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### **FEC** FORM 3X

### REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Amalgamated Life Insurance Company Political Action Committee 333 Westchester Ave ADDRESS (number and street) Check if different than previously White Plains NY 10604 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE A CITY A IS THIS NEW **AMENDED** C00369827 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Χ Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 25 2008 12 3 1 2008 1 1 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Michael Hirsch Type or Print Name of Treasurer Electronically Filed by Michael Hirsch 0 1 29 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Amalgamated Life Insurance Company Political Action Committee D D D 25 12 2008 3 1 2008 1.1 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 51606.71 2008 January 1 (b) Cash on Hand at 32695.57 Begining of Reporting Period ..... 1029.61 12118.47 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 33725.18 63725.18 6(a) and 6(c) for Column B) ..... 0.00 30000.00 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 33725.18 33725.18 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Amalgamated Life Insurance Company Political Action Committee

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	988.00	7708.00
	(ii) Unitemized	20.00	4216.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	1008.00	11924.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1008.00	11924.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
4. 5.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	21.61	194.47
8.			
	(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
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1029.61	12118.47
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	1029.61	12118.47

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 20000.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 0.00 10000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) ..... (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) ......... 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share ..... 0.00 0.00 (ii) "Levin" Share ..... (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds ..... (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 0.00 30000.00 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 0.00 30000.00 from Line 31).....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	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)	1008.00	11924.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	1008.00	11924.00
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

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  Any information copied from such Benorts are	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 17 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Comp	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Nina Chakraborty Mailing Address 244 Riverside  City New York  FEC ID number of contributing federal political committee.  Name of Employer Amalgamated Life Insurance Company Receipt For: Primary General	State Zip Code NY 10025  C  Occupation Executive - VP  Aggregate Year-to-Date ▼	Date of Receipt  12 05 2008  Transaction ID: SA11AI.9507  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Nina Chakraborty Mailing Address 244 Riverside  City New York  FEC ID number of contributing federal political committee.  Name of Employer Amalgamated Life Insurance Company Receipt For:	State Zip Code NY 10025  C  Occupation Executive - VP  Aggregate Year-to-Date	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Kevin Cleary Mailing Address 3111 Timothy Road City Bellmore  FEC ID number of contributing federal political committee.	State Zip Code NY 11710	Date of Receipt  1 2 0 5 2 0 0 8  Transaction ID: SA11AI.9508  Amount of Each Receipt this Period  20.00
Name of Employer Amalgamated Life Insurance Company Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	Occupation AVP  Aggregate Year-to-Date   500.00	40.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>X)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 7/17   (check only one)     X   11a	
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.	
NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Comp				
Full Name (Last, First, Middle Initial) Kevin Cleary			Date of Receipt	
Mailing Address 3111 Timothy Road	12 19 2008			
City Bellmore	State NY	Zip Code 11710	Transaction ID: SA11AI.9531  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	11110	20.00	
Name of Employer Amalgamated Life Insurance Company	Occupation AVP	n		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 520.00		
Full Name (Last, First, Middle Initial) Martin R. Cohen			Date of Receipt	
Mailing Address 63 Jefferson Avenue	12 05 2008			
City	ity State Zip Code Slip Terrace NY 11752			
FEC ID number of contributing federal political committee.		11702	Amount of Each Receipt this Period  30.00	
Name of Employer Amalgamated Life Insurance Company	Occupation Chief Act			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	]	
Full Name (Last, First, Middle Initial) Martin R. Cohen			Date of Receipt	
Mailing Address 63 Jefferson Avenue	12 19 2008			
City Islip Terrace	State NY	Zip Code 11752	Transaction ID: SA11AI.9547  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.		11702	30.00	
Name of Employer Amalgamated Life Insurance Company	Occupation Chief Act	tuary		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 780.00	]	
SUBTOTAL of Receipts This Page (optional	) )		80.00	

ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 8/17   (check only one)     X   11a		
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.		
NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Compa	any Political A	ction Committee			
Full Name (Last, First, Middle Initial)			Date of Receipt		
	Patrick J. Coughlan  Mailing Address 5933 Palmetto Street				
City	1 2 0 5 2 0 0 8 Transaction ID: SA11AI.9510				
Philadelphia FEC ID number of contributing federal political committee.	C	19120	Amount of Each Receipt this Period  20.00		
Name of Employer	Occupatio VP	n			
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Patrick J. Coughlan			Date of Receipt		
Mailing Address 5933 Palmetto Stree	12 19 2008				
City Philadelphia	Transaction ID: SA11AI.9532				
Philadelphia PA  FEC ID number of contributing federal political committee.		19120	Amount of Each Receipt this Period 20.00		
Name of Employer	Occupatio VP	n	7		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 520.00			
Full Name (Last, First, Middle Initial) Michael Hirsch			Date of Receipt		
Mailing Address 91 Bradford Lane	1 2 0 5 2 0 0 8				
City	State NJ	Zip Code 08536	Transaction ID: SA11AI.9523  Amount of Each Receipt this Period		
Plainsboro NJ  FEC ID number of contributing federal political committee.		06330	40.00		
Name of Employer Amalgamated Life Insurance Company	Occupatio Exec. VF				
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	]		
SUBTOTAL of Receipts This Page (optional)			80.00		

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 17 (check only one)    X
or for cor	mation copied from such Reports and S mmercial purposes, other than using the E OF COMMITTEE (In Full) Igamated Life Insurance Compan	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	lame (Last, First, Middle Initial)	y Folitical A	Clion Committee	
	nel Hirsch ng Address 91 Bradford Lane			Date of Receipt  1 2 1 9 2 0 0 8
City Plair	nsboro	State NJ	Zip Code 08536	Transaction ID: SA11AI.9544  Amount of Each Receipt this Period
FEC	ID number of contributing al political committee.	C		40.00
Amal <u>Com</u> r	e of Employer gamated Life Insurance pany pt For:	Occupatio Exec. VF		
	Primary General Other (specify) ▼	39 73	1040.00	
Arthur	lame (Last, First, Middle Initial)  M. Kurek  g Address 10 Claremont Avenue	Date of Receipt		
	g Address To Claremont Avenue	12 05 2008		
City Bloo	mfield	State NJ	Zip Code 07003	Transaction ID: SA11AI.9511  Amount of Each Receipt this Period
FEC I	ID number of contributing all political committee.	C	07000	40.00
Name Amal Comp	e of Employer gamated Life Insurance pany	Occupatio Senior V	n ice President	
	pt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	lame (Last, First, Middle Initial)	Date of Receipt		
Mailin	g Address 10 Claremont Avenue	12 19 2008		
City		State	Zip Code	Transaction ID: SA11AI.9533
	mfield	NJ	07003	Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		40.00
Amal <u>Com</u> r			ice President	
	pt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1040.00	
SUBTO	TAL of Receipts This Page (optional)			120.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 17 (check only one)    X   11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Compar	e name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Claire Levitt-Davis Mailing Address 84 Boulder Ridge Roa  City Scarsdale  FEC ID number of contributing federal political committee.  Name of Employer Amalgamated Life Insurance Company Receipt For: Primary General Other (specify)	State Zip Code NY 10583  C  Occupation President-AMM  Aggregate Year-to-Date   500.00	Date of Receipt  1 2
Full Name (Last, First, Middle Initial) Claire Levitt-Davis Mailing Address 84 Boulder Ridge Roa  City Scarsdale  FEC ID number of contributing federal political committee.  Name of Employer Amalgamated Life Insurance Company Receipt For:	State Zip Code NY 10583  C  Occupation President-AMM Aggregate Year-to-Date	Date of Receipt    M
Full Name (Last, First, Middle Initial) Paul Mallen Mailing Address 34 Michelle Way  City Pine Brook  FEC ID number of contributing federal political committee.	State Zip Code NJ 07058	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Amalgamated Life Insurance Com Receipt For: □ Primary □ General □ Other (specify) ▼  SUBTOTAL of Receipts This Page (optional) .	Occupation CFO  Aggregate Year-to-Date   360.00	80.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 17 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A or	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Compa	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions
	Full Name (Last, First, Middle Initial)	ny Political A	ction Committee	
۱.	Paul Mallen  Mailing Address 34 Michelle Way			Date of Receipt  1 2 1 9 2 0 0 8
	City Pine Brook	State NJ	Zip Code 07058	Transaction ID: SA11AI.9534
	FEC ID number of contributing federal political committee.	C	07038	Amount of Each Receipt this Period 40.00
	Name of Employer Amalgamated Life Insurance Com Receipt For:	Occupation CFO	n e Year-to-Date ▼	
	Primary General Other (specify) ▼	/ Aggi Ogdic	400.00	
 3.	Full Name (Last, First, Middle Initial) Robert McCready  Mailing Address 72 Humphrey Drive	Date of Receipt		
	City	1 2 0 5 2 0 0 8 Transaction ID: SA11AI.9513		
	Syosset	State NY	Zip Code 11791	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer Amalgamated Life Insurance	Occupation AVP-Gro		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Robert McCready	Date of Receipt		
	Mailing Address 72 Humphrey Drive	12 19 2008		
	City	State	Zip Code	Transaction ID: SA11AI.9535
	Syosset FEC ID number of contributing	NY	11791	Amount of Each Receipt this Period
	federal political committee.	C		10.00
	Name of Employer Amalgamated Life Insurance	Occupation AVP-Gro		
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
5	SUBTOTAL of Receipts This Page (optional)	1		60.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	BX)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 17 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Con	ng the name and add	dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joel E. Mueller Mailing Address 44 East Madison	Avenue		Date of Receipt  1 2 0 5 2 0 0 8
City Florham Park FEC ID number of contributing	State NJ	Zip Code 07932	Transaction ID: SA11AI.9514  Amount of Each Receipt this Period
federal political committee.  Name of Employer Amalgamated Life Insurance Company Receipt For: Primary General Other (specify)		nnvestment Year-to-Date  250.00	10.00
Full Name (Last, First, Middle Initial) Joel E. Mueller Mailing Address 44 East Madison	Date of Receipt  1 2 1 9 2 0 0 8		
City	Transaction ID: SA11AI.9536		
Florham Park	NJ	07932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			10.00
Name of Employer Amalgamated Life Insurance Company Receipt For:	<del> </del>	nvestment	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	]
Full Name (Last, First, Middle Initial) William Porozok	Date of Receipt		
Mailing Address 68 Mitchell Avenue			12 05 2008
City	State	Zip Code	Transaction ID: SA11AI.9515
Piscataway  FEC ID number of contributing federal political committee.	NJ C	08854	Amount of Each Receipt this Period  20.00
Name of Employer Amlagamated Life Insurance Company	Occupation AVP Acc	ounting	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	nal)		40.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 17 (check only one)    X
A	ny information copied from such Reports and for commercial purposes, other than using t	Statements mand and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Compa	any Political A	ction Committee	
۷.	Full Name (Last, First, Middle Initial) William Porozok Mailing Address 68 Mitchell Avenue			Date of Receipt
				12 19 2008
	City Piscataway	State NJ	Zip Code 08854	Transaction ID: SA11AI.9537  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00004	20.00
	Name of Employer Amlagamated Life Insurance Company	Occupatio AVP Acc		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00	
	Full Name (Last, First, Middle Initial) Victoria R. Sartor	Date of Receipt		
	Mailing Address 117 Burke Place	12 05 2008		
	City	State	Zip Code	Transaction ID: SA11AI.9516
	Paramus NJ  FEC ID number of contributing federal political committee.		07652	Amount of Each Receipt this Period
				30.00
	Name of Employer Amalgamated Life Insurance Company	Occupatio VP, Fina	n nce Reporting	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General  Other (specify) ▼	0 0	750.00	
	Full Name (Last, First, Middle Initial) Victoria R. Sartor			Date of Receipt
	Mailing Address 117 Burke Place	12 19 2008		
	City	State	Zip Code	Transaction ID: SA11AI.9538
	Paramus	NJ	07652	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			30.00
	Name of Employer Amalgamated Life Insurance Company		nce Reporting	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 780.00	
Г	SUBTOTAL of Receipts This Page (optional)			80.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 17 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to	
Amalgamated Life Insurance Compar	ny Political Action Committee	
Full Name (Last, First, Middle Initial) Mark Schwartz		Date of Receipt
Mailing Address 130 Aspinwall Street	Ohaha 7in Ohaha	12 05 2008
City <u>Staten Island</u>	State Zip Code NY 10307	Transaction ID: SA11AI.9517  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Amalgamated Life Insurance Company	Occupation Corporate ATT.	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mark Schwartz	Date of Receipt	
Mailing Address 130 Aspinwall Street	12 19 2008	
City	State Zip Code	Transaction ID: SA11AI.9539
Staten Island	NY 10307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Amalgamated Life Insurance Company	Occupation Corporate ATT.	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	
Full Name (Last, First, Middle Initial) Lee Souksay	L	Date of Receipt
Mailing Address 12 Bev Avenue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: SA11AI.9518
Piscataway  NJ 08854  FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period  14.00
Name of Employer Amalgamated Life Insurance Company  Occupation Exec. Dir. Fund & Pool		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	]
SUBTOTAL of Receipts This Page (optional) .		54.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>.</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 15/17   (check only one)     X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Comp			
Full Name (Last, First, Middle Initial) Lee Souksay			Date of Receipt
Mailing Address 12 Bev Avenue	M M / D D / Y Y Y Y Y Y 12 19 2008		
City Piscataway	State NJ	Zip Code 08854	Transaction ID: SA11AI.9540  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		14.00
Name of Employer Amalgamated Life Insurance Company Receipt For: Primary General		r. Fund & Pool e Year-to-Date ▼	
Other (specify) ▼  Full Name (Last, First, Middle Initial)	0 0	364.00	Deta of Respire
Thomas G. Thompson  Mailing Address 25 South Eliott PA	Date of Receipt    M   M   D   D   V   Y   Y   Y   Y   Y   Y   Y   Y   Y		
City Brooklyn	State NY	Zip Code 11217	Transaction ID: SA11AI.9519  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			30.00
Name of Employer Amalgamated Life Insurance Company	Occupatio VP	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Thomas G. Thompson			Date of Receipt
Mailing Address 25 South Eliott PA	12 19 2008		
City Brooklyn	State NY	Zip Code 11217	Transaction ID: SA11AI.9541 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			30.00
Name of Employer Amalgamated Life Insurance Company  Occupation VP			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 780.00	
SUBTOTAL of Receipts This Page (optiona	I ])		74.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16/17   (check only one)     X   11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Comp			
Full Name (Last, First, Middle Initial)  David Walsh			Date of Receipt
Mailing Address 34 Reservoir Ct.			12 05 2008
City Carmel	State NY	Zip Code 10512	Transaction ID: SA11AI.9520  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10012	120.00
Name of Employer Amalgamated Life Insurance Com	Occupatio Presiden		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1320.00	
Full Name (Last, First, Middle Initial) David Walsh			Date of Receipt
Mailing Address 34 Reservoir Ct.			12 19 2008
City Carmel	State NY	Zip Code	Transaction ID: SA11AI.9542
FEC ID number of contributing federal political committee.	C	10512	Amount of Each Receipt this Period  120.00
Name of Employer Amalgamated Life Insurance Com	Occupatio Presiden		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1440.00	
Full Name (Last, First, Middle Initial) Jeffrey Warbet			Date of Receipt
Mailing Address 49-10 Scarborough Street			1 2 0 5 2 0 0 8
City Freehold	State Zip Code NJ 07728		Transaction ID: SA11AI.9521
FEC ID number of contributing federal political committee.	C	07720	Amount of Each Receipt this Period  20.00
Name of Employer Amalgamated Life Insurance Company	<del>- ' '</del>	President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		260.00

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 17 / 17
ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(Check only one)
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Amalgamated Life Insurance Company	Political Action Committee	
Full Name (Last, First, Middle Initial)  Jeffrey Warbet  Mailing Address 49-10 Scarborough Stre  City	eet State Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Freehold  FEC ID number of contributing federal political committee.  Name of Employer	NJ 07728  C Occupation	Amount of Each Receipt this Period  20.00
Amalgamated Life Insurance Company Receipt For: Primary Other (specify)	Sr. Vice President  Aggregate Year-to-Date ▼  520.00	

SUBTOTAL of Receipts This Page (optional)		20.00
TOTAL This Period (last page this line number only)	<b>•</b>	988.00