REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUN 22 12 52 PM '99

USE FEC MAILING LABEL OR TYPE OR PRINT

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

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

CITY, STATE and ZIP CODE
Washington DC 20006

2. FEC IDENTIFICATION NUMBER
C00005249

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

4. TYPE OF REPORT

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

Monthly Report Due On:
☐ February 20 ☒ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 5/1/99 through 5/31/99		
6. (a) Cash on Hand January 1, 19 99		$ 485,731.48
(b) Cash on Hand at Beginning of Reporting Period	$ 363,243.49	
(c) Total Receipts (from Line 19)	$ 70,872.73	$ 392,276.28
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 434,116.22	$ 878,007.76
7. Total Disbursements (from Line 30)	$ 94,815.93	$ 538,707.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 339,300.29	$ 339,300.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 34,793.98	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Kevin Madden

Signature of Treasurer
Kevin M Madden CPA

Date
6/21/99

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

FEC FORM 3X
(revised 9/98)

SEQUENCE

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD FROM 5/1/99 TO: 5/31/99

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	10,489.54	56,586.24	11(a)(i)
ii. Unitemized	59,016.04	333,865.38	11(a)(ii)
iii. Total (add i and ii) ➤	69,505.58	390,451.62	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	69,505.58	390,451.62	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	1,367.15	1,824.66	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	70,872.73	392,276.28	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	70,872.73	392,276.28	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	28,315.93	330,184.97	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	28,315.93	330,184.97	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	66,500.00	206,000.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees		2,522.50	28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤		2,522.50	28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	94,815.93	538,707.47	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	94,815.93	538,707.47	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	69,505.58	390,451.62	32
33. Total Contribution Refunds (from line 28d)		2,522.50	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	69,505.58	387,929.12	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	28,315.93	330,184.97	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	28,315.93	330,184.97	37

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Stephen D. Andersen 7431 "O" Street Lincoln, NE 68510-2444 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 243.60	05/10/99	42.00
Robert B. Anderson, CLU P.O. Box 127 Jonesborough, TN 37659-0127 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 252.00	05/10/99	50.40
Russell S. Andrews, CLU, ChFC 306 Hawley Avenue Syracuse, NY 13203-2344 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 212.50	05/03/99	42.50
Dale M. Bayard 207-B Cities Service Highway Sulphur, LA 70663 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
Craig Beachnaw, LIC 3217 West Saginaw Lansing, MI 48917-2310 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
Fred R. Bean, CLU 8201 Cantrell Road, #265 Little Rock, AR 72227-2400 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 252.00	05/10/99	50.40
Kent A. Bennett, LUTCF 514 Pine Street Williamsport, PA 17701-5047 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00

SUBTOTAL of Receipts This Page (optional) 311.30

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

FE7AN047

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. John J. Bradley, CLU 100 Congress Street Quincy, MA 02169-0906 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed Occupation: insurance agent Aggregate Year-to-Date $ 208.30	05/10/99	41.66
B. John Proctor Braica, CLU, ChFC 108 Howland Avenue East Providence, RI 02914-3055 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed Occupation: insurance agent Aggregate Year-to-Date $ 325.50	05/10/99	5.10
C. Gary A. Bramon, CLU, ChFC 890 Lamont Avenue, Ste. 201 Novato, CA 94945-4100 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed Occupation: insurance agent Aggregate Year-to-Date $ 212.50	05/10/99	42.50
D. David Burstin, CLU, ChFC, RHU Six PPG Place, Ste. 1150 Pittsburgh, PA 15222-5406 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed Occupation: insurance agent Aggregate Year-to-Date $ 500.00	05/28/99	250.00
E. Louis J. Cassara, CLU, ChFC 2015 Spring Road, #100 Oak Brook, IL 60523-1837 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed Occupation: insurance agent Aggregate Year-to-Date $ 240.00	05/10/99	120.00
F. Lawrence A. Chargin 1350 E Spruce, Ste. 100 Fresno, CA 93720 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed Occupation: insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
G. Thomas R. Clark, CLU, ChFC 974 73rd Street, #26 Des Moines, IA 50312-1026 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed Occupation: insurance agent Aggregate Year-to-Date $ 300.00	05/10/99	60.00

SUBTOTAL of Receipts This Page (optional)	561.26
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code David Lewis Corris 462 S 4th Avenue, #1900 Louisville, KY 40202-3445 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date: $ 252.00	05/10/99	50.40
B. Full Name, Mailing Address and ZIP Code Orris "Vic" W. Crum 7300 W. 110th Street, #950 Overland Park, KS 66210-2350 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date: $ 252.00	05/10/99	50.40
C. Full Name, Mailing Address and ZIP Code R. Scott Culbertson, CFP, CEBS 2023 Cato Drive, #102 State College, PA 16901-2765 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date: $ 210.00	05/10/99	42.00
D. Full Name, Mailing Address and ZIP Code Vincent M. D'Addona, CLU, ChFC 140 Broadway, 22nd Floor New York, NY 10005 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date: $ 212.50	05/10/99	42.50
E. Full Name, Mailing Address and ZIP Code John A. Davidson, LUTCF 1329 E Thousand Oaks Blvd., Ste. 128 Thousand Oaks, CA 91362 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date: $ 210.00	05/10/99	42.00
F. Full Name, Mailing Address and ZIP Code Joseph L. Davis, CLU, ChFC, CFP 1625 K Street N.W., #400 Washington, DC 20006-1604 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date: $ 252.00	05/10/99	50.40
G. Full Name, Mailing Address and ZIP Code Robert J. DeValle, CLU, ChFC 1500 Main Street Springfield, MA 01115-5167 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date: $ 250.00	05/26/99	250.00

SUBTOTAL of Receipts This Page (optional)	527.70
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 4 OF 15

FOR LINE NUMBER 11(a)(i)

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

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code David S. Dickenson, II, CLU, ChFC 29500 Aurora Road, #2 Solon, OH 44139 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
B. Full Name, Mailing Address and ZIP Code Michael D. Dixon, CLU 4505 Las Virgenes Road, #200 Calabasas, CA 91302-1956 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
C. Full Name, Mailing Address and ZIP Code William H. Dodd, CLU 115 Broadway, 17th Floor New York, NY 10006-2601 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 300.00	05/17/99	300.00
D. Full Name, Mailing Address and ZIP Code Daniel Eddleman, CLU 475 Sansome Street, #1800 San Francisco, CA 94111-3141 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
E. Full Name, Mailing Address and ZIP Code Gerald E. Ferrier, LUTCF 1117 Ellis Street, #C-D Bellingham, WA 98225-5203 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
F. Full Name, Mailing Address and ZIP Code Jeffery L. Ferrier, LUTCF 1117 Ellis Street, #C-D Bellingham, WA 98225-5203 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 250.00	05/10/99	50.00
G. Full Name, Mailing Address and ZIP Code Donald Eichelberger, CLU 209 East San Marnan Drive Waterloo, IA 50702-5839 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 252.00	05/10/99	50.40

SUBTOTAL of Receipts This Page (optional)	568.40
TOTAL This Period (last page this line number only)	

FE7AN047

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Thomas F. Flournoy, Jr., CLU P.O. Box 1013 Macon, GA 31202-1013 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
Steven M. Frank, CLU 21800 Oxnard Street, Ste. 400 Woodland Hills, CA 91367 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
Debra L. Franklin, CFP, CLU 888 7th Avenue, Ste. 201 New York, NY 10106-0298 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 252.00	05/10/99	50.40
Peter Pulchiron, CLU, LUTCF 405 Enfrente Drive, #100 Novato, CA 94949-7206 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 300.00	05/10/99	60.00
Alfred A. Gelfond 1973 Washington Valley Road Martinsville, NJ 08836-2053 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 300.00	05/10/99	300.00
Seymour Geller, CFP, ChFC, CLU 11 West 42nd Street, 29th Floor New York, NY 10036-8002 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 250.00	05/24/99	250.00
Richard E. Geno, CLU, ChFC 1042 West Hedding, #200 San Jose, CA 95126-1291 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 462.50	05/10/99	92.50

SUBTOTAL of Receipts This Page (optional) 836.90

TOTAL This Period (last page this line number only)

FE7AN047

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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

Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Michael P. Grossman, CFP 95 Glastonbury Blvd. Glastonbury, CT 06033-4412 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
B. Joseph H. Gwinn, CLU, CPCU, ChFC P.O. Box 308 Vinton, VA 24179-0308 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
C. Bruce A. Hager 1635 42nd Street, SW Fargo, ND 58103 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 252.00	05/10/99	50.40
D. Karl Erik Hansen, CLU, ChFC 419 N. Shoreline Blvd. Mountain View, CA 94043-4605 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 212.50	05/10/99	42.50
E. Alex Hanson, CLU, ChFC One Cate Street Portsmouth, NH 03801 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 235.20	05/10/99	42.00
F. Thomas M. Hawco, CLU, ChFC P.O. Box 30406 Lincoln, NE 68503-0406 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 237.80	05/10/99	41.00
G. Samuel H. Hazelton, IV, CLU 951 Albany Shaker Road Latham, NY 12110-1409 Receipt For: Primary / General / Other (specify):	self-employed insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00

SUBTOTAL of Receipts This Page (optional)	301.90
TOTAL This Period (last page this line number only)	

FE2AM047

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terry K. Headley, LUTCF 8990 West Dodge Road, #226 Omaha, NE 68114-3315	self-employed	05/10/99	60.00
Receipt For: Primary / General / Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 336.00		
Stephen R. Herman, CLU, ChFC 24 Maytime Drive Jericho, NY 11753	self-employed	05/17/99	200.00
Receipt For: Primary / General / Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 200.00		
Richard L. Hill, CLU, ChFC P.O. Box 30275 Lincoln, NE 68503-0275	self-employed	05/10/99	42.00
Receipt For: Primary / General / Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 243.60		
John J. Hodor, FIC 700 Ross Garden Way Knoxville, TN 37919-2021	self-employed	05/10/99	191.40
Receipt For: Primary / General / Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 403.80		
John J. Howe, CLU 200 E 12th Street The Dalles, OR 97058-3411	self-employed	05/24/99	150.00
Receipt For: Primary / General / Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 250.00		
William V. Irons, CLU, LUTCF 469 Centerville Road, #203 Warwick, RI 02886-4328	self-employed	05/10/99	60.00
Receipt For: Primary / General / Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 300.00		
Terry M. Kaltenbach, CLU, ChFC 1455 Frazee Road, #400 San Diego, CA 92108-4378	self-employed	05/10/99	50.00
Receipt For: Primary / General / Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 250.00		

SUBTOTAL of Receipts This Page (optional) 753.40

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

FE7A/R047

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 8 OF 15

FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Michael L. Kerley 9424 Talisman Drive Vienna, VA 22182-3419 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date > $ 211.53	05/27/99 05/27/99 05/27/99	19.23 19.23 19.23
B. Robert D. Knapp, CLU 3093 Whitney Avenue Hamden, CT 06518-2318 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date > $ 200.00	05/21/99	100.00
C. Richard A. Koob, CLU, AEP 626 W. Moreland Blvd. Waukesha, WI 53188-2433 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date > $ 252.00	05/10/99	50.40
D. Les R. Koonce 477 9th Avenue, #105 San Mateo, CA 94402 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date > $ 300.00	05/14/99	300.00
E. Michael J. Kraft, CLU 70 Washington Street, #200 Oakland, CA 94607-3738 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date > $ 212.50	05/10/99	42.50
F. Paul Kronish, CLU, ChFC 110 E. 42nd Street, Ste. 1614 New York, NY 10017 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date > $ 250.00	05/24/99	250.00
G. Donald J. Levine, CLU, ChFC, CPP One California Street, Ste. 300 San Francisco, CA 94111-5430 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed insurance agent Aggregate Year-to-Date > $ 442.50	05/10/99	8.50

SUBTOTAL of Receipts This Page (optional) > 809.09

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

FEC FORM 3

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Lawrence E. Lounds, CLU G-3526 Miller Road, Ste. B Flint, MI 48507-1236	self-employed	05/10/99	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date > $ 210.00		
B. Gene L. Mahn, CLU, ChFC 1635 La Granada Drive Thousands Oaks, CA 91362-2146	self-employed	05/10/99	8.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date > $ 292.50		
C. Darren Scott Mason, CLU, ChFC 30092 Ivy Glenn, #230 Laguna Niguel, CA 92677-5027	self-employed	05/10/99	41.66
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date > $ 208.30		
D. Joseph G. Matthews, CLU, ChFc 1000 Lake St. Louis Blvd., Ste. 224 Lake St. Louis, MO 63367-2924	self-employed	05/12/99	480.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date > $ 480.00		
E. Carl James Maus, LUTCF 417 Monitor Way St. Charles, MO 63303	self-employed	05/10/99	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date > $ 252.00		
F. Dorothee D. Maynard-Rogers 15 Messenger Drive Warwick, RI 02888-1020	self-employed	05/24/99	600.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date > $ 600.00		
G. James C. McGill, CLU, ChFC 7101 Mercy Road, Ste. 315 Omaha, NE 68106-2737	self-employed	05/05/99	125.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date > $ 425.00		

SUBTOTAL of Receipts This Page (optional) > 1347.56

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

FE7AN047

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 10 OF 15

FOR LINE NUMBER 11(a)(i)

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

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

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard E. McKinnon 2632 W. Kennewick Kennwick, WA 99336-3123	self-employed	05/10/99	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 210.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert F. McKown, CLU, ChFc 2020 Commonwealth Avenue Newton, MA 02466	self-employed	05/10/99	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 212.50		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis R. Merideth, CLU, ChFC 5151 E. Broadway, Ste. 750 Tucson, AZ 85711-3734	self-employed	05/10/99	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 270.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Middaugh, CLU, AEP 1019 5th Avenue, S Fargo, ND 58103	self-employed	05/10/99	72.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 360.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert A. Miller 850 Third Avenue, 15th Floor New York, NY 10022-6222	self-employed	05/10/99	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 210.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James W. Monteverde, CLU, ChFC, AEP 710 Fifth Avenue Pittsburgh, PA 15219-3000	self-employed	05/10/99	50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 250.00		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Raymond H. Moran, CLU, ChFC 1755 N. Kirby Parkway, #300 Memphis, TN 38120	self-employed	05/10/99	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 252.00		

SUBTOTAL of Receipts This Page (optional) 349.30

TOTAL This Period (last page this line number only)

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Herbert F. Morgan 1836 Hermitage Blvd., #200 Tallahassee, FL 32308-7706 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 243.60	05/10/99	42.00
B. Thomas W. Myers, CLU, ChFC 133 East First North Street Summerville, SC 29483-6873 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 200.00	05/24/99	100.00
C. Robert M. Nelson, CLU, LUTCF 10050 Regency Circle, #300 Omaha, NE 68114-3722 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 290.00	05/10/99	50.00
D. James F. O'Connell, CLU 400 S. Jefferson #450 Spokane, WA 99204-3177 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
E. James W. Oglesby, LUTCF P.O. Box 7156 Asheville, NC 28802 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 288.20	05/10/99	66.00
F. Rae Lee Olson 419 North Shoreline Blvd. Mountain View, CA 94043-4605 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 212.50	05/10/99	42.50
G. Mitchell W. Ostrove, CLU, ChFC 4 New King Street White Plains, NY 10604-1202 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: self-employed Occupation: insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00

SUBTOTAL of Receipts This Page (optional) 384.50

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Rick Patterson, LUTCF, CLU, ChFC P.O. Box 915468 Longwood, FL 32791-5468	self-employed	05/10/99	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 243.60		
B. Gary H. Pendleton, CLU, ChFC 2601 Oberlin Road, Ste 201 Raleigh, NC 27608	self-employed	05/10/99	45.83
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 229.15		
C. R. Jan Pinney, CLU, ChFC, CPCU 3005 Douglas Blvd., #120 Roseville, CA 95661-3854	self-employed	05/10/99	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 210.00		
D. Christopher Rich, CPA, CFP 800 South Street Waltham, MA 02154-1439	self-employed	05/21/99	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 300.00		
E. J. Daniel Rigby, Jr., CLU, ChFC 2850 E. Camelback Road, #320 Phoenix, AZ 85016-4311	self-employed	05/07/99	300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 300.00		
F. Burton T. Ritchie, CLU 438 W Easton Road, Box B6 Glenside, PA 19038-4903	self-employed	05/10/99	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 500.00		
G. Robert M. Roach, CLU, ChFC 580 S. High Street, #100 Columbus, OH 43215-5663	self-employed	05/10/99	42.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 237.50		

SUBTOTAL of Receipts This Page (optional) 1,222.33

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
D. David Russell, CLU, ChFC 2423 Carlisle Place Sarasota, FL 34231-7013	self-employed	05/10/99	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 243.60		
James D. Schulz, CLU, ChFA 7431 "O" Street Lincoln, NE 68510-2444	self-employed	05/10/99	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 235.20		
Walter J. Scott, Jr., CLU P.O. Box 1600 Oshkosh, WI 54902-1600	self-employed	05/10/99	50.40
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 252.00		
Ken Simons, CLU, ChFC, LUTCF P.O. Box 126 Artesia, NM 88210	self-employed	05/10/99	50.10
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 250.50		
Paul M. Smith, Sr., CLU 980 Cape Marco Drive Marco Island, FL 34145	self-employed	05/10/99	51.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 255.00		
Russell A. Smith, CLU, ChFC 31740 Railroad Canyon Road, Ste. 2-A Canyon Lake, CA 92587-9490	self-employed	05/10/99	42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 210.00		
Mark V. Snider, CLU, ChFC 39 S. Court Street Athens, OH 45701	self-employed	05/10/99	21.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 355.00		

SUBTOTAL of Receipts This Page (optional) 298.50

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

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SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Billy J. Stanfill, CLU P.O. Box 1352 Mooresville, NC 28115-1352	self-employed	05/10/99	66.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 244.20		
B. Joseph Stone, CLU, ChFC 150 Grossman Drive, Ste. 403 Braintree, MA 02184	self-employed	05/17/99	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 250.00		
C. David L. Stratton, CLU, ChFC 6927 Old Seward Highway Anchorage, AK 99518-3331	self-employed	05/10/99	75.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 375.00		
D. Peter A. Sullivan, CLU One Providence Washington Plaza, 7th Seventh Floor Providence, RI 02903	self-employed	05/13/99	300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 300.00		
E. Christi L. Swearingen, LUTCF 3709 Spenard Road, #100 Anchorage, AK 99503-5674	self-employed	05/24/99	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 250.00		
F. Christopher Jameson Taggart P.O. Box 2548 Cody, WY 82414-2548	self-employed	05/18/99	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 500.00		
G. John J. Tarditi, Jr., FLMI, LUTCF 118 Ellis Street Haddonfield, NJ 08033-1601	self-employed	05/14/99	300.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: insurance agent Aggregate Year-to-Date $ 300.00		

SUBTOTAL of Receipts This Page (optional) 1,741.00

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

FE7AN047

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. John Michael Taylor, CLu, ChFC P.O. Box 7546 Columbus, GA 31908-7546 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed / insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
B. Robert L. Tedoldi, CLU, ChFC, CFP 95 Glastonbury Blvd., 4th Floor Glastonbury, CT 06033-4412 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed / insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
C. Brad Tison CLU, ChFC, CFP P.O. Box 65770 W. Des Moines, IA 50265-0770 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed / insurance agent Aggregate Year-to-Date $ 252.00	05/10/99	50.40
D. David R. Watson, CLU, ChFC, AEP One Liberty Place, Sto. 680 Philadelphia, PA 19103-7301 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed / insurance agent Aggregate Year-to-Date $ 210.00	05/10/99	42.00
E. R. David Wentz, JD, CLU 4500 W 89th Street, Ste. 200 Shawnee Mission, KS 66207 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	self-employed / insurance agent Aggregate Year-to-Date $ 300.00	05/10/99	300.00
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 476.40

TOTAL This Period (last page this line number only) 10,489.54

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SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 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)

NATIONAL ASSOCIATION OF LIFE UNDERWRITERS POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
FIRST UNION NATIONAL BANK OF WASHINGTON DC		5/31/99	12.50
Receipt For: [ ] Primary [ ] General [X] Other (specify): Interest	Aggregate Year-to-Date > $ 470.01		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) 12.50

FE7AN047

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF LIFE UNDWEWRITERSSPOLITIAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. FIRST UNION NATIONAL BANK OF WASHINGTON DC	BANK CHARGES Disbursement for: [ ] Primary [ ] General [X] Other (specify)	5/31/99	1,343.70
B. NATIONAL ASSOCIATION OF LIFE UNDERWRITERS 1922 F ST NW WASHINGTON DC 20006	PERSONNEL & ADMIN. EXP Disbursement for: [ ] Primary [ ] General [X] Other (specify)	5/27/99	26,972.23
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	28,315.93

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 4

FOR LINE NUMBER 23

Contributions to Federal Candidates/Committees

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

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Bob Etheridge for Congress Committee PO Drawer 1059 Lillington, NC 27546	Contribution: Bob Etheridge (NC-2-D) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/10/99	$500.00
Fossella for Congress PO Box 060248 New Dorp Station Staten Island, NY 10306	Contribution: Vito J. Fossella, Jr. (NY-13-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/25/99	$1,000.00
Rod Grams for U S Senate Committee PO Box 1029 Anoka, MN 55303	Contribution: Rod Grams (MN-R-Senate) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/20/99	$1,000.00
Hagel for U.S. Senate 12100 W. Center Road #202 Omaha, NE 68144	Contribution: Charles Hagel (NE-R-Senate) Disbursement For: [X] Primary [ ] General [ ] Other: 2002	5/14/99	$2,000.00
Hastert For Congress Committee P.O. Box 625 Batavia, IL 60510	Contribution: J. Dennis Hastert (IL-14-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/3/99	$2,500.00
Asa Hutchinson for Congress Committee 624 Towson/Suite D Fort Smith, AR 72901	Contribution: Asa Hutchinson (AR-3-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/10/99	$500.00
Nita Lowey for Congress Committee P.O. Box 271 White Plains, NY 10605	Contribution: Nita M. Lowey (NY-18-D) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/18/99	$1,000.00
Mike McIntyre for Congress PO Box 1 Lumberton, NC 28359	Contribution: Mike McIntyre (NC-7-D) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/11/99	$500.00
Myrick For Congress PO Box 37091 Charlotte, NC 28237	Contribution: Sue Myrick (NC-9-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/3/99	$1,000.00

SUBTOTAL of Disbursements This Page (optional) $10,000.00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 23

Contributions to Federal Candidates/Committees

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

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement For	Date (month, day, year)	Amount of Each Disbursement this Period
Leadership 21 5501 Cherokee Avenue Suite 112 Alexandria, VA 22312	Contribution: Leadership 21 (PAC to PAC contribution) [ ] Primary [ ] General [X] Other: Annual 1999	5/3/99	$2,500.00
Mike Bilirakis for Congress P O Box 1077 Tarpon Springs, FL 34688	Contribution: Michael Bilirakis (FL-9-R) [X] Primary [ ] General [ ] Other: 2000	5/3/99	$1,500.00
Sherrod Brown For Congress 111 Edgefield Drive Elyria, OH 44035	Contribution: Sherrod Brown (OH-13-D) [X] Primary [ ] General [ ] Other: 2000	5/3/99	$1,000.00
Committee for the Preservation of Capitalism PO Box 22614 Alexandria, VA 22304	Contribution: Committee Capitalism (PAC to PAC contribution) [ ] Primary [ ] General [X] Other: Annual 1999	5/25/99	$2,500.00
Friends of Lois Capps PO Box 23940 Santa Barbara, CA 93121	Contribution: Lois Capps (CA-22-D) [X] Primary [ ] General [ ] Other: 2000	5/14/99	$500.00
Cook for Congress 8 East Broadway/Suite 614 Salt Lake City, UT 84111	Contribution: Merrill Cook (UT-2-R) [X] Primary [ ] General [ ] Other: 2000	5/18/99	$1,000.00
Tom Davis For Congress P.O. Box 483 Dunn Loring, VA 22027	Contribution: Thomas M. Davis, III (VA-11-R) [X] Primary [ ] General [ ] Other: 2000	5/3/99	$1,000.00
Democratic Senatorial Campaign Committee 430 South Capitol Street, SE Washington, DC 20003	Contribution: Democratic Senatorial Campaign Comm. [ ] Primary [ ] General [X] Other: Annual 1999	5/10/99	$15,000.00
Doolittle for Congress 2140 Professional Drive Suite 200 Roseville, CA 95661	Contribution: John T. Doolittle (CA-4-R) [X] Primary [ ] General [ ] Other: 2000	5/25/99	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$26,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 4

FOR LINE NUMBER 23

Contributions to Federal Candidates/Committees

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

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

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement For	Date (month, day, year)	Amount of Each Disbursement this Period
National Republican Congressional Committee 320 First Street SE Washington, DC 20003	Contribution: National Republican Congr (-R) Disbursement For: [ ] Primary [ ] General [X] Other: Annual 1999	5/3/99	$15,000.00
Anne Northup for Congress PO Box 7313 Louisville, KY 40257	Contribution: Anne Meagher Northup (KY-3-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/10/99	$1,000.00
Pallone for Congress Committee PO Box 3176 Long Branch, NJ 07740	Contribution: Frank Pallone, Jr. (NJ-6-D) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/20/99	$2,500.00
The Reed Committee PO Box 8628 Cranston, RI 02920	Contribution: Jack F. Reed (RI-D) Senate Disbursement For: [X] Primary [ ] General [ ] Other: 2002	5/3/99	$2,000.00
Friends of Jeff Sessions P O Box 4278 Montgomery, AL 36103	Contribution: Jeff Sessions (AL-R-Senate) Disbursement For: [X] Primary [ ] General [ ] Other: 2002	5/14/99	$1,000.00
Shadegg For Congress P.O. Box 45444 Phoenix, AZ 85064	Contribution: John Shadegg (AZ-4-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/18/99	$1,000.00
Snowe for Senate Four City Center 2nd Floor Portland, ME 04101	Contribution: Olympia J. Snowe (ME-R-Senate) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/4/99	$1,000.00
Friends of Craig Thomas PO Box 1580 Casper, WY 82602	Contribution: Craig Thomas (WY-R-Senate) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/18/99	$1,000.00
Mike Thompson for Congress PO Box 157 Santa Rosa, CA 95402-0157	Contribution: Mike Thompson (CA-1-D) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/10/99	$500.00

SUBTOTAL of Disbursements This Page (optional)	$25,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 4

FOR LINE NUMBER 23

Contributions to Federal Candidates/Committees

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

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Committee to Reelect Ed Towns 360 Clinton Avenue Suite 6R Brooklyn, NY 11238	Contribution: Edolphus Towns (NY-10-D) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/12/99	$2,500.00
Watts for Congress P.O. Box 720445 Norman, OK 73070	Contribution: J.C. Watts, Jr. (OK-4-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/21/99	$2,000.00
Whitfield For Congress P.O. Box 391 Hopkinsville, KY 42241	Contribution: Edward Whitfield (KY-1-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	5/4/99	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$5,500.00
TOTAL This Period (last page this line number only)	$66,500.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
NATIONAL ASSOCIATION OF LIFE UNDERWRITERS POLITICAL ACTION COMMITTEE				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor NATIONAL ASSOCIATION OF LIFE UNDERWRITERS 1922 F STREET NW WASHINGTON DC 20006	35,933.14	31,853.84	35,993.00	31,793.98
Nature of Debt (Purpose): PERSONNEL & ADMIN.EXPENSES				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page in this line only)	31,793.98
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	31,793.98

FE/SA/047

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 6-21-99
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER	DATE PREPARED 6-22-99

(4/98)