SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 11 FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
American Council of Life Insurance PAC

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Linda H. Cunningham 1001 Pennsylvania Avenue, NW Washington DC 20004 Receipt For: [ ] Primary [X] General [ ] Other (specify) :	American Council of Life Insurance Occupation: Director Aggregate Year-to-Date > $ 405.60	05/31/2000	81.12
Ms. Joanne S. Daly 1001 Pennsylvania Avenue, NW Washington DC 20004-2599 Receipt For: [ ] Primary [X] General [ ] Other (specify) :	American Council of Life Insurance Occupation: Vice President, Admin. Aggregate Year-to-Date > $ 750.00	05/31/2000	150.00
Ms. Angela J. Arnett 1001 Pennsylvania Avenue, NW Washington DC 20004-2599 Receipt For: [ ] Primary [X] General [ ] Other (specify) :	American Council of Life Insurance Occupation: Senior Counsel Aggregate Year-to-Date > $ 452.40	05/31/2000	90.48
Mr. Robert S. McConnaughