RECEIVED
FEDERAL ELECTION COMMISSION
PUBLIC DISCLOSURE DIVISION

93 JUN 18 AM 3:09

MetLife

One Madison Avenue, New York, NY 10010-3690

Federal Election Commission
1325 K Street, N.W.
Washington, D.C. 20463

Re: Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A
I.D. C 000 40923

Dear Sir or Madam

Enclosed is our "Report of Receipts and Disbursements" for the period May 1, 1993 through May 31, 1993.

Yours truly

Kenneth W. Malcolm
Kenneth W. Malcolm
Treasurer

June 14, 1993

KWM:sb
Enclosure

Copies to:
Alabama State Ethics Commission
Arkansas Office of the Secretary of State, Election Div.
Dist. of Columbia Office Campaign Finance, I.D. PA4000123
Florida Department of State
Illinois State Board of Elections
Kentucky Registry of Election Finance
Maine Comm. on Gov't. Ethics and Election Practices
New Hampshire Secretary of State
Oklahoma Council on Campaign Compliance and Ethical Standards
South Carolina State Ethics Commission



9002-FUNDS (0192) Printed in U.S.A.

# REPORT OF RECEIPTS AND DISBURSEMENTS

**For Other Than An Authorized Committee**

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. C00040923 090992 P 224
KENNETH W MALCOLM
METROPOLITAN LIFE INSURANCE CO
MPANY (METLIFE) EMPLOYEES' POL
ONE MADISON AVENUE
NEW YORK NY 10010

2. FEC IDENTIFICATION NUMBER
C00040923

3. ☐ This committee qualified as a multicandidate committee **DURING THIS** Reporting Period on _____, (date).

## 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 |

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day 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 5-1-93 through 5-31-93 | | |
| 6. (a) Cash on Hand January 1, 19 93 | | $ 29,058.15 |
| (b) Cash on Hand at Beginning of Reporting Period | $ 24,146.56 | |
| (c) Total Receipts (from Line 19) | $ 13,144.95 | $ 67,206.51 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 37,291.51 | $ 96,264.66 |
| 7. Total Disbursements (from Line 30) | $ 11,950.00 | $ 70,923.15 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ 25,341.51 | $ 25,341.51 |
| 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) | $ -0- | |

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

*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer
Kenneth W. Malcolm

Signature of Treasurer
Kenneth W Malcolm

Date
June 10, 1993

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 1/1/91)

93033124786

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

(revised 1/1/91)

NAME OF COMMITTEE Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

REPORT COVERING PERIOD FROM 5-1-93 TO: 5-31-93

| | COLUMN A Total This Period | COLUMN B Calendar Year |
|---|---|---|
| **I. Receipts** | | |
| 11. Contributions (other than loans) From: | | |
| a. Individual/Persons Other Than Political Committees | $ 5,230.00 | $15,401.00 |
| i. Itemized (use Schedule A) | | |
| ii. Unitemized | 7,840.50 | 51,498.75 |
| iii. Total (add i and ii) ➤ | 13,070.50 | 66,899.75 |
| b. Political Party Committees | -0- | -0- |
| c. Other Political Committees (such as PACs) | -0- | -0- |
| d. Total Contributions (add a iii, b and c) ➤ | 13,070.50 | 66,899.75 |
| 12. Transfers From Affiliated/Other Party Committees | -0- | -0- |
| 13. All Loans Received | -0- | -0- |
| 14. Loan Repayments Received | -0- | -0- |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | -0- | -0- |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | -0- | -0- |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 74.45 | 306.76 |
| 18. Transfers from Nonfederal Account for Joint Activity | -0- | -0- |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤ | 13,144.95 | 67,206.51 |
| 20. Total Federal Receipts (subtract line 18 from line 19) ➤ | 13,144.95 | 67,206.51 |
| **II. Disbursements** | | |
| 21. Operating Expenditures: | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | $ -0- | $ -0- |
| i. Federal Share | -0- | -0- |
| ii. Non-Federal Share | -0- | -0- |
| b. Other Federal Operating Expenditures | -0- | 388.15 |
| c. Total Operating Expenditures (Add a i, a ii, and b)) ➤ | -0- | 388.15 |
| 22. Transfers to Affiliated/Other Party Committees | -0- | -0- |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 9,250.00 | 59,800.00 |
| 24. Independent Expenditures (use Schedule E) | -0- | -0- |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | -0- | -0- |
| 26. Loan Repayments Made | -0- | -0- |
| 27. Loans Made | -0- | -0- |
| 28. Refunds of Contributions To: | | |
| a. Individuals/Persons Other Than Political Committees | -0- | -0- |
| b. Political Party Committees | -0- | -0- |
| c. Other Political Committees (such as PACs) | -0- | -0- |
| d. Total Contribution Refunds (Add a, b and c) ➤ | -0- | -0- |
| 29. Other Disbursements | 2,700.00 | 10,735.00 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤ | 11,950.00 | 70,923.15 |
| 31 Total Federal Disbursements (subtract line 21 a ii from line 30) ➤ | 11,950.00 | 70,923.15 |
| **III. Net Contributions/Operating Expenditures** | | |
| 32. Total Contributions (other than loans)(from line 11d) | $13,070.50 | $66,899.75 |
| 33. Total Contribution Refunds (from line 28d) | -0- | -0- |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 13,070.50 | 66,899.75 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤ | -0- | 388.15 |
| 36. Offsets to Operating Expenditures (from line 15) | -0- | -0- |
| 37. Net Operating Expenditures (subtract line 36 from 35) ➤ | -0- | 388.15 |

