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16652476880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
CHERYL O'BRIEN

Mailing Address 3509 STONECREEK AVE

City State Zip Code
BAKERSFIELD CA 93313

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16654096880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
ALBERT J WELCH III

Mailing Address 1039 COMMERCIAL PARK DR STE 4

City State Zip Code
PEARL MS 39208

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16654616880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. BARRY T FISHER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 184-A JEFFERSON PARKWAY		Transaction ID: PR16654736880	
City NEWNAN	State GA	Zip Code 30263	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$50.00 Monthly)	

Full Name (Last, First, Middle Initial) B. MATTHEW D MOEHRING		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 906		Transaction ID: PR16654906880	
City COLUMBUS	State MS	Zip Code 39703	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		
		P/R Deduction (\$75.00 Monthly)	

Full Name (Last, First, Middle Initial) C. TRAVIS J COCKBURN		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 335		Transaction ID: PR16656086880	
City JOHNSON CITY	State IL	Zip Code 62951	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. RORY G CRUSER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 10629 HILLARY CT		Transaction ID: PR16656496880	
City BATON ROUGE	State LA	Zip Code 70810	Amount of Each Receipt this Period _____ 416.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) B. DAVID K MOBLEY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6817 SOUTHPOINT PARKWAY		Transaction ID: PR16657276880	
City JACKSONVILLE	State FL	Zip Code 32216	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) C. MARY KAYE WASHO		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 72 GLEN MAURA NATIONAL BLVD		Transaction ID: PR16658396880	
City MOOSIC	State PA	Zip Code 18507	Amount of Each Receipt this Period _____ 55.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 330.00		
		P/R Deduction (\$55.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 571.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JAMES G BROWN		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 295 BENDIX RD SUITE 260		Transaction ID: PR16659096880
City	State	Zip Code
VIRGINA BEACH	VA	23452
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
Name of Employer AFLAC	Occupation Associate	P/R Deduction (\$416.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	

Full Name (Last, First, Middle Initial) B. STEVEN R HANSON		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 340 E 2ND ST #310		Transaction ID: PR16659666880
City	State	Zip Code
LOS ANGELES	CA	90012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer AFLAC	Occupation Associate	P/R Deduction (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. FRANCES SANDRA BOND		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2610 DAWSON RD UNIT 8		Transaction ID: PR16659946880
City	State	Zip Code
ALBANY	GA	31707
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer AFLAC	Occupation Associate	P/R Deduction (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	616.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) KIMBERLY MOGER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 14670 NE 8TH STREET SUITE 105		Transaction ID: PR16661726880	
City BELLEVUE	State WA	Zip Code 98007	Amount of Each Receipt this Period 110.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00		
		P/R Deduction (\$110.00 Monthly)	

B. Full Name (Last, First, Middle Initial) DARLENE S DILLON		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 125 GAITHER DRIVE SUITE L		Transaction ID: PR16661836880	
City MOUNT LAUREL	State NJ	Zip Code 08054	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

C. Full Name (Last, First, Middle Initial) CHARLES DAVID BRAY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 730 AVIGNON DR STE 101		Transaction ID: PR16662146880	
City RIDGELAND	State MS	Zip Code 39157	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		
		P/R Deduction (\$75.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	285.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) ROY D MUNSTER Mailing Address 8332 CHARING LANE City GLEN ALLEN State VA Zip Code 23059 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16662196880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial) DAVID W HARLESS Mailing Address 4651 #F FOUR SEASONS TERRACE City GLEN ALLEN State VA Zip Code 23060 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16662416880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial) ALFRED RIETKERK Mailing Address 210 N GLENOAKS #D City BURBANK State CA Zip Code 91502 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16664266880 Amount of Each Receipt this Period 70.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	P/R Deduction (\$70.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	270.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 84 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

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

Mailing Address 60 CROCKER BLVD

City State Zip Code
MT CLEMENS MI 48043

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16664796880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
GLENN B PATE

Mailing Address 5700 ENTERPRISE STE 110

City State Zip Code
AMARILLO TX 79106

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16665756880

Amount of Each Receipt this Period
35.00

P/R Deduction (\$35.00 Monthly)

C. Full Name (Last, First, Middle Initial)
LUCY DIANE BAKER

Mailing Address 3951 B MARKET ST

City State Zip Code
WILMINGTON NC 28403

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16671026880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. SHARON R GALICIA		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 193		Transaction ID: PR16672276880	
City LAKE CHARLES	State LA	Zip Code 70602	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. FRANKLIN R DAVIES		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6220 VIRGINIA PARKWAY #100		Transaction ID: PR16673476880	
City MCKINNEY	State TX	Zip Code 75070	Amount of Each Receipt this Period _____ 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) C. SCOTT E NIELSEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8905 SW NIMBUS AVE STE 155 SUITE 100		Transaction ID: PR16673986880	
City BEAVERTON	State OR	Zip Code 97008	Amount of Each Receipt this Period _____ 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	932.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) MAYNARD M YOUNG		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 1498		Transaction ID: PR16674206880	
City WINDHAM	State ME	Zip Code 04062	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

B. Full Name (Last, First, Middle Initial) DANIEL MARTIN BREDESON		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 10370 HEMET ST STE 230		Transaction ID: PR16674416880	
City RIVERSIDE	State CA	Zip Code 92503	Amount of Each Receipt this Period 45.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		
		P/R Deduction (\$45.00 Monthly)	

C. Full Name (Last, First, Middle Initial) THOMAS S GENTZ		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4410 CARVER WOODS DRIVE		Transaction ID: PR16674436880	
City BLUE ASH	State OH	Zip Code 45242	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$50.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	195.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
JOHN A DONALDSON

Mailing Address 649 FIFTH AVE SOUTH
STE 340

City State Zip Code
NAPLES FL 34102

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16674736880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
PAMELA J JOHNSON

Mailing Address 436 EMERALD BAY DR

City State Zip Code
ARROYO GRANDE CA 93420

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16674766880

Amount of Each Receipt this Period
416.00

P/R Deduction (\$416.00 Monthly)

C. Full Name (Last, First, Middle Initial)
SHANE M RIDENHOUR

Mailing Address 514 EAST HIGH STREET 1ST FLOOR

City State Zip Code
JEFFERSON CITY MO 65101

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16675926880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	516.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) MICHAEL D EVANS JR Mailing Address 357 TIMBER RUN City CANFIELD State OH Zip Code 44406 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16677376880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial) NATHAN A BRONSON Mailing Address N30 W23473 GREENFIELD City PEWAUKEE State WI Zip Code 53072 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16677486880 Amount of Each Receipt this Period 50.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial) TIM WOODARD Mailing Address 117 WEST STREET PO BOX 99 City JONESVILLE State MI Zip Code 49250 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16678286880 Amount of Each Receipt this Period 125.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	275.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MELVIN R JONES		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3025 ELIOCH MANOR DR SUITE 200		Transaction ID: PR16679026880
City POWHATAN State VA Zip Code 23139	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	

Full Name (Last, First, Middle Initial) B. JONATHAN C DAVIDSON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 9803 W STATE RD 58		Transaction ID: PR16680186880
City NORMAN State IN Zip Code 47264	Amount of Each Receipt this Period _____ 55.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$55.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 330.00	

Full Name (Last, First, Middle Initial) C. SALLY A MEAD		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2001 ALVERSON DR STE 106		Transaction ID: PR16682006880
City PARIS State KY Zip Code 40361	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 205.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JERRY F HOKE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 720 EAST NEW ENGLAND DR		Transaction ID: PR16682576880
City State Zip Code SANDY UT 84094	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) B. SAMUEL A MCFALL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address AFLAC REGIONAL OFFICE 221 S BROADWAY SUITE 539		Transaction ID: PR16684376880
City State Zip Code WICHITA KS 67202	Amount of Each Receipt this Period _____ 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Aflac Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00	P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial) C. ROSALIND W CIESLEWICZ		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 11731 CANYON VISTA LANE		Transaction ID: PR16686996880
City State Zip Code TOMBALL TX 77375	Amount of Each Receipt this Period _____ 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 450.00	P/R Deduction (\$75.00 Monthly)

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) DAVID G BAKER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 15 LOOP ROAD		Transaction ID: PR16688956880	
City ARDEN	State NC	Zip Code 28704	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		
		P/R Deduction (\$35.00 Monthly)	

B. Full Name (Last, First, Middle Initial) JOHN W AMOS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 5586		Transaction ID: PR16689246880	
City COLUMBUS	State GA	Zip Code 31906	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

C. Full Name (Last, First, Middle Initial) THOMAS ROBERT GIDDENS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1301 SHILOH ROAD BLDG. H SUITE 10		Transaction ID: PR16690086880	
City KENNESAW	State GA	Zip Code 30144	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	551.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 187
	(check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. THOMAS MICHAEL RIGNEY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2448 S.W. BRIDGEVIEW TERRACE		Transaction ID: PR16691056880	
City PALM CITY	State FL	Zip Code 34990	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. MARC LUTHER HOMAN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 221 S BROADWAY ST STE 600		Transaction ID: PR16691716880	
City WICHITA	State KS	Zip Code 67202	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		
		P/R Deduction (\$40.00 Monthly)	

Full Name (Last, First, Middle Initial) C. JOHN BECK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address P O BOX 5386		Transaction ID: PR16692356880	
City COLUMBUS	State GA	Zip Code 31906	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) DAVID C CLOUD JR Mailing Address 1301 SHILOH RD #630 City KENNESAW State GA Zip Code 30144 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16692636880 Amount of Each Receipt this Period 100.00
Name of Employer Aflac Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial) BRIAN K CHAMBERS Mailing Address P O BOX 5586 City COLUMBUS State GA Zip Code 31906 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16692776880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial) DOMINICK R SIRACUSA Mailing Address SUITE 205 City SUFFERN State NY Zip Code 10901 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16693896880 Amount of Each Receipt this Period 100.00
Name of Employer AFLAC Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
GAY M HUNDLEY

Mailing Address 620 TAYLOR TRAIL

City MURPHY State TX Zip Code 75094

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16698546880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
JEREMY L TOMLINSON

Mailing Address 2211 8TH AVE NE STE 2202

City ABERDEEN State SD Zip Code 57401

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16699156880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
CHARLES E NORRIS

Mailing Address 101 CHAPPEL DAM ROAD

City GLADWIN State MI Zip Code 48624

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16699646880

Amount of Each Receipt this Period
125.00

P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	325.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
TARAL PATRICK

Mailing Address PO BOX 388

City State Zip Code
EVERLY IA 51338

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16700516880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
JOHN M WASHO

Mailing Address 72 GLAN MAURA NATIONAL BLVD

City State Zip Code
MOOSIC PA 18507

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16703826880

Amount of Each Receipt this Period
105.00

P/R Deduction (\$105.00 Monthly)

C. Full Name (Last, First, Middle Initial)
ANDREW R GRETHEL

Mailing Address 5963 LA PLACE COURT SUITE #206

City State Zip Code
CARLSBAD CA 92008

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16704656880

Amount of Each Receipt this Period
416.00

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	571.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
MEGHAN M MILLER

Mailing Address 2299 KIMBERLY CT

City State Zip Code
MORGAN HILL CA 95037

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16704976880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
JASON A NAVILLE

Mailing Address 324 E NEW YORK ST

City State Zip Code
INDIANAPOLIS IN 46204

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16705276880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
JEFF MUSGROVE

Mailing Address 16360 PARK TEN PLACE

City State Zip Code
HOUSTON TX 77084

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16705336880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. VERONICA ILIC-STONE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2670 W SHAW LANE		Transaction ID: PR16707376880	
City FRESNO	State CA	Zip Code 93711	Amount of Each Receipt this Period _____ 45.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 270.00		
		P/R Deduction (\$45.00 Monthly)	

Full Name (Last, First, Middle Initial) B. KIM J WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2200 SILAS CREEK PKWY		Transaction ID: PR16707776880	
City WINSTON SALEM	State NC	Zip Code 27103	Amount of Each Receipt this Period _____ 70.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00		
		P/R Deduction (\$70.00 Monthly)	

Full Name (Last, First, Middle Initial) C. THOMAS J MCCORD		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address RT 2 BOX 619		Transaction ID: PR16709626880	
City SHINNSTON	State WV	Zip Code 26431	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 215.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
MARLENE R WOLKOFF

Mailing Address 8944 CYPRESSPOINT LANE

City State Zip Code
CINCINNATI OH 45249

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

Name of Employer Occupation
AFLAC Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16712836880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
JENNIFER E MACIAS

Mailing Address 29981 JAMAICA DUNES DR

City State Zip Code
TEHACHAPI CA 93561

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

Name of Employer Occupation
AFLAC Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16713506880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
DAWN D SHEUE

Mailing Address PO BOX 3986

City State Zip Code
JACKSON WY 83001

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

Name of Employer Occupation
Aflac Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16715176880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. BARRY E JONES		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1910 - 120TH PL SE, SUITE 101		Transaction ID: PR16717956880
City EVERETT	State WA	Zip Code 98208
Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. CATHY J OLIVER		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 900 W 128TH ST STE #104		Transaction ID: PR16718156880
City BURNSVILLE	State MN	Zip Code 55337
Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) C. MASON C LEE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address #1 SECURITY BLVD		Transaction ID: PR16720566880
City HOUMA	State LA	Zip Code 70360
Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 187
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) NATHAN L HARRISON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 216 W WALNUT STREET		Transaction ID: PR16721486880
City State Zip Code KOKOMO IN 46901	Amount of Each Receipt this Period _____ 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 900.00	P/R Deduction (\$150.00 Monthly)

B. Full Name (Last, First, Middle Initial) CHARLES V GLAUB		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3562 BIRCHKNOLL DR SE APT 105		Transaction ID: PR16721556880
City State Zip Code GRAND RAPIDS MI 49512	Amount of Each Receipt this Period _____ 225.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1350.00	P/R Deduction (\$225.00 Monthly)

C. Full Name (Last, First, Middle Initial) JAMES M BROCK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 608 CHESTNUT DR		Transaction ID: PR16724006880
City State Zip Code ST JOSEPH IL 61873	Amount of Each Receipt this Period _____ 175.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1050.00	P/R Deduction (\$175.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 550.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) CHAD NELSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16724356880
Mailing Address 1444 N FARNSWORTH AVE		Amount of Each Receipt this Period 100.00
City State Zip Code AURORA IL 60505	P/R Deduction (\$100.00 Monthly)	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 600.00	
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B. Full Name (Last, First, Middle Initial) BRENDA W MAXWELL		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1672666880
Mailing Address 71 FOXGLOVE COURT		Amount of Each Receipt this Period 50.00
City State Zip Code CATAULA GA 31804	P/R Deduction (\$50.00 Monthly)	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 300.00	
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) ALEXANDER B WARD		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16726826880
Mailing Address 1260 WINCHESTER PARKWAY SE		Amount of Each Receipt this Period 125.00
City State Zip Code SMYRNA GA 30080	P/R Deduction (\$125.00 Monthly)	
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 750.00	
Name of Employer Aflac	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) DOUGLAS E FOX		Date of Receipt
Mailing Address 5500 MING AVE SUITE 250		<input type="text"/> / <input type="text"/> / <input type="text"/>
City BAKERSFIELD	State CA	Zip Code 93309
FEC ID number of contributing federal political committee. C		Transaction ID: PR16729726880
Name of Employer Aflac		Occupation Associate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	Amount of Each Receipt this Period 416.00
		P/R Deduction (\$416.00 Monthly)

B. Full Name (Last, First, Middle Initial) LISA HALL		Date of Receipt
Mailing Address P O BOX 0832		<input type="text"/> / <input type="text"/> / <input type="text"/>
City HAYDEN	State ID	Zip Code 83835
FEC ID number of contributing federal political committee. C		Transaction ID: PR16730956880
Name of Employer AFLAC		Occupation Associate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 50.00
		P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial) LAWRENCE L CASTILLO		Date of Receipt
Mailing Address 901 RIO GRANDE BLVD NW		<input type="text"/> / <input type="text"/> / <input type="text"/>
City ALBUQUERQUE	State NM	Zip Code 87104
FEC ID number of contributing federal political committee. C		Transaction ID: PR16737186880
Name of Employer Aflac		Occupation Associate
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	Amount of Each Receipt this Period 100.00
		P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	566.00
TOTAL This Period (last page this line number only)	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. KENNETH BARRY MCPHERSON		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 512 SECOND AVE		Transaction ID: PR16737846880
City SEATTLE State WA Zip Code 98104	Amount of Each Receipt this Period 110.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$110.00 Monthly)	
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date 660.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	P/R Deduction (\$110.00 Monthly)	

Full Name (Last, First, Middle Initial) B. BARRY CAMPBELL		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2500 W COUNTY RD #42 SUITE 180		Transaction ID: PR16738406880
City BURNSVILLE State MN Zip Code 55337	Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$416.00 Monthly)	
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date 2496.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) C. GERALD R THEIS JR		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 95128 S GRASSY POINT		Transaction ID: PR16740736880
City COOK State MN Zip Code 55723	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$75.00 Monthly)	
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	P/R Deduction (\$75.00 Monthly)	

SUBTOTAL of Receipts This Page (optional)	601.00
TOTAL This Period (last page this line number only)	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. GREGORY H BRAY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4485 TENCH ROAD		Transaction ID: PR16741606880	
City SUWANEE	State GA	Zip Code 30024	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. WILLIAM B KRZCIOK		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2760 FORT MEYER AVE # 220		Transaction ID: PR16741826880	
City HENDERSON	State NV	Zip Code 89052	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) C. ROBERT LAROCHE JR		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 300 QUAKER LANE		Transaction ID: PR16742236880	
City WARWICK	State RI	Zip Code 02886	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	616.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. SHERRI LYNN GUEDEA		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 506 W GRAHAM AVE 203		Transaction ID: PR16742846880	
City LAKE ELSINORE	State CA	Amount of Each Receipt this Period _____ 40.00	
Zip Code 92530		P/R Deduction (\$40.00 Monthly)	
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		

Full Name (Last, First, Middle Initial) B. MICHAEL R MEREDITH		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4870 NORTH CITATION DR #280		Transaction ID: PR16743276880	
City DELRAY BEACH	State FL	Amount of Each Receipt this Period _____ 100.00	
Zip Code 33445		P/R Deduction (\$100.00 Monthly)	
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		

Full Name (Last, First, Middle Initial) C. ALAN D SAYLOR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1314 BLAIR CIRCLE		Transaction ID: PR16744716880	
City DOWINGTOWN	State PA	Amount of Each Receipt this Period _____ 55.00	
Zip Code 19335		P/R Deduction (\$55.00 Monthly)	
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 330.00		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 195.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. WILLIAM M WARDLAW JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 368 WEST PIKE ST		Transaction ID: PR16745076880
City State Zip Code LAWRENCEVILLE GA 30045	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. BRUCE COHEN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 11922 BLUEBONNET LANE		Transaction ID: PR16747336880
City State Zip Code GRANGER IN 46530	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Aflac Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) C. ELAINE HAMMAR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5424 S. MEMORIAL SUITE E-4		Transaction ID: PR16747876880
City State Zip Code TULSA OK 74145	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 200.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JENNIE MOORE HAWKINS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3930 S NOVA RD STE 301		Transaction ID: PR16749416880
City State Zip Code PORT ORANGE FL 32127	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) B. PAUL E KAPLAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address P O BOX 654		Transaction ID: PR16750386880
City State Zip Code FRANKLIN VA 23851	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial) C. BRETT A RETTENMUND		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2935 N BALLARD ROAD		Transaction ID: PR16751526880
City State Zip Code APPLETON WI 54911	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 300.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
THOMAS EDWARD SHEFFIELD

Mailing Address 217 N MADISON ST

City State Zip Code
KOSCIUSKO MS 39090

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16753866880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
TERRY J SILVERS

Mailing Address 2290 NO AUGUSTA ST

City State Zip Code
STAUNTON VA 24401

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16755836880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
TIMOTHY B ASBY

Mailing Address 3811 NE 94TH TERRACE

City State Zip Code
KANSAS CITY MO 64156

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16759176880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MARY K JONES		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 512 EARLY ST		Transaction ID: PR16766646880	
City SAVANNAH	State GA	Amount of Each Receipt this Period 100.00	
Zip Code 31405		P/R Deduction (\$100.00 Monthly)	
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) B. SCOTT R FRITCHER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1710 LINCOLN AVE		Transaction ID: PR16777826880	
City SPIRIT LAKE	State IA	Amount of Each Receipt this Period 100.00	
Zip Code 51360		P/R Deduction (\$100.00 Monthly)	
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. LOUIS R FAIOLA		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1358 BOSTON POST RD		Transaction ID: PR16780806880	
City OLD SAYBROOK	State CT	Amount of Each Receipt this Period 416.00	
Zip Code 06475		P/R Deduction (\$416.00 Monthly)	
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		

SUBTOTAL of Receipts This Page (optional) ▶	616.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 113 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. ROBERT M LYMAN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 460 RIVERMONT DR		Transaction ID: PR16798556880	
City CLARKSVILLE	State TN	Amount of Each Receipt this Period _____ 100.00	
Zip Code 37043		P/R Deduction (\$100.00 Monthly)	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ _____ 600.00	
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. GARY LOWE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 341 W TUDOR STE 209		Transaction ID: PR16800016880	
City ANCHORAGE	State AK	Amount of Each Receipt this Period _____ 101.00	
Zip Code 99503		P/R Deduction (\$101.00 Monthly)	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ _____ 606.00	
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$101.00 Monthly)	

Full Name (Last, First, Middle Initial) C. DEXTER ANTONIO HARRIS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1013 FERNWOOD DR		Transaction ID: PR16804896880	
City MILLEDGEVILLE	State GA	Amount of Each Receipt this Period _____ 100.00	
Zip Code 31061		P/R Deduction (\$100.00 Monthly)	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ _____ 600.00	
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	301.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
ANDREW J JUNIKIEWICZ JR

Mailing Address **87 ASCOT DRIVE**

City **ELVERSON** State **PA** Zip Code **19520**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 / /

Transaction ID: PR16813766880

Amount of Each Receipt this Period
 50.00

P/R Deduction (\$50.00 Monthly)

B. Full Name (Last, First, Middle Initial)
JEFFERY TAL WEBB

Mailing Address **1600 ARKANSAS BLVD**

City **TEXARKANA** State **AR** Zip Code **71854**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 / /

Transaction ID: PR16814316880

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
DAVID S GRONDIN

Mailing Address **340 MAIN STREET**

City **WORCESTER** State **MA** Zip Code **01608**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 / /

Transaction ID: PR16814596880

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. RUBY A FERGUSON		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 223		Transaction ID: PR16816126880	
City CARTHAGE	State MS	Zip Code 39051	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. CHARLES HUGH MACKAY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 955 HARTMAN RUN ROAD SUITE 245		Transaction ID: PR16816536880	
City MORGANTOWN	State WV	Zip Code 26505	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) C. BRENT L GOODE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 11 PARK PLACE ROUTE 159		Transaction ID: PR16829546880	
City SWANSEA	State IL	Zip Code 62226	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. ROCKY B CUNNINGHAM JR		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P O BOX 84478		Transaction ID: PR16849946880	
City BATON ROUGE	State LA	Zip Code 70884	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) B. BENJAMIN KLINGER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4835 CORDELL AVE APT 824 #370		Transaction ID: PR16855156880	
City BETHESDA	State MD	Zip Code 20814	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) C. DIANA MARIE CASEY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 233 EAST CENTER AVE		Transaction ID: PR16855536880	
City SEBRING	State FL	Zip Code 33870	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$50.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) PAUL B ROBEDEAU		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16861386880
Mailing Address 11400 S E 8TH STREET #375		Amount of Each Receipt this Period 110.00
City BELLEVUE State WA Zip Code 98004		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	P/R Deduction (\$110.00 Monthly)

B. Full Name (Last, First, Middle Initial) ROGER L OLSON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16861396880
Mailing Address S 400 JEFFERSON #302		Amount of Each Receipt this Period 75.00
City SPOKANE State WA Zip Code 99204		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	P/R Deduction (\$75.00 Monthly)

C. Full Name (Last, First, Middle Initial) Paul Amos		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16884516880
Mailing Address P.O. Box 5605		Amount of Each Receipt this Period 414.00
City Columbus State GA Zip Code 31906		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC Occupation Chairman Of The Board		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2484.00	P/R Deduction (\$207.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	599.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Joey Loudermilk		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5905 Roaring Branch Rd		Transaction ID: PR16884546880
City State Zip Code Columbus GA 31904	Amount of Each Receipt this Period _____ 101.02	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation EVP, Legal & Gov't Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 606.12	
		P/R Deduction (\$50.51 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Gina Rigby		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 401 12th Street So #2216		Transaction ID: PR16884556880
City State Zip Code Arlington VA 22202	Amount of Each Receipt this Period _____ 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Federal Relations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 450.00	
		P/R Deduction (\$37.50 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. R. Anderson II		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 14 Ridge Top Ct.		Transaction ID: PR16884576880
City State Zip Code Columbus GA 31904	Amount of Each Receipt this Period _____ 54.16	
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 324.96	
		P/R Deduction (\$27.08 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 230.18
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. William Bugg Jr.		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16884586880
Mailing Address 1919 Christendom Drive		Amount of Each Receipt this Period 75.00
City Midlothian	State VA	Zip Code 23113
FEC ID number of contributing federal political committee. C		P/R Deduction (\$75.00 Semi-Monthly)
Name of Employer AFLAC	Occupation Sr VP, Corporate Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Salvador Diaz-Verson Jr.		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16884596880
Mailing Address 3 Mountainbrook Ct		Amount of Each Receipt this Period 119.16
City Columbus	State GA	Zip Code 31904
FEC ID number of contributing federal political committee. C		P/R Deduction (\$59.58 Semi-Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 714.96	

Full Name (Last, First, Middle Initial) C. George Jeter		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16884606880
Mailing Address 1215 Marina Cove Drive		Amount of Each Receipt this Period 162.50
City Columbus	State GA	Zip Code 31904
FEC ID number of contributing federal political committee. C		P/R Deduction (\$81.25 Semi-Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

SUBTOTAL of Receipts This Page (optional) ▶	356.66
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Huey Pennington Jr.		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 667 Mountain Brook Rd		Transaction ID: PR16884616880
City State Zip Code Fortson GA 31808	Amount of Each Receipt this Period _____ 50.49	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 302.94	P/R Deduction (\$50.49 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. E Stephen Purdom		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 8000 Warm Springs Rd		Transaction ID: PR16884626880
City State Zip Code Midland GA 31820	Amount of Each Receipt this Period _____ 141.84	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 851.04	P/R Deduction (\$141.84 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. Kenneth Janke Jr.		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6644 Woodberry Court		Transaction ID: PR16884636880
City State Zip Code Columbus GA 31904	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Sr VP, Investor Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 242.33
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Daniel Amos		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address P.O. Box 5566		Transaction ID: PR16884656880	
City Columbus	State GA	Zip Code 31906	Amount of Each Receipt this Period 100.98
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Chairman of the Board & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 605.88		
		P/R Deduction (\$50.49 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. Francis Land		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2801 Carson Dr.		Transaction ID: PR16884796880	
City Columbus	State GA	Zip Code 31906	Amount of Each Receipt this Period 63.84
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation 2nd VP, Market Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.12		
		P/R Deduction (\$31.92 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. John Moore II		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 8 Kylemore Court		Transaction ID: PR16884836880	
City Columbus	State GA	Zip Code 31904	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Marketing Coordinator II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		
		P/R Deduction (\$37.50 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	239.82
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Alfred Blackmar VI		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1711 Park Drive		Transaction ID: PR16884856880
City Columbus	State GA	Zip Code 31906
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.16
Name of Employer AFLAC	Occupation VP, Facilities Support	P/R Deduction (\$27.08 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.96	

Full Name (Last, First, Middle Initial) B. Joseph Smith Jr.		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 8880 River Rd.		Transaction ID: PR16884886880
City Columbus	State GA	Zip Code 31904
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 101.84
Name of Employer AFLAC	Occupation Sr VP, Chief Investment	P/R Deduction (\$50.92 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 611.04	

Full Name (Last, First, Middle Initial) C. Thomas McKenna		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1515 30th St.		Transaction ID: PR16884956880
City Columbus	State GA	Zip Code 31904
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer AFLAC	Occupation VP & Assoc Counsel, Legal	P/R Deduction (\$20.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	196.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Arthur Smith III		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 13 Pinecreek Drive		Transaction ID: PR16884966880	
City Columbus	State GA	Amount of Each Receipt this Period 100.00	
Zip Code 31904			
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation VP, Senior Associate Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. Steven Smith		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 738 Mobley Rd.		Transaction ID: PR16884976880	
City Columbus	State GA	Amount of Each Receipt this Period 100.00	
Zip Code 31904			
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation VP, Assistant General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. Jefferson Willis		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2306 Preston Dr.		Transaction ID: PR16884996880	
City Columbus	State GA	Amount of Each Receipt this Period 50.00	
Zip Code 31906			
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation VP, Senior Associate Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. James Hamby		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1940 Springdale Dr.		Transaction ID: PR16885006880	
City State Zip Code Columbus GA 31906	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$20.00 Semi-Monthly)		
Name of Employer Occupation AFLAC 2nd VP, Compliance	Aggregate Year-to-Date ▼ _____ 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Jeffery Link		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 540 Bluebird Trail		Transaction ID: PR16885016880	
City State Zip Code Fortson GA 31808	Amount of Each Receipt this Period _____ 60.00		
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$30.00 Semi-Monthly)		
Name of Employer Occupation AFLAC VP, Compliance	Aggregate Year-to-Date ▼ _____ 360.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Phillip Friou		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4646 Sears Road		Transaction ID: PR16885076880	
City State Zip Code Columbus GA 31907	Amount of Each Receipt this Period _____ 123.32		
FEC ID number of contributing federal political committee. C _____	P/R Deduction (\$61.66 Semi-Monthly)		
Name of Employer Occupation AFLAC Sr VP, Dir Government Relation	Aggregate Year-to-Date ▼ _____ 739.92		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 223.32
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) Kermitt Cox Mailing Address 218 Walden Chase Lane City State Zip Code Columbus GA 31909 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16885096880 Amount of Each Receipt this Period 52.00 P/R Deduction (\$26.00 Semi-Monthly)
Name of Employer Occupation AFLAC Sr VP, Corporate Actuary Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 286.00		

B. Full Name (Last, First, Middle Initial) Susan Mc Nerney Mailing Address 163 Poplar Cir. City State Zip Code West Point GA 31833 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16885106880 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer Occupation AFLAC VP, Associate Actuary Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00		

C. Full Name (Last, First, Middle Initial) Brett Gant Mailing Address 5002 Sedona Court City State Zip Code Columbus GA 31907 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16885116880 Amount of Each Receipt this Period 40.00 P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer Occupation AFLAC VP, Associate Actuary Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	192.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Angela Hart		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5810 Pierce Chapel Rd		Transaction ID: PR16885146880
City State Zip Code Midland GA 31820	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Sr VP - Community Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. Diane Orr		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7200 West Wynfield Lp.		Transaction ID: PR16885166880
City State Zip Code Midland GA 31820	Amount of Each Receipt this Period _____ 72.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation Sr VP, Claims, CCC, Adm Svc-Flex	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00	P/R Deduction (\$36.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. Sharon Douglas		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 60 Benfield Court		Transaction ID: PR16885186880
City State Zip Code Columbus GA 31907	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer AFLAC	Occupation VP, Chief People Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 222.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Janet Baker		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4900 Dumas St.		Transaction ID: PR16885236880	
City Columbus	State GA	Zip Code 31907	Amount of Each Receipt this Period 84.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation VP, Marketing Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00		
		P/R Deduction (\$42.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. Charles Hall Sr.		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1501 17th Ave		Transaction ID: PR16885246880	
City Columbus	State GA	Zip Code 31901	Amount of Each Receipt this Period 130.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation 2nd VP, Corporate Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00		
		P/R Deduction (\$65.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. Vilma Salaverria		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4638 Redding Ct.		Transaction ID: PR16885256880	
City Columbus	State GA	Zip Code 31909	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Marketing Services OH Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		
		P/R Deduction (\$20.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional)	254.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) Rebecca Davis		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16885266880
Mailing Address 423 Dalton Dr		Amount of Each Receipt this Period 165.00
City Columbus State GA Zip Code 31904	FEC ID number of contributing federal political committee. C	
Name of Employer AFLAC Occupation Sr VP, Chief Admin. Officer	Aggregate Year-to-Date ▼ 990.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$82.50 Semi-Monthly)	

B. Full Name (Last, First, Middle Initial) Kimberly Reynolds		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16885276880
Mailing Address 4343 Warm Springs Rd. Apt 306		Amount of Each Receipt this Period 50.00
City Columbus State GA Zip Code 31909	FEC ID number of contributing federal political committee. C	
Name of Employer AFLAC Occupation Marketing Training Director	Aggregate Year-to-Date ▼ 275.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$25.00 Semi-Monthly)	

C. Full Name (Last, First, Middle Initial) Thomas OKray		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR16885286880
Mailing Address 7195 Otter Drive		Amount of Each Receipt this Period 50.00
City Midland State GA Zip Code 31820	FEC ID number of contributing federal political committee. C	
Name of Employer AFLAC Occupation VP, Financial Compliance	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	P/R Deduction (\$25.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	265.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 129 / 187						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Charles Lake II		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1932 Wynnton Road		Transaction ID: PR16885326880	
City Columbus	State GA	Zip Code 31999	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Sr VP, Gen Counsel, AFLAC Intl		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. Samuel Warren		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2723 Fleetwood Dr.		Transaction ID: PR16885346880	
City Columbus	State GA	Zip Code 31906	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Account Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. James Angel		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1796 Switzkill Rd.		Transaction ID: PR16885356880	
City Berne	State NY	Zip Code 12023	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation 2nd VP, Privacy Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) Dr. Delmar Edwards		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4553 Kerz Ct.		Transaction ID: PR16885406880	
City Columbus	State GA	Zip Code 31906	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Board Of Directors		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

B. Full Name (Last, First, Middle Initial) George W. Ford		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4067 Steam Mill Road		Transaction ID: PR16885416880	
City Columbus	State GA	Zip Code 31907	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Board Of Directors		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

C. Full Name (Last, First, Middle Initial) Kenneth S. Janke, Sr.		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1515 East 11 Mile Road		Transaction ID: PR16885426880	
City Royal Oaks	State MI	Zip Code 48067	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Board Of Directors		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		
		P/R Deduction (\$125.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 / 187
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Glenn Vaughn, Jr.		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1801 Elmwood		Transaction ID: PR16885436880	
City State Zip Code Columbus GA 31906	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Board Of Directors		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		
		P/R Deduction (\$150.00 Monthly)	

Full Name (Last, First, Middle Initial) B. LORENZO V CUTAIA		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 6712 WASHINGTON AVE STE 211		Transaction ID: PR16885566880	
City State Zip Code EGG HARBOR TWNSHP NJ 08234	Amount of Each Receipt this Period 115.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.00		
		P/R Deduction (\$115.00 Monthly)	

Full Name (Last, First, Middle Initial) C. JEFF DALABA		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1020 SEVENTH NORTH STREET SUITE 110		Transaction ID: PR16885576880	
City State Zip Code LIVERPOOL NY 13088	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional)	365.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MICHAEL DESTEFANO		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 18 ROSEWOOD LANE		Transaction ID: PR16885596880	
City MANORVILLE	State NY	Zip Code 11949	Amount of Each Receipt this Period _____ 45.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 270.00		
		P/R Deduction (\$45.00 Monthly)	

Full Name (Last, First, Middle Initial) B. BENITO ROTONDI II		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 352 USHERS ROAD		Transaction ID: PR16885786880	
City BALLSTON LAKE	State NY	Zip Code 12019	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) C. LAURIE SMITH		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address P.O. BOX 1364		Transaction ID: PR16885856880	
City SOUTH GLEN FALLS	State NY	Zip Code 12803	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 245.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 133 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JEFFORY P MERTEN		Date of Receipt
Mailing Address PO BOX 590		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
SALEM	OR	97308
FEC ID number of contributing federal political committee.		Transaction ID: PR16886226880
<input type="text"/>		Amount of Each Receipt this Period
<input type="text"/>		<input type="text"/> 55.00
Name of Employer AFLAC	Occupation Associate	P/R Deduction (\$55.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 330.00	

Full Name (Last, First, Middle Initial) B. DIANNE RENEE EADS		Date of Receipt
Mailing Address PO BOX 190		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
MAGNOLIA	AR	71754
FEC ID number of contributing federal political committee.		Transaction ID: PR16886756880
<input type="text"/>		Amount of Each Receipt this Period
<input type="text"/>		<input type="text"/> 135.00
Name of Employer AFLAC	Occupation Associate	P/R Deduction (\$135.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 810.00	

Full Name (Last, First, Middle Initial) C. MICHAEL S CHILLE		Date of Receipt
Mailing Address 2 EXECUTIVE BLVD SUITE 400		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
SUFFREN	NY	10901
FEC ID number of contributing federal political committee.		Transaction ID: PR16886996880
<input type="text"/>		Amount of Each Receipt this Period
<input type="text"/>		<input type="text"/> 416.00
Name of Employer	Occupation	P/R Deduction (\$416.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 2496.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 606.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 134 / 187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
KEVIN GALLAGHER

Mailing Address 111-27 75th Road

City State Zip Code
Forest Hills NY 11375

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

Name of Employer Occupation
Aflac Associate

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

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16887016880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
BENJAMIN LEE ARCHER

Mailing Address 101 W ROBERT E LEE #300

City State Zip Code
NEW ORLEANS LA 70124

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

Name of Employer Occupation
AFLAC Associate

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

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16887526880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
MICHEAL W HART

Mailing Address 2204 AMBER CREEK CT

City State Zip Code
PEARLAND TX 77584

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

Name of Employer Occupation
AFLAC Associate

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

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16887746880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► 250.00

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

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

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

FOR LINE NUMBER: PAGE 135 / 187
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
PAULA C CUTTER

Mailing Address 3117 CAVERSHAM PARK LN

City State Zip Code
LEXINGTON KY 40509

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16887756880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
JOSEPH P CALARCO

Mailing Address 22 LINN AVENUE

City State Zip Code
AUBURN NY 13021

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16889016880

Amount of Each Receipt this Period
150.00

P/R Deduction (\$150.00 Monthly)

C. Full Name (Last, First, Middle Initial)
BRADLEY J LOWRAN

Mailing Address 620 B WOODMERE AVENUE

City State Zip Code
TRAVERSE CITY MI 49686

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16889126880

Amount of Each Receipt this Period
200.00

P/R Deduction (\$200.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **450.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 / 187

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
BRADLEY K HARRISON

Mailing Address **3432 W TRUMON BLVD STE 110 SUITE E**

City **JEFFERSON CITY** State **MO** Zip Code **65109**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16889136880

Amount of Each Receipt this Period
416.00

P/R Deduction (\$416.00 Monthly)

B. Full Name (Last, First, Middle Initial)
ANGELA R CONDON

Mailing Address **P O BOX 820**

City **ROCHESTER** State **IN** Zip Code **46975**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16889156880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

C. Full Name (Last, First, Middle Initial)
ROBERT L GOBLE

Mailing Address **1604 WESTGATE CIRCLE UNIT 400**

City **BRENTWOOD** State **TN** Zip Code **37027**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR16889546880

Amount of Each Receipt this Period
416.00

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	882.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. STEVE WHITTEN		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 7606 UNIVERSITY STE F		Transaction ID: PR17055816880	
City LUBBOCK	State TX	Zip Code 79423	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) B. CRAIG S DAVIES		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 700 PARKER SQUARE #195		Transaction ID: PR17055836880	
City FLOWER MOUND	State TX	Zip Code 75028	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) C. SCOTT WEBB		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 740 E CAMPBELL RD #115		Transaction ID: PR17055866880	
City RICHARDSON	State TX	Zip Code 75081	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	616.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. RONALD F BROWN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1355 LYNNFIELD RD BLDG B		Transaction ID: PR19244956880
City MEMPHIS State TN Zip Code 38119	Amount of Each Receipt this Period _____ 416.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$416.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00	

Full Name (Last, First, Middle Initial) B. JOHN D TYLER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 9247 N MERIDIAN STE 205		Transaction ID: PR19244966880
City INDIANAPOLIS State IN Zip Code 46260	Amount of Each Receipt this Period _____ 416.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$416.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00	

Full Name (Last, First, Middle Initial) C. GEORGE J GIAMARINO		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 360 HARDING AVENUE		Transaction ID: PR19245016880
City LYNDHURST State NJ Zip Code 07071	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Monthly)
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 882.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
HELEN-MARY SCHOEDLER

Mailing Address 33 KLAINS LN

City State Zip Code
OCEAN VIEW NJ 08230

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR19245076880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
AUDREY J SHRIVE

Mailing Address 7057 APPLETREE LOOP

City State Zip Code
COLORADO SPRINGS CO 80925

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR21190936880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
KENNETH C MEIER

Mailing Address 170 HAMILTON AVENUE SUITE 212

City State Zip Code
WHITE PLAINS NY 10601

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR23980686880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. JEFFREY W XAVER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4565 WILSON AVE		Transaction ID: PR23983006880
City GRANDVILLE State MI Zip Code 49418	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$100.00 Monthly)
Name of Employer Aflac Occupation Associate	Aggregate Year-to-Date ▼ _____ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. KEITH R BRICK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1244 MAIN STREET 1ST FLOOR		Transaction ID: PR24015716880
City WILLIMANTIC State CT Zip Code 06226	Amount of Each Receipt this Period _____ 55.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$55.00 Monthly)
Name of Employer AFLAC Occupation Associate	Aggregate Year-to-Date ▼ _____ 290.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MITCHELL J MCCALL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 629 BLONDEAU STREET		Transaction ID: PR24018906880
City KEOKUK State IA Zip Code 52632	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$100.00 Monthly)
Name of Employer Aflac Occupation Associate	Aggregate Year-to-Date ▼ _____ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 255.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 141 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MICHAEL FATHERREE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2480 FORTUNE DR STE 100		Transaction ID: PR24018916880	
City LEXINGTON	State KY	Zip Code 40509	Amount of Each Receipt this Period _____ 125.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00		
		P/R Deduction (\$125.00 Monthly)	

Full Name (Last, First, Middle Initial) B. R AARON WRIGHT		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 806 STONE CREEK PKWY STE 4		Transaction ID: PR24018926880	
City LOUISVILLE	State KY	Zip Code 40223	Amount of Each Receipt this Period _____ 416.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) C. KELLY D LEBSACK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1501 HIGHWOODS BLVD		Transaction ID: PR24018946880	
City GREENSBORO	State NC	Zip Code 27410	Amount of Each Receipt this Period _____ 416.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 957.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 / 187		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
LARRY A WESTON JR

Mailing Address 204 E ARLINGTON BLVD

City State Zip Code
GREENVILLE NC 27858

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR24018956880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MARK D BARBIER

Mailing Address 4200 CRUMS MILL ROAD

City State Zip Code
HARRISBURG PA 17112

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR24019146880

Amount of Each Receipt this Period
416.00

P/R Deduction (\$416.00 Monthly)

C. Full Name (Last, First, Middle Initial)
LARA K CARLSON

Mailing Address 121 EXECUTIVE CENTER DR

City State Zip Code
COLUMBIA SC 29210

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

Name of Employer AFLAC Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR24019156880

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	566.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 143 / 187
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
C HARVEY KING

Mailing Address **860 LOWCOUNTRY BLVD #B**

City **MT PLEASANT** State **SC** Zip Code **29464**

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

Name of Employer **Aflac** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt
 / /

Transaction ID: PR24019166880

Amount of Each Receipt this Period
 416.00

P/R Deduction (\$416.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MIKE GRASS

Mailing Address **21707 KINGSLAND BLVD**

City **KATY** State **TX** Zip Code **77450**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **690.00**

Date of Receipt
 / /

Transaction ID: PR24019176880

Amount of Each Receipt this Period
 115.00

P/R Deduction (\$115.00 Monthly)

C. Full Name (Last, First, Middle Initial)
DAVID N MORGAN

Mailing Address **4440 SPRINGFIELD RD**

City **GLEN ALLEN** State **VA** Zip Code **23060**

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

Name of Employer **Aflac** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2496.00**

Date of Receipt
 / /

Transaction ID: PR24019196880

Amount of Each Receipt this Period
 416.00

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **947.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. THOMAS E HATCHER JR		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 4950 BRAMBLETON AVE STE B		Transaction ID: PR24019206880
City ROANOKE	State VA	Zip Code 24018
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Aflac	Occupation Associate	P/R Deduction (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. LEANN POTTER		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2108 S 54TH ST STE 4		Transaction ID: PR24034146880
City ROGERS	State AR	Zip Code 72758
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer AFLAC	Occupation Associate	P/R Deduction (\$200.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. EDWARD J MOORE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 135 FRANCE ST		Transaction ID: PR24063736880
City TOM RIVER	State NJ	Zip Code 08753
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer AFLAC	Occupation Associate	P/R Deduction (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MICHAEL A SIMPSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 530 SILICON DRIVE SUITE 100		Transaction ID: PR24086156880	
City SOUTHLAKE	State TX	Zip Code 76092	Amount of Each Receipt this Period _____ 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) B. TERRANCE M LUCZAJ		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 10535 FOOTHILL BLVD SUITE 264		Transaction ID: PR24116166880	
City RANCHO CUCAMONGA	State CA	Zip Code 91730	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$100.00 Monthly)	

Full Name (Last, First, Middle Initial) C. ERIC MILLER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 333 W SANTA CLARA ST #610		Transaction ID: PR24124506880	
City SAN JOSE	State CA	Zip Code 95113	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFLAC	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1200.00		
		P/R Deduction (\$200.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 716.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. RACHEL A JOHANSEN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3796 MIRIAM DRIVE		Transaction ID: PR24126336880
City DOYLESTOWN	State PA	Zip Code 18901
Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Aflac	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 500.00	
P/R Deduction (\$100.00 Monthly)		

Full Name (Last, First, Middle Initial) B. DENNIS HARTIN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3568 TEAYS VALLEY RD #4		Transaction ID: PR24138096880
City HURRICANE	State WV	Zip Code 25526
Amount of Each Receipt this Period _____ 110.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Aflac	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 660.00	
P/R Deduction (\$110.00 Monthly)		

Full Name (Last, First, Middle Initial) C. JOHN B DRZEWIECKI JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 18 ALLEN STREET		Transaction ID: PR24159586880
City LEOMINSTER	State MA	Zip Code 01453
Amount of Each Receipt this Period _____ 416.00		
FEC ID number of contributing federal political committee. C		
Name of Employer AFLAC	Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2496.00	
P/R Deduction (\$416.00 Monthly)		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 626.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. DEANNA L SEVERN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 44 E MONTEREY AVE		Transaction ID: PR24217256880
City State Zip Code STOCKTON CA 95204	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$50.00 Monthly)
Name of Employer Occupation Aflac Associate	Aggregate Year-to-Date ▼ _____ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. RONALD D ROEGIERS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 110 NORTHWOOD CT		Transaction ID: PR24225116880
City State Zip Code NORTHFIELD NJ 08225	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$0.00)
Name of Employer Occupation _____	Aggregate Year-to-Date ▼ _____ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MARGARET A BRIDGMAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 13224 LYNETT CT		Transaction ID: PR24235716880
City State Zip Code BAKERSFIELD CA 93312	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$100.00 Monthly)
Name of Employer Occupation AFLAC Associate	Aggregate Year-to-Date ▼ _____ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 200.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
MARYANN M MEYERS

Mailing Address 6704 B PLEASURE AVENUE

City SEA ISLE CITY State NJ Zip Code 08243

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

Name of Employer AFLAC Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 / /

Transaction ID: PR24250466880

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$100.00 Monthly)

B. Full Name (Last, First, Middle Initial)
DANIEL LEE MCMAHON

Mailing Address 47 BASIN POINT RD

City SOUTH HARPSWELL State ME Zip Code 04079

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

Name of Employer Aflac Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 / /

Transaction ID: PR24274306880

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
WILLIAM M HURLEY

Mailing Address 1501 E MOCKINGBIRD #403

City VICTORIA State TX Zip Code 77904

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

Name of Employer Aflac Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 / /

Transaction ID: PR24277156880

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 149 / 187
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial)
ALBERT SHUST

Mailing Address **1170 RT 22 EAST**

City **BRIDGEWATER** State **NJ** Zip Code **08807**

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

Name of Employer **AFLAC** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **306.00**

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR2428596880

Amount of Each Receipt this Period
51.00

P/R Deduction (\$51.00 Monthly)

B. Full Name (Last, First, Middle Initial)
MICHAEL BERRY BREWTON

Mailing Address **P O BOX 1401**

City **RUSTON** State **LA** Zip Code **71273**

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

Name of Employer **Aflac** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR24289436880

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Monthly)

C. Full Name (Last, First, Middle Initial)
Mr. Gregory J Weeks, Sr.

Mailing Address **160 BRICKERTON STREET**

City **COLUMBUS** State **MS** Zip Code **39705**

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

Name of Employer **Aflac** Occupation **Associate**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1002.00**

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR57261246880

Amount of Each Receipt this Period
167.00

P/R Deduction (\$167.00 Monthly)

SUBTOTAL of Receipts This Page (optional)	318.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 150 / 187						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) Ms. Angela LYNN Harris Mailing Address 1475 HOGAN LN STE 107 City CONWAY State AR Zip Code 72034 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR60686356880 Amount of Each Receipt this Period 125.00 P/R Deduction (\$125.00 Monthly)
Name of Employer Aflac Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

B. Full Name (Last, First, Middle Initial) Mr Henry J Samaan Mailing Address 19 W 152 21ST PLACE City LOMBARD State IL Zip Code 60148 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR60686486880 Amount of Each Receipt this Period 150.00 P/R Deduction (\$150.00 Monthly)
Name of Employer Aflac Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

C. Full Name (Last, First, Middle Initial) JOSEPH A BUZZELLO Mailing Address 15315 MAGNOLIA BLVD#429 City SHERMAN OAKS State CA Zip Code 91403 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR62475326880 Amount of Each Receipt this Period 416.00 P/R Deduction (\$416.00 Monthly)
Name of Employer Aflac Occupation Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00	

SUBTOTAL of Receipts This Page (optional)	691.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 151 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. MICHAEL A ORTIZ		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2205 POINT BLVD		Transaction ID: PR62475896880	
City ELGIN	State IL	Zip Code 60123	Amount of Each Receipt this Period _____ 120.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 720.00		
		P/R Deduction (\$120.00 Monthly)	

Full Name (Last, First, Middle Initial) B. DANIEL E ALTMIRE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9840 MAIN STREET		Transaction ID: PR62504756880	
City DAMASCUS	State MD	Zip Code 20872	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$0.00)	

Full Name (Last, First, Middle Initial) C. D P SMITH		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 16671		Transaction ID: PR62557556880	
City JACKSON	State MS	Zip Code 39236	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac		Occupation Associate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1250.00		
		P/R Deduction (\$250.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 470.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. CHARLES EDWARD PERRY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5500 MING AVE		Transaction ID: PR62582206880
City State Zip Code BAKERSFIELD CA 93309	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Aflac Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00	P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial) B. JAMES (JAY) GRIMES		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 18302 HIGHWOODS PRESERVE PWY		Transaction ID: PR62582226880
City State Zip Code TAMPA FL 33647	Amount of Each Receipt this Period _____ 150.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Aflac Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 900.00	P/R Deduction (\$150.00 Monthly)

Full Name (Last, First, Middle Initial) C. JASON SCZEPANIAK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4565 WILSON AVE		Transaction ID: PR62582256880
City State Zip Code GRANDVILLE MI 49418	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Aflac Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00	P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 300.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 / 187
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. BRIAN J DAY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2193 ASSOCIATION DRIVE		Transaction ID: PR62582276880	
City OKEMOS	State MI	Zip Code 48864	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		
		P/R Deduction (\$200.00 Monthly)	

Full Name (Last, First, Middle Initial) B. TYE ELLIOTT		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5989 S HWY 94		Transaction ID: PR62582286880	
City SAINT CHARLES	State MO	Zip Code 63304	Amount of Each Receipt this Period 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2496.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) C. DENNIS J CASSENS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 3416 S ALPINE RD		Transaction ID: PR62599846880	
City ROCKFORD	State IL	Zip Code 61109	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Aflac	Occupation Associate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		
		P/R Deduction (\$100.00 Monthly)	

SUBTOTAL of Receipts This Page (optional)	716.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 154 / 187
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Full Name (Last, First, Middle Initial) JOSEPH WESLEY WILLINGHAM		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 601 S METCALF #200		Transaction ID: PR64214326880
City LOUISBURG State KS Zip Code 66053	Amount of Each Receipt this Period <input type="text"/> 100.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Monthly)
Name of Employer Aflac Occupation Associate	Aggregate Year-to-Date ▼ <input type="text"/> 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Paul Amos II		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1932 Wynnton Road		Transaction ID: PR70021346880
City Columbus State GA Zip Code 31999	Amount of Each Receipt this Period <input type="text"/> 416.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$208.00 Semi-Monthly)
Name of Employer Aflac Occupation EVP, U.S. Operations	Aggregate Year-to-Date ▼ <input type="text"/> 2496.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) LEWIS GATHRIGHT		Date of Receipt <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 6 North Main Street Suite 314		Transaction ID: PR70022146880
City Fairport State NY Zip Code 14450	Amount of Each Receipt this Period <input type="text"/> 125.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$125.00 Monthly)
Name of Employer Aflac Occupation Associate	Aggregate Year-to-Date ▼ <input type="text"/> 750.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> 641.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 155 / 187
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. EDWIN O'CONNOR		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2258 Washington Avenue		Transaction ID: PR70022476880	
City State Zip Code Seaford NY 11783	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Monthly)		
Name of Employer Occupation Aflac Associate	Aggregate Year-to-Date ▼ 600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mote Andrews III		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1932 Wynnton Road		Transaction ID: PR79892406880	
City State Zip Code Columbus GA 31999	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Semi-Monthly)		
Name of Employer Occupation Aflac Attorney	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	57545.15

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 156 / 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. 21st Century Majority Fund		Transaction ID: 15333610 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 6065 Roswell Road #2774		Amount of Each Disbursement this Period 5000.00
City Atlanta State GA Zip Code 30328		
Purpose of Disbursement	011 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Akaka In 2006		Transaction ID: 15076664 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address C/O 904 Nana Honua Street		Amount of Each Disbursement this Period 1000.00
City Honolulu State HI Zip Code 96825		
Purpose of Disbursement	011 Category/Type	
Candidate Name Sen. Daniel Kahikina Akaka		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) C. Congressman Joe Barton Committee, The		Transaction ID: 15077465 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 1444		Amount of Each Disbursement this Period 2500.00
City Ennis State TX Zip Code 75120		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Joe L. Barton		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

SUBTOTAL of Disbursements This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Melissa Bean For Congress		Transaction ID: 15688356 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address Post Office Box 3068		Amount of Each Disbursement this Period 1000.00
City Barrington State IL Zip Code 60010	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Melissa Bean		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) B. Marsha Blackburn For Congress Inc.		Transaction ID: 15333160 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address PO Box 682185		Amount of Each Disbursement this Period 2500.00
City Franklin State TN Zip Code 37068	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Marsha Blackburn		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) C. Blasdel For Congress		Transaction ID: 15688367 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address PO Box 479		Amount of Each Disbursement this Period 1000.00
City Lisbon State OH Zip Code 44432	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Chuck Blasdel		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Mary Bono Committee		Transaction ID: 15688327 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 3370		Amount of Each Disbursement this Period 2000.00
City State Zip Code Palm Springs CA 92263	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Mary Bono		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) B. Boswell For Congress		Transaction ID: 15688330 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address PO Box 6220		Amount of Each Disbursement this Period 1000.00
City State Zip Code Des Moines IA 50309	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Leonard L. Boswell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) C. Boyd For Congress		Transaction ID: 15335049 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 15703		Amount of Each Disbursement this Period 1000.00
City State Zip Code Tallahassee FL 32317	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Allen Boyd		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶

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

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Jeb Bradley For Congress		Transaction ID: 15688339 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 645 South Main Street		Amount of Each Disbursement this Period 2500.00
City Wolfeboro State NH Zip Code 03894	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Jeb Bradley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) B. Brady For Congress		Transaction ID: 15335686 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 8277		Amount of Each Disbursement this Period 2500.00
City The Woodlands State TX Zip Code 77387	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Kevin Brady		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) C. Friends of Conrad Burns -2006		Transaction ID: 15333385 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address Post Office Box 1532		Amount of Each Disbursement this Period 2500.00
City Billings State MT Zip Code 59103	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Conrad Burns		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 0	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Friends of Conrad Burns -2006		Transaction ID: 15688286 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address Post Office Box 1532		Amount of Each Disbursement this Period 2500.00
City Billings State MT Zip Code 59103		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Conrad Burns		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 0	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) B. Dave Camp For Congress 2006		Transaction ID: 15335307 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 5915 Eastman Ave. Suite 100		Amount of Each Disbursement this Period 2500.00
City Midland State MI Zip Code 48640		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. David Lee Camp		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) C. Cantor For Congress		Transaction ID: 15076985 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address P. O. Box 17813		Amount of Each Disbursement this Period 2500.00
City Richmond State VA Zip Code 23226		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Rep. Eric I. Cantor		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

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

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

Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Shelley Moore Capito For Congress		Transaction ID: 15336827 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 11519		Amount of Each Disbursement this Period 1000.00
City Charleston State WV Zip Code 25339	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Shelley Moore Capito		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 2		

Full Name (Last, First, Middle Initial) B. Capuano For Congress Committee		Transaction ID: 15335089 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address PO Box 440305		Amount of Each Disbursement this Period 1000.00
City Somerville State MA Zip Code 02144	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Michael E. Capuano		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 8		

Full Name (Last, First, Middle Initial) C. Carper For Senate		Transaction ID: 15336750 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 19 East Commons Blvd Second Floor		Amount of Each Disbursement this Period 1000.00
City New Castle State DE Zip Code 19720	Purpose of Disbursement 011 Category/Type	
Candidate Name Sen. Thomas R. Carper		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 2		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

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

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Friends Of Jim Clyburn		Transaction ID: 15077615 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address Post Office Box 12567		Amount of Each Disbursement this Period 1000.00
City Columbia State SC Zip Code 29211	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. James E. Clyburn		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) B. Cooper For Congress Committee		Transaction ID: 15077740 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 927		Amount of Each Disbursement this Period 1000.00
City Brentwood State TN Zip Code 37024	Purpose of Disbursement 011 Category/Type	
Candidate Name Mr. Jim Cooper		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) C. Texans For Henry Cuellar Congressional Campaign		Transaction ID: 15077770 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 1519 Washington Street 2nd Floor Suite 200		Amount of Each Disbursement this Period 1000.00
City Laredo State TX Zip Code 78042	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Henry Cuellar		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 28	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Geoff Davis For Congress		Transaction ID: 15076927 Date of Disbursement
Mailing Address 3161 Dixie Highway Suite F		<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
City Erlanger	State KY	Zip Code 41018
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="2000.00"/>
Candidate Name Mr. Geoffrey Davis		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: KY District: 4	2006 General	

Full Name (Last, First, Middle Initial) B. Geoff Davis For Congress		Transaction ID: 15688325 Date of Disbursement
Mailing Address 3161 Dixie Highway Suite F		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2006"/>
City Erlanger	State KY	Zip Code 41018
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Mr. Geoffrey Davis		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: KY District: 4	2006 General	

Full Name (Last, First, Middle Initial) C. Lincoln Davis For Congress		Transaction ID: 15336534 Date of Disbursement
Mailing Address PO Box 350		<input type="text" value="06"/> / <input type="text" value="12"/> / <input type="text" value="2006"/>
City Jamestown	State TN	Zip Code 38556
Purpose of Disbursement		Amount of Each Disbursement this Period
		<input type="text" value="1000.00"/>
Candidate Name Mr. Lincoln Davis		<input type="text" value="011"/> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: TN District: 4	2006 Primary	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Defend America		Transaction ID: 15077848 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 228 South Washington Street		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22314		
Purpose of Disbursement	011 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Doggett For Us Congress		Transaction ID: 15335723 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address PO Box 5843		Amount of Each Disbursement this Period 1000.00
City Austin State TX Zip Code 78763		
Purpose of Disbursement	011 Category/Type	
Candidate Name Rep. Lloyd Doggett		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) C. Friends Of Dick Durbin Committee		Transaction ID: 15077650 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address PO Box 1949		Amount of Each Disbursement this Period 1000.00
City Springfield State IL Zip Code 62705		
Purpose of Disbursement	011 Category/Type	
Candidate Name Sen. Richard J. Durbin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 1	Disbursement For: 2003 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 Primary	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Friends Of Rahm Emanuel		Transaction ID: 15335833 Date of Disbursement 06 / 12 / 2006	
Mailing Address P.O. Box 101124		Amount of Each Disbursement this Period 1000.00	
City Chicago State IL Zip Code 60610	Purpose of Disbursement 011 Category/Type	Candidate Name Rahm Emanuel	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General		

Full Name (Last, First, Middle Initial) B. Anna Eshoo For Congress		Transaction ID: 15335870 Date of Disbursement 06 / 12 / 2006	
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 1000.00	
City Sacramento State CA Zip Code 95814	Purpose of Disbursement 011 Category/Type	Candidate Name Rep. Anna G. Eshoo	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General		

Full Name (Last, First, Middle Initial) C. Harold Ford Jr For Tennessee		Transaction ID: 15076819 Date of Disbursement 06 / 06 / 2006	
Mailing Address 5120 Barry Road Suite 1300		Amount of Each Disbursement this Period 1000.00	
City Memphis State TN Zip Code 38117	Purpose of Disbursement 011 Category/Type	Candidate Name Mr. Harold Ford	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Jeff Fortenberry For United States Congress		Transaction ID: 15688350 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 1610 N Street		Amount of Each Disbursement this Period 2500.00
City Lincoln State NE Zip Code 68508	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Jeff Fortenberry		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) B. Freedom Fund		Transaction ID: 15076611 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 128 N. Columbus Street		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22314	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Hall For Congress Committee (Ralph Hall - Rockwall)		Transaction ID: 15077824 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address Post Office Box 711		Amount of Each Disbursement this Period 2000.00
City Rockwall State TX Zip Code 75087	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Ralph M. Hall		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Hastert For Congress Committee		Transaction ID: 15334474 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address P. O. Box 625 PO Box 625		Amount of Each Disbursement this Period 5000.00
City Batavia State IL Zip Code 60510	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. J. Dennis Hastert		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	
State: IL District: 14		

Full Name (Last, First, Middle Initial) B. Ruben Hinojosa For Congress		Transaction ID: 15688331 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 502 North 11th Street		Amount of Each Disbursement this Period 1000.00
City Mcallen State TX Zip Code 78501	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Ruben Hinojosa		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	
State: TX District: 15		

Full Name (Last, First, Middle Initial) C. Hoyer For Congress		Transaction ID: 15334543 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 7905 Malcolm Road Suite 102		Amount of Each Disbursement this Period 1000.00
City Clinton State MD Zip Code 20735	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Steny H. Hoyer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	
State: MD District: 5		

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Inglis For Congress Committee Inc.		Transaction ID: 15336029 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address Post Office Box 361		Amount of Each Disbursement this Period 1000.00
City Greenville State SC Zip Code 29602	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Robert Inglis		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) B. Committee To Re-Elect Bobby Jindal		Transaction ID: 15077086 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address PO Box 8628		Amount of Each Disbursement this Period 1000.00
City Metairie State LA Zip Code 70011	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Bobby Jindal		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) C. Friends Of Sam Johnson		Transaction ID: 15335349 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 1611 Avenue K		Amount of Each Disbursement this Period 2500.00
City Plano State TX Zip Code 75074	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Samuel Robert Johnson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Jim Jordan For Congress		Transaction ID: 15335189 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 1709 State Route 560 S		Amount of Each Disbursement this Period 2500.00
City Urbana State OH Zip Code 43078		
Purpose of Disbursement Candidate Name Mr. James Jordan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Sue Kelly For Congress		Transaction ID: 15077053 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address PO Box 599		Amount of Each Disbursement this Period 2000.00
City Katonah State NY Zip Code 10536		
Purpose of Disbursement Candidate Name Rep. Sue W. Kelly Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Kind For Congress Committee		Transaction ID: 15688321 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 205 South 5th Ave Suite 428		Amount of Each Disbursement this Period 1000.00
City La Crosse State WI Zip Code 54601		
Purpose of Disbursement Candidate Name Rep. Ron Kind Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶

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

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Larson For Congress		Transaction ID: 15688351 Date of Disbursement 06 / 28 / 2006
Mailing Address 29 Ruff Circle		Amount of Each Disbursement this Period 2500.00
City Glastonbury State CT Zip Code 06033	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. John B. Larson		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) B. Lautenberg For Senate		Transaction ID: 15336325 Date of Disbursement 06 / 12 / 2006
Mailing Address Gateway One 23rd Floor		Amount of Each Disbursement this Period 2000.00
City Newark State NJ Zip Code 07102	Purpose of Disbursement 011 Category/Type	
Candidate Name Sen. Frank R. Lautenberg		Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 2	Disbursement For: 2003 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2008 Primary	

Full Name (Last, First, Middle Initial) C. Leadership 21		Transaction ID: 15336174 Date of Disbursement 06 / 12 / 2006
Mailing Address 818 Connecticut Ave, NW Suite 1007		Amount of Each Disbursement this Period 2500.00
City Washington State DC Zip Code 20006	Purpose of Disbursement 011 Category/Type	
Candidate Name		Amount of Each Disbursement this Period 7000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Barbara Lee For Congress		Transaction ID: 15688317 Date of Disbursement 06 / 28 / 2006
Mailing Address 1736 Franklin Street #500		Amount of Each Disbursement this Period 1000.00
City Oakland State CA Zip Code 94612	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Barbara Lee		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 9	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) B. Levin For Congress		Transaction ID: 15076888 Date of Disbursement 06 / 06 / 2006
Mailing Address 230 North Avenue		Amount of Each Disbursement this Period 2500.00
City Mt. Clemens State MI Zip Code 48043	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Sander M. Levin		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) C. Friends Of Joe Lieberman		Transaction ID: 15688303 Date of Disbursement 06 / 28 / 2006
Mailing Address PO Box 231294 State House Square		Amount of Each Disbursement this Period 2500.00
City State House Square State CT Zip Code 06123	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Joseph I. Lieberman		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶

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

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Nita Lowey For Congress		Transaction ID: 15688318 Date of Disbursement 06 / 28 / 2006
Mailing Address PO Box 271		Amount of Each Disbursement this Period 1000.00
City White Plains	State NY	
Zip Code 10605		
Purpose of Disbursement 011 Category/Type		
Candidate Name Rep. Nita M. Lowey		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	
State: NY District: 18		

Full Name (Last, First, Middle Initial) B. Lucas For Congress		Transaction ID: 15333319 Date of Disbursement 06 / 12 / 2006
Mailing Address Post Office Box 1726		Amount of Each Disbursement this Period 2000.00
City Oklahoma City	State OK	
Zip Code 73101		
Purpose of Disbursement 011 Category/Type		
Candidate Name Rep. Frank D. Lucas		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	
State: OK District: 3		

Full Name (Last, First, Middle Initial) C. Donald A. Manzullo For Congress		Transaction ID: 15077022 Date of Disbursement 06 / 06 / 2006
Mailing Address PO Box 7783		Amount of Each Disbursement this Period 2500.00
City Rockford	State IL	
Zip Code 61126		
Purpose of Disbursement 011 Category/Type		
Candidate Name Rep. Donald A. Manzullo		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	
State: IL District: 16		

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶

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

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Markey Committee, The		Transaction ID: 15688305 Date of Disbursement 06 / 28 / 2006
Mailing Address P.O. Box 526		Amount of Each Disbursement this Period 1000.00
City Medford State MA Zip Code 02155	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Edward J. Markey		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) B. Matheson For Congress		Transaction ID: 15333274 Date of Disbursement 06 / 12 / 2006
Mailing Address 677 South 200 West Suite A		Amount of Each Disbursement this Period 2000.00
City Salt Lake City State UT Zip Code 84101	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. James D. Matheson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) C. Friends Of Carolyn Mccarthy		Transaction ID: 15334800 Date of Disbursement 06 / 12 / 2006
Mailing Address 151 Linden Road		Amount of Each Disbursement this Period 1000.00
City Mineola State NY Zip Code 11501	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Carolyn McCarthy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶

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

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Mccaul For Congress Inc		Transaction ID: 15688289 Date of Disbursement 06 / 28 / 2006
Mailing Address 5127 Nebraska Avenue Nw		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20008	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Michael McCaul		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) B. Mchenry For Congress		Transaction ID: 15688329 Date of Disbursement 06 / 28 / 2006
Mailing Address PO Box 1406		Amount of Each Disbursement this Period 1000.00
City Hickory State NC Zip Code 28601	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Patrick McHenry		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) C. Cathy Mcmorris For Congress		Transaction ID: 15076609 Date of Disbursement 06 / 06 / 2006
Mailing Address Box 137		Amount of Each Disbursement this Period 1000.00
City Spokane State WA Zip Code 99210	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Cathy McMorris		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Charlie Melancon Campaign Committee Inc		Transaction ID: 15336586 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 511 Congress St PO Box 549		Amount of Each Disbursement this Period 1000.00
City Napoleonville State LA Zip Code 70390		
Purpose of Disbursement Candidate Name Rep. Charles Melancon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Menendez For Senate		Transaction ID: 15334729 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 848		Amount of Each Disbursement this Period 1000.00
City Union City State NJ Zip Code 07087		
Purpose of Disbursement Candidate Name Rep. Robert Menendez Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Brad Miller For United States Congress		Transaction ID: 15334666 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address P.O. Box 10322		Amount of Each Disbursement this Period 1000.00
City Raleigh State NC Zip Code 27605		
Purpose of Disbursement Candidate Name Rep. Bradley Miller Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Moore For Congress		Transaction ID: 15077709 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address PO Box 14631		Amount of Each Disbursement this Period 1000.00
City Shawnee Mission State KS Zip Code 66285	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Dennis Moore		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) B. Moore For Congress		Transaction ID: 15336674 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address PO Box 14631		Amount of Each Disbursement this Period 2000.00
City Shawnee Mission State KS Zip Code 66285	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Dennis Moore		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) C. Bill Nelson For U S Senate		Transaction ID: 15077537 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address 500 Red Sail Way		Amount of Each Disbursement this Period 2500.00
City Satellite Beach State FL Zip Code 32937	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Bill Nelson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

A. Mark Pryor For Us Senate

Full Name (Last, First, Middle Initial)
Mark Pryor

Transaction ID: 15078189
Date of Disbursement
06 / 06 / 2006

Mailing Address PO Box 2720

City Little Rock State AR Zip Code 72203

Purpose of Disbursement
011
Category/Type

Candidate Name Mr. Mark Pryor

Office Sought: House Senate President
Disbursement For: 2003 Primary General Other (specify) ▼
State: AR District: 2 2008 Primary

Amount of Each Disbursement this Period
1000.00

B. Red Rooster Leadership PAC

Full Name (Last, First, Middle Initial)
Red Rooster Leadership PAC

Transaction ID: 15688343
Date of Disbursement
06 / 28 / 2006

Mailing Address 228 S. Washington St Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
011
Category/Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Amount of Each Disbursement this Period
5000.00

C. Rick Renzi For Congress

Full Name (Last, First, Middle Initial)
Rick Renzi

Transaction ID: 15077212
Date of Disbursement
06 / 06 / 2006

Mailing Address P.O. Box 2383

City Prescott State AZ Zip Code 86302

Purpose of Disbursement
011
Category/Type

Candidate Name Mr. Rick Renzi

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼
State: AZ District: 1 2006 Primary

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ► 7000.00

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

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

Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Roskam For Congress Committee		Transaction ID: 15335123 Date of Disbursement 06 / 12 / 2006
Mailing Address 423 W. Wesley Street		Amount of Each Disbursement this Period 1000.00
City Wheaton State IL Zip Code 60189	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Peter Roskam		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 6	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) B. Tim Ryan For Congress		Transaction ID: 15335938 Date of Disbursement 06 / 12 / 2006
Mailing Address 80 F St Nw Suite 804 Suite 804		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20001	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Timothy J. Ryan		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 17	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) C. Jim Ryun For Congress		Transaction ID: 15335011 Date of Disbursement 06 / 12 / 2006
Mailing Address PO Box 826		Amount of Each Disbursement this Period 1000.00
City Topeka State KS Zip Code 66601	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Jim R. Ryun		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. John Salazar For Congress		Transaction ID: 15076790 Date of Disbursement 06 / 06 / 2006
Mailing Address P.O. Box 534		Amount of Each Disbursement this Period 1000.00
City Pueblo State CO Zip Code 81002	Purpose of Disbursement 011 Category/Type	
Candidate Name Mr. John Salazar		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 3 Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary		

Full Name (Last, First, Middle Initial) B. Salazar For Senate		Transaction ID: 15688315 Date of Disbursement 06 / 28 / 2006
Mailing Address PO Box 600		Amount of Each Disbursement this Period 1000.00
City Denver State CO Zip Code 80201	Purpose of Disbursement 011 Category/Type	
Candidate Name Mr. Ken Salazar		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 2 Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2010 Primary		

Full Name (Last, First, Middle Initial) C. Sali For Congress		Transaction ID: 15688340 Date of Disbursement 06 / 28 / 2006
Mailing Address PO Box 71		Amount of Each Disbursement this Period 1000.00
City Kuna State ID Zip Code 83634	Purpose of Disbursement 011 Category/Type	
Candidate Name Mr. William Sali		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 1 Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Schultz Debbie Wasserman		Transaction ID: 15688364 Date of Disbursement 06 / 28 / 2006	
Mailing Address 4479 Foxglove Ln		Amount of Each Disbursement this Period 1000.00	
City Weston State FL Zip Code 33331	Purpose of Disbursement 011 Category/ Type	Candidate Name Debbie Schultz	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary		

Full Name (Last, First, Middle Initial) B. Schwarz For Congress		Transaction ID: 15334865 Date of Disbursement 06 / 12 / 2006	
Mailing Address Post Office Box 2063		Amount of Each Disbursement this Period 1000.00	
City Battle Creek State MI Zip Code 49016	Purpose of Disbursement 011 Category/ Type	Candidate Name Mr. John Schwarz	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary		

Full Name (Last, First, Middle Initial) C. Searchlight Leadership Fund		Transaction ID: 15688360 Date of Disbursement 06 / 28 / 2006	
Mailing Address 422 C Street. NE Lower Level		Amount of Each Disbursement this Period 2500.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement 011 Category/ Type	Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Sherman For Congress		Transaction ID: 15334609 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 555 South Flower Street Suite 4510		Amount of Each Disbursement this Period 1000.00
City Los Angeles State CA Zip Code 90071		
Purpose of Disbursement Candidate Name Rep. Brad Sherman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	011 Category/ Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General		

Full Name (Last, First, Middle Initial) B. Solis For Congress		Transaction ID: 15688322 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 6380 Wilshire Blvd. #1612		Amount of Each Disbursement this Period 1000.00
City Los Angeles State CA Zip Code 90048		
Purpose of Disbursement Candidate Name Rep. Hilda L. Solis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32	011 Category/ Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General		

Full Name (Last, First, Middle Initial) C. Stabenow For Us Senate		Transaction ID: 15076756 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 6
Mailing Address PO Box 4945		Amount of Each Disbursement this Period 1000.00
City East Lansing State MI Zip Code 48826		
Purpose of Disbursement Candidate Name Sen. Debbie Stabenow Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 2	011 Category/ Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Stupak For Congress		Transaction ID: 15688349 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 817 Ninth Avenue P.O. Box 156 PO Box 143		Amount of Each Disbursement this Period 1000.00
City Menominee State MI Zip Code 49858	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Bart Stupak		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	
State: MI District: 1		

Full Name (Last, First, Middle Initial) B. John Sullivan For Congress Inc		Transaction ID: 15333006 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address Post Office Box 470840		Amount of Each Disbursement this Period 1000.00
City Tulsa State OK Zip Code 74147	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. John Sullivan		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	
State: OK District: 1		

Full Name (Last, First, Middle Initial) C. John Sullivan For Congress Inc		Transaction ID: 15688326 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address Post Office Box 470840		Amount of Each Disbursement this Period 2000.00
City Tulsa State OK Zip Code 74147	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. John Sullivan		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	
State: OK District: 1		

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Sweeney For Congress Inc		Transaction ID: 15333112 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address Post Office Box 1465		Amount of Each Disbursement this Period 1000.00
City Clifton Park State NY Zip Code 12065	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. John E. Sweeney		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20		

Full Name (Last, First, Middle Initial) B. Mike Thompson For Congress		Transaction ID: 15335781 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95841	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Michael Thompson		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 1		

Full Name (Last, First, Middle Initial) C. Upton For All Of Us		Transaction ID: 15688354 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 490		Amount of Each Disbursement this Period 1000.00
City St. Joseph State MI Zip Code 49085	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Fred Upton		Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 6		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶

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

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Committee To Re-Elect Nydia M. Velazquez To Congre		Transaction ID: 15334971 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 1000.00
City Gaithersburg State MD Zip Code 20878	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Nydia M. Velazquez		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 Primary	

Full Name (Last, First, Middle Initial) B. Whalen For Congress		Transaction ID: 15688362 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address P. O. Box 750		Amount of Each Disbursement this Period 2000.00
City Bettendorf State IA Zip Code 52722	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Mr. Michael Whalen		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

Full Name (Last, First, Middle Initial) C. Heather Wilson For Congress		Transaction ID: 15688358 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 14070		Amount of Each Disbursement this Period 2500.00
City Albuquerque State NM Zip Code 87191	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Heather A. Wilson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
for each category of the
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Zinga For Congress		Transaction ID: 15688300 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 1222 PO Box 1222		Amount of Each Disbursement this Period 1000.00
City Moline State IL Zip Code 61266	Purpose of Disbursement 011 Category/Type	
Candidate Name Andrea Zinga		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 General	
State: IL District: 17		

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	146500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. SHAWN C HAMMER		Transaction ID: 15077867	
Mailing Address 11418 BENT WAY		Date of Disbursement 06 / 06 / 2006	
City CYPRESS	State TX	Zip Code 77429	Amount of Each Disbursement this Period 450.00
Purpose of Disbursement	010 Category/Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. PAUL J MALO		Transaction ID: 15077865	
Mailing Address 1540 WESTBROOK PLAZA DR		Date of Disbursement 06 / 06 / 2006	
City WINSTON SALEM	State NC	Zip Code 27103	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement	010 Category/Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	650.00
TOTAL This Period (last page this line number only)	650.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AFLAC PAC

Full Name (Last, First, Middle Initial) A. Columbus Bank & Trust		Transaction ID: 15936313																					
Mailing Address P.O. Box 120		Date of Disbursement																					
City Columbus State GA Zip Code 31902		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		3	0		2	0	0	6														
Purpose of Disbursement		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td>21.70</td> </tr> </table>		21.70																			
21.70																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type																					
State: District:		001																					
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							

SUBTOTAL of Disbursements This Page (optional)	▶	21.70
TOTAL This Period (last page this line number only)	▶	21.70