SCHEDULE A

# ITEMIZED RECEIPTS

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

PAGE 1 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Theodossi Athanassiades<br>4436 Province Line Road<br>Princeton, NJ 08540<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation President & Chief Operating Officer<br>Aggregate Year-to-Date > $ 1,579 | 5/93 Monthly Payroll Deduction | $344 |
| B. Harry P. Kamen<br>200 East 78th Street<br>New York, NY 10021<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Chairman & Chief Exec. Officer<br>Aggregate Year-to-Date > $ 1,254 | 5/93 Monthly Payroll Deduction | $282 |
| C. Robert G. Schwartz<br>701 Rosedale Road<br>Princeton, NJ 08540<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation<br>Aggregate Year-to-Date > $ 1,050 | 5/93 Monthly Payroll Deduction | $ 0 |
| D. Philip Briggs<br>520 Stanwich Road<br>Greenwich, CT 06831<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation<br>Aggregate Year-to-Date > $ 400 | 5/93 Monthly Payroll Deduction | $ 0 |
| E. Daniel J. Cavanagh<br>7 River Farms Drive<br>West Warwick, RI 02893<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Property & Casualty Company<br>Occupation President<br>Aggregate Year-to-Date > $ 525 | 5/93 Monthly Payroll Deduction | $105 |
| F. Robert J. Crimmins<br>39 Polly Drive<br>Huntington, NY 11743<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Executive Vice-President<br>Aggregate Year-to-Date > $ 795 | 5/93 Monthly Payroll Deduction | $159 |
| G. John D. Moynahan, Jr.<br>21 Cross Road<br>Darien, CT 06820<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Executive Vice-President<br>Aggregate Year-to-Date > $ 795 | 5/93 Monthly Payroll Deduction | $159 |

SUBTOTAL of Receipts This Page (optional) ..... $1,049

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

**SCHEDULE A** **ITEMIZED RECEIPTS**

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

PAGE 2 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Stewart G. Nagler<br>14 Myrtle Drive<br>Great Neck, NY 11021<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Sr. Executive Vice-President<br>Aggregate Year-to-Date $ 990 | 5/93<br>Monthly Payroll Deduction | $198 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| William G. Poortvliet<br>2 Burritts Landing<br>Westport, CT 06880<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Executive Vice-President<br>Aggregate Year-to-Date $ 250 | 5/93<br>Monthly Payroll Deduction | $ 0 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Catherine A. Rein<br>21 East 22nd Street, Apt. 8B<br>New York, NY 10010<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Executive Vice-President<br>Aggregate Year-to-Date $ 680 | 5/93<br>Monthly Payroll Deduction | $136 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Vincent P. Reusing<br>2337 South Rolfe Street<br>Arlington, VA 22202<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Senior Vice-President<br>Aggregate Year-to-Date $ 680 | 5/93<br>Monthly Payroll Deduction | $136 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Richard S. Walsh<br>24 Fairway Drive<br>Stamford, CT 06903<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Senior Vice-President<br>Aggregate Year-to-Date $ 525 | 5/93<br>Monthly Payroll Deduction | $105 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Charles B. Arnold<br>25 Forest Lane<br>Scarsdale, NY 10583<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date $ 360 | 5/93<br>Monthly Payroll Deduction | $ 72 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| John J. Falzon<br>26 Corn Hill Drive<br>Morristown, NJ 07960<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Senior Vice-President<br>Aggregate Year-to-Date $ 460 | 5/93<br>Monthly Payroll Deduction | $ 92 |

| | |
|---|---|
| SUBTOTAL of Receipts This Page (optional) | $739 |
| TOTAL This Period (last page this line number only) | |

93038424769

SCHEDULE A

# ITEMIZED RECEIPTS

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

PAGE 3 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Richard S. Fleming<br>710 Beach Road<br>Fairfield, CT 06430<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 461 | 5/93 Monthly Payroll Deduction | $ 97 |
| B. Harold B. Leff<br>29 Shoreham Drive West<br>Dix Hills, NY 11746<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 375 | 5/93 Monthly Payroll Deduction | $ 75 |
| C. Francis P. Lynch<br>4 Peter Cooper Road, Apt. 12-C<br>New York, NY 10010<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Senior Vice-President<br>Aggregate Year-to-Date > $ 420 | 5/93 Monthly Payroll Deduction | $ 84 |
| D. David G. Martin<br>4054 Broadmoor Circle<br>Naperville, IL 60564<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 390 | 5/93 Monthly Payroll Deduction | $ 80 |
| E. Felix A. Orbe<br>4 Peter Cooper Road, Apt. 13-B<br>New York, NY 10010<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 455 | 5/93 Monthly Payroll Deduction | $ 91 |
| F. William S. Woodside<br>5111 Gladehill<br>Kingwood, TX 77345<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 460 | 5/93 Monthly Payroll Deduction | $ 92 |
| G. Richard J. Anderson<br>5 Norwood Court<br>Morristown, NJ 07960<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 265 | 5/93 Monthly Payroll Deduction | $ 53 |

SUBTOTAL of Receipts This Page (optional) ..... $572

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

93038424790

SCHEDULE A

# ITEMIZED RECEIPTS

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

PAGE 4 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Frederick E. Arnholt<br>1800 Ballybunion Drive<br>Duluth, GA 30136<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date > $ 315 | 5/93 Monthly Payroll Deduction | $ 63 |
| B. Edward B. Bezyack<br>28 Bacon Road<br>Head of Harbor, NY 11780<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Agency Vice-President<br>Aggregate Year-to-Date > $ 271 | 5/93 Monthly Payroll Deduction | $ 55 |
| C. Margaret E. Bunke<br>17 Stuyvesant Oval, Apt. 3-H<br>New York, NY 10009<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date > $ 265 | 5/93 Monthly Payroll Deduction | $ 53 |
| D. Ira Friedman<br>130 Chadwick Road<br>Teaneck, NJ 07666<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President & Assoc General Counsel<br>Aggregate Year-to-Date > $ 301 | 5/93 Monthly Payroll Deduction | $ 65 |
| E. Leland C. Launer, Jr.<br>295 Shore Road<br>Greenwich, CT 06830<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date > $ 275 | 5/93 Monthly Payroll Deduction | $ 63 |
| F. James M. Logan<br>523 E. 14th Street, Apt. 11-F<br>New York, NY 10009<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date > $ 291 | 5/93 Monthly Payroll Deduction | $ 63 |
| G. Mark D. Lonergan<br>234 Bungalow Terrace<br>Millington, NJ 07946<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date > $ 270 | 5/93 Monthly Payroll Deduction | $ 54 |

SUBTOTAL of Receipts This Page (optional) ..... $416

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

93038424791

SCHEDULE A

# ITEMIZED RECEIPTS

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

PAGE 5 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. John J. Lynch<br>33 Farley Place<br>Allendale, NJ 07401<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Actuary<br>Aggregate Year-to-Date $ 265 | 5/93 Monthly Payroll Deduction | $ 53 |
| B. Thomas F. McDermott<br>708 Barrister Court<br>Franklin Lakes, NJ 07417<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date $ 305 | 5/93 Monthly Payroll Deduction | $ 61 |
| C. Robert J. Noll<br>55 Bellevue Avenue<br>Summit, NJ 07901<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date $ 270 | 5/93 Monthly Payroll Deduction | $ 54 |
| D. William F. Pitzer<br>456 Oaklawn Drive<br>Pittsburgh, PA 15241<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: District Sales Manager<br>Aggregate Year-to-Date $ 315 | 5/93 Weekly Payroll Deduction | $ 60 |
| E. William R. Ripberger<br>9 Juniper Road<br>Rowayton, CT 06853<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date $ 325 | 5/93 Monthly Payroll Deduction | $ 65 |
| F. Felix Schirripa<br>48 Seneca Street<br>Old Bridge, NJ 08857<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date $ 335 | 5/93 Monthly Payroll Deduction | $ 73 |
| G. Barbara C. Timpano<br>4 Ruth Place<br>Plainview, NY 11803<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date $ 309 | 5/93 Monthly Payroll Deduction | $ 65 |

SUBTOTAL of Receipts This Page (optional) ..... $431

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

9 3 0 3 8 4 2 4 7 9 2

SCHEDULE A

# ITEMIZED RECEIPTS

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

PAGE 6 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| T. Bates Westerberg<br>211 East 70th Street, Apt. 19-E<br>New York, NY 10021<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 275 | 5/93 Monthly Payroll Deduction | $ 55 |
| Anthony J. Williamson<br>43 Tanglewood Drive<br>Summit, NJ 07901<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 300 | 5/93 Monthly Payroll Deduction | $ 60 |
| Arthur N. Boyajian<br>75 Lotus Lane<br>Paramus, NJ 07652<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Assistant Vice-President<br>Aggregate Year-to-Date > $ 205 | 5/93 Monthly Payroll Deduction | $41 |
| Marvin H. Brodie<br>262 Nelson Road<br>Scarsdale, NY 10583<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Actuary<br>Aggregate Year-to-Date > $ 220 | 5/93 Monthly Payroll Deduction | $44 |
| Gerald Clark<br>2 Harwood Drive<br>Madison, NJ 07940<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Executive Vice-President<br>Aggregate Year-to-Date > $ 250 | 5/93 Monthly Payroll Deduction | $50 |
| Joseph L. Dunn<br>26 Dobbs Terrace<br>Scarsdale, NY 10583<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Actuary<br>Aggregate Year-to-Date > $ 245 | 5/93 Monthly Payroll Deduction | $49 |
| William T. Durkin<br>248 Ramstick Point Road<br>Barrington, RI 02806<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Branch Manager<br>Aggregate Year-to-Date > $ 210 | 5/93 Weekly Payroll Deduction | $40 |

SUBTOTAL of Receipts This Page (optional) ..... $339

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

2 3 3 4 2 4 7 9 3

SCHEDULE A

# ITEMIZED RECEIPTS

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

PAGE 7 OF 15

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. G. Denis Dwyer, CLU<br>37 Stephen Terrace<br>Paramamy, NJ 07054<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Assistant Vice-President<br>Aggregate Year-to-Date > $ 210 | 5/93 Monthly Payroll Deduction | $ 42 |
| B. Paul M. Freire<br>6 Graymock Road<br>Trumbull, CT 06611<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Branch Manager<br>Aggregate Year-to-Date > $ 210 | 5/93 Weekly Payroll Deduction | $ 40 |
| C. Paul L. Garavaglia<br>1178 Johnston Drive<br>Watchung, NJ 07060<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Assistant Vice-President<br>Aggregate Year-to-Date > $ 205 | 5/93 Monthly Payroll Deduction | $ 41 |
| D. Thomas K. Garasche<br>45 Commodore Road<br>Chappaqua, NY 10514<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 250 | 5/93 Monthly Payroll Deduction | $ 50 |
| E. William J. Henley<br>3 Morgantine Road<br>Roseland, NJ 07068<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 225 | 5/93 Monthly Payroll Deduction | $ 45 |
| F. Carl R. Henrikson<br>58 Silver Ridge Road<br>New Canaan, CT 06840<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Senior Vice-President<br>Aggregate Year-to-Date > $ 238 | 5/93 Monthly Payroll Deduction | $ 53 |
| G. William E. Horner<br>12 Ursino Place<br>Elizabeth, NJ 07208<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: District Sales Manager<br>Aggregate Year-to-Date > $ 210 | 5/93 Weekly Payroll Deduction | $ 40 |

SUBTOTAL of Receipts This Page (optional) ..... $311

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

23538124794

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)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Russel P. Iuculano<br>12602 Laurie Drive<br>Silver Spring, MD 20904<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date > $ 230 | 5/93 Monthly Payroll Deduction | $ 46 |
| B. C. Howard Kinloch<br>319 Cedar Avenue<br>Hershey, PA 17033<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Branch Manager<br>Aggregate Year-to-Date > $ 210 | 5/93 Weekly Payroll Deduction | $ 40 |
| C. John B. Kvernland<br>10 Winslow Place<br>Larchmont, NY 10538<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Assistant Vice-President<br>Aggregate Year-to-Date > $ 210 | 5/93 Monthly Payroll Deduction | $ 42 |
| D. David A. Levene<br>6 Wincott Drive<br>Melville, NY 11747<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Senior Vice-Pres. & Chief Actuary<br>Aggregate Year-to-Date > $ 225 | 5/93 Monthly Payroll Deduction | $ 45 |
| E. Stephen Li<br>153 Webster Road<br>Scarsdale, NY 10583<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Actuary<br>Aggregate Year-to-Date > $ 225 | 5/93 Monthly Payroll Deduction | $ 45 |
| F. Nancy Irene Mayer<br>350 First Avenue, Apt. 8-B<br>New York, NY 10010<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Associate General Counsel<br>Aggregate Year-to-Date > $ 234 | 5/93 Monthly Payroll Deduction | $ 50 |
| G. Dennis P. McAuliffe<br>21 East Court<br>Bethpage, NY 11714<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date > $ 214 | 5/93 Monthly Payroll Deduction | $ 46 |

SUBTOTAL of Receipts This Page (optional) ..... $314

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

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SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Christopher P. Nicholas<br>961 Bayridge Parkway<br>Brooklyn, NY 11228<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Associate General Counsel<br>Aggregate Year-to-Date $ 241 | 5/93 Monthly Payroll Deduction | $ 50 |
| B. William Norton<br>93 Frederick Place<br>Mount Vernon, NY 10552<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date $ 227 | 5/93 Monthly Payroll Deduction | $ 46 |
| C. Mwafak S. Peress<br>7 Peter Cooper Road, Apt. 7-H<br>New York, NY 10010<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Senior Vice-President<br>Aggregate Year-to-Date $ 230 | 5/93 Monthly Payroll Deduction | $ 46 |
| D. Neal A. Pickett, Jr.<br>2902 E. 31st Street<br>Tulsa, OK 74105<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date $ 250 | 5/93 Monthly Payroll Deduction | $ 50 |
| E. Gail A. Praslick<br>7 Trimbleford Lane<br>Middletown, NJ 07748<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date $ 255 | 5/93 Monthly Payroll Deduction | $ 55 |
| F. Joseph S. Providenti<br>199 East Argyle Street<br>Valley Stream, NY 11580<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation District Sales Manager<br>Aggregate Year-to-Date $ 210 | 5/93 Weekly Payroll Deduction | $ 40 |
| G. Jeffrey K. Smith<br>2020 Nancy Blvd.<br>Merrick, NY 11566<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date $ 220 | 5/93 Monthly Payroll Deduction | $ 44 |

SUBTOTAL of Receipts This Page (optional) ..... $331

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

93038424796

SCHEDULE A

# ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)
Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| John F. Smith<br>3306 Latania Drive<br>Tampa, FL 33618<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 240 | 5/93 Monthly Payroll Deduction | $ 48 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Presley Surratt<br>24 Utica Road<br>Edison, NJ 08820<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Actuary<br>Aggregate Year-to-Date > $ 242 | 5/93 Monthly Payroll Deduction | $ 50 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| George B. Trotta<br>541 East 20th Street, Apt. 14-F<br>New York, NY 10010<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Senior Vice-President<br>Aggregate Year-to-Date > $ 250 | 5/93 Monthly Payroll Deduction | $ 50 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Michael F. Turner<br>10400 Oxford Mill Circle<br>Alpharetta, GA 30202<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 203 | 5/93 Monthly Payroll Deduction | $ 43 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Victor W. Turner<br>1005 Featherstone Road<br>Alpharetta, GA 30201<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 220 | 5/93 Monthly Payroll Deduction | $ 44 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Lawrence A. Vranka<br>1 Avon Road<br>New Hyde Park, NY 11040<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 225 | 5/93 Monthly Payroll Deduction | $ 45 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Alexander Watts<br>28 Hills Point Road<br>Westport, CT 06880<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 215 | 5/93 Monthly Payroll Deduction | $ 43 |

SUBTOTAL of Receipts This Page (optional) . . . . . $323

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

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**SCHEDULE A** **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Judy E. Weiss<br>48 Vanderveer Court<br>Rockville Centre, NY 11570<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Senior Vice-President<br>Aggregate Year-to-Date $ 225 | 5/93 Monthly Payroll Deduction | $ 45 |
| B. Carol A. Wolfe<br>25 West 90 Street<br>New York, NY 10024<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President<br>Aggregate Year-to-Date $ 214 | 5/93 Monthly Payroll Deduction | $ 46 |
| C. Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Occupation<br>Aggregate Year-to-Date $ | | |
| D. Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Occupation<br>Aggregate Year-to-Date $ | | |
| E. Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Occupation<br>Aggregate Year-to-Date $ | | |
| F. Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Occupation<br>Aggregate Year-to-Date $ | | |
| G. Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Occupation<br>Aggregate Year-to-Date $ | | |

| | |
|---|---|
| SUBTOTAL of Receipts This Page (optional) | $ 91 |
| TOTAL This Period (last page this line number only) | |

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SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Phillip S. Allen<br>329 Franklin Turnpike<br>Ridgewood, NJ 07450<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Assistant Tax Counsel<br>Aggregate Year-to-Date > $ 50 | 5/93 Monthly Payroll Deduction | $10 earmarked for U.S. Rep. Marge Roukema |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| George C. Ash<br>451 N. Terrace Drive<br>Wichita, KS 67208<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Project Manager<br>Aggregate Year-to-Date > $ 50 | 5/93 Monthly Payroll Deduction | $10 earmarked for U.S. Rep. Dan Glickman |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Anthony J. Bantell<br>124 Laurie Lane<br>Hughestown, PA 18640<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Project Manager<br>Aggregate Year-to-Date > $ 10 | 5/93 Monthly Payroll Deduction | $ 2 earmarked for PA State Rep. Tom Tigue |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Carl J. Barrera<br>215 Hillair Circle<br>White Plains, NY 10605<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President and Managing Counsel<br>Aggregate Year-to-Date > $ 100 | 5/93 Monthly Payroll Deduction | $20 earmarked for Dem. Nat'l. Committee |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| D. William Bergner<br>11009 W 121 St Terrace<br>Overland, KS 66213<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Agency Vice-President<br>Aggregate Year-to-Date > $ 250 | 5/93 Monthly Payroll Deduction | $50 earmarked for Kansas Ins. Comm. Ron Todd |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Robert L. Clinkscales<br>300 Sunset Drive<br>Hertford, NC 27944<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Agricultural Investment Consultant<br>Aggregate Year-to-Date > $ 46 | 5/93 Monthly Payroll Deduction | $10 earmarked for U.S. Rep. John T. Meyers |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Lawrence S. Craven<br>425 Birchtree Lane<br>Northvale, NJ 07647<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Assistant Vice-President<br>Aggregate Year-to-Date > $ 150 | 5/93 Monthly Payroll Deduction | $30 earmarked for U.S. Rep. Marge Roukema |

SUBTOTAL of Receipts This Page (optional) . . . . . $132

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SCHEDULE A — ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Frederic W. Haeussler<br>30 Lincoln Avenue<br>Florham Park, NJ 07932<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Assistant Vice-President<br>Aggregate Year-to-Date > $ 10 | 5/93 Monthly Payroll Deduction | $ 2 earmarked for Rep. Nat'l Committee |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Margaret F. Kelly<br>360 First Avenue<br>New York, NY 10010<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Associate General Counsel<br>Aggregate Year-to-Date > $ 50 | 5/93 Monthly Payroll Deduction | $10 earmarked for Dem. Nat'l Committee |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| John C. Kelsh<br>146 Wellington Road<br>Garden City, NY 11530<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Vice-President and Investment Counsel<br>Aggregate Year-to-Date > $ 50 | 5/93 Monthly Payroll Deduction | $10 earmarked for Dem. Nat'l. Committee |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Richard A. Kubick<br>502 Center Street<br>Clarks Summit, PA 18411<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Senior Systems Analyst<br>Aggregate Year-to-Date > $ 5 | 5/93 Monthly Payroll Deduction | $ 1 earmarked for PA Atty. Gen. Ernie Preate |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Blanche E. Lawton<br>788 Columbus Avenue<br>New York, NY 10025<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Director<br>Aggregate Year-to-Date > $ 50 | 5/93 Monthly Payroll Deduction | $10 earmarked for U.S. Sen. Moynihan and U.S. Rep. Rangel |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Henry R. Lempicky<br>RD 1, Jennifer Drive<br>Dalton, PA 18414<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Senior Systems Analyst<br>Aggregate Year-to-Date > $ 5 | 5/93 Monthly Payroll Deduction | $ 1 earmarked for U.S. Rep. Joseph McDade |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Melvin V. Martinek<br>P.O. Box 1633, 2609 Coachman<br>Garden City, KS 67846<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Agricultural Investment Consultant<br>Aggregate Year-to-Date > $ 45 | 5/93 Monthly Payroll Deduction | $ 9 earmarked for U.S. Senator Bob Dole |

SUBTOTAL of Receipts This Page (optional) . . . . . $ 43

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

2 3 0 3 8 4 2 1 3 0 0

SCHEDULE A

# ITEMIZED RECEIPTS

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FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Delia E. Moseley<br>18C Knoxbury Terrace<br>Greenville, SC 29601<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Senior Systems Engineer<br>Aggregate Year-to-Date > $ 25 | 5/93 Monthly Payroll Deduction | $ 5 earmarked for U.S. Rep. Elizabeth Patterson |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Herbert Orenshein<br>3777 Independence Avenue<br>Riverdale, NY 10463<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 25 | 5/93 Monthly Payroll Deduction | $ 5 earmarked for U.S. Senator Pat Moynihan |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Louis J. Ragusa<br>10 Jason Court<br>Dix Hills, NY 11746<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Assistant General Counsel<br>Aggregate Year-to-Date > $ 10 | 5/93 Monthly Payroll Deduction | $ 2 earmarked for U.S. Senator Al D'Amato |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Joseph A. Reali<br>10 Dorne Road<br>Morganville, NJ 07751<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Vice-President<br>Aggregate Year-to-Date > $ 50 | 5/93 Monthly Payroll Deduction | $10 earmarked for U.S. Rep. Chris Smith |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Elmer S. Richards<br>400 Andover Road<br>Fayetteville, NC 28311<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Branch Manager<br>Aggregate Year-to-Date > $ 105 | 5/93 Weekly Payroll Deduction | $20 earmarked for Rep. Nat'l. Committee |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Larry C. Rogers<br>93 51 209 Street<br>Queens Village, NY 11428<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Tax Consultant<br>Aggregate Year-to-Date > $ 50 | 5/93 Monthly Payroll Deduction | $10 earmarked for U.S. Rep. Floyd H. Flake |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Alec P. Stais<br>86 Strathmore Road<br>Manhasset, NY 11030<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation: Director<br>Aggregate Year-to-Date > $ 180 | 5/93 Monthly Payroll Deduction | $44 earmarked for Dem. Nat'l. Committee |

SUBTOTAL of Receipts This Page (optional) ..... $ 96

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

2 3 3 8 4 2 4 3 0 1

SCHEDULE A ITEMIZED RECEIPTS

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FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Robert Terry<br>1234 Galway Court<br>Geneva, IL 60134<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Investment Officer<br>Aggregate Year-to-Date > $ 105 | 5/93 Monthly Payroll Deduction | $21 earmarked for U.S. Rep. Dennis Hastert |
| B. Charles L. Tyls<br>98 Ridgewald Avenue<br>Waldwick, NJ 07463<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Manager-Personnel & Services<br>Aggregate Year-to-Date > $ 10 | 5/93 Monthly Payroll Deduction | $ 2 earmarked for U.S. Rep. Marge Roukema |
| C. Patricia A. Walden<br>5120 South Douglas Road<br>Oswego, IL 60543<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Senior Lease Consultant<br>Aggregate Year-to-Date > $ 50 | 5/93 Monthly Payroll Deduction | $10 earmarked for Rep. Nat'l. Committee |
| D. Jane C. Weinberg<br>6 Marigold Court<br>Princeton, NJ 08540<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Metropolitan Life Insurance Company<br>Occupation Assistant General Counsel<br>Aggregate Year-to-Date > $ 50 | 5/93 Monthly Payroll Deduction | $10 earmarked for Dem. Nat'l. Committee |
| E. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > $ | Date (month, day, year) | Amount of Each Receipt this Period |
| F. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > $ | Date (month, day, year) | Amount of Each Receipt this Period |
| G. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer<br>Occupation<br>Aggregate Year-to-Date > $ | Date (month, day, year) | Amount of Each Receipt this Period |

SUBTOTAL of Receipts This Page (optional) ..... $ 43

TOTAL This Period (last page this line number only) ..... $ 5,230.00

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 23

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)

Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| Robb for Senate<br>c/o John Jonas, Patton Boggs<br>2550 M Street, NW, Suite 800<br>Washington, DC 20037 | Chuck Robb-D-VA<br>U.S. Senator<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | 5/27/93 | $ 1,000.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Mike Andrews for Congress Committee<br>P.O. Box 2884<br>Washington, DC 20013 | Mike Andrews-R-TX<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | 5/27/93 | $ 1,500.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Bill Thomas Campaign Committee<br>P.O. Box 23175<br>Washington, DC 20026 | Bill Thomas-R-CA<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | 5/27/93 | $ 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Matsui for Congress Committee<br>P.O. Box 523024<br>Springfield, VA 22152 | Bob Matsui-D-CA<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | 5/27/93 | $ 1,000.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Hoagland for Congress<br>c/o Wunder Diefenderfer<br>1615 L Street, NW, Suite 650<br>Washington, DC 20036 | Peter Hoagland-D-NE<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | 5/27/93 | $ 1,000.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Bill Brewster for Congress<br>P.O. Box 10<br>Madill, OK 73446 | Bill Brewster-D-OK<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | 5/27/93 | $ 500.00 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Hastert for Congress Committee<br>P.O. Box 625<br>Batavia, IL 60510 | Dennis Hastert-R-IL<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | 5/27/93 | $ 500.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Committee to Re-elect Ed Towns<br>P.O. Box 2884<br>Washington, DC 20013 | Ed Towns-D-NY<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | 5/27/93 | $ 500.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Hinchey for Congress<br>c/o Tom Parkhurst<br>509 D Street, NE<br>Washington, DC 20002 | Maurice Hinchey-D-NY<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | 5/27/93 | $ 500.00 |

**SUBTOTAL** of Disbursements This Page (optional) ..... $ 7,000.00

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

23038424305

SCHEDULE B

# ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| | | | |
|---|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Eric Fingerhut for Congress Committee<br>16 Royal Dominion Court<br>Bethesda, MD 20817 | Purpose of Disbursement<br>Eric Fingerhut-D-OH<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | Date (month, day, year)<br>5/27/93 | Amount of Each Disbursement This Period<br>$ 500.00 |
| B. Full Name, Mailing Address and ZIP Code<br>Miller for Congress<br>104 N. West Street<br>Alexandria, VA 22314 | Purpose of Disbursement<br>George Miller-D-CA<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | Date (month, day, year)<br>5/27/93 | Amount of Each Disbursement This Period<br>$ 1,500.00 |
| C. Full Name, Mailing Address and ZIP Code<br>Friends of Sherwood Boehlert<br>P.O. Box C<br>Utica, NY 13503 | Purpose of Disbursement<br>Sherwood Boehlert-R-NY<br>U.S. Representative<br>Disbursement for: ✓ Primary ☐ General ☐ Other (specify) | Date (month, day, year)<br>5/27/93 | Amount of Each Disbursement This Period<br>$ 250.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>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<br>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<br>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<br>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<br>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<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |

| | |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) | $ 2,250.00 |
| TOTAL This Period (last page this line number only) | $ 9,250.00 |

93031243504

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 29

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)
Metropolitan Life Insurance Company (MetLife) Employees' Political Participation Fund A

| | | | |
|---|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>McGreevey for Senate<br>2 Spencer Avenue<br>Colonia, NJ 07067<br>Attention: Marilyn Taffet | Purpose of Disbursement<br>James McGreevey-D-NJ<br>State Senator<br>Disbursement for: ☑ Primary ☐ General ☐ Other (specify) | Date (month, day, year)<br>5/27/93 | Amount of Each Disbursement This Period<br>$ 500.00 |
| B. Full Name, Mailing Address and ZIP Code<br>Illinois Life Insurance PAC<br>c/o Larry Barry<br>600 South Second Street, Suite 201<br>Springfield, IL 62704 | Purpose of Disbursement<br>Disbursement for: ☑ Primary ☐ General ☐ Other (specify) | Date (month, day, year)<br>5/27/93 | Amount of Each Disbursement This Period<br>$ 2,000.00 |
| C. Full Name, Mailing Address and ZIP Code<br>David B. Irwin Campaign Committee<br>P.O. Box 410<br>981 Milstead Avenue<br>Conyers, GA 30207 | Purpose of Disbursement<br>David B. Irwin-R-GA<br>State Senator<br>Disbursement for: ☐ Primary ☐ General ☑ Other (specify) Special Election | Date (month, day, year)<br>5/27/93 | Amount of Each Disbursement This Period<br>$ 200.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>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<br>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<br>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<br>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<br>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<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |

| | |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) | $ 2,700.00 |
| TOTAL This Period (last page this line number only) | $ 2,700.00 |

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 6/15/93 |
| ☐ | 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 |

ES
PREPARER

6/18/93
DATE PREPARED

FEC FORM 70-2 (12/92)

73038124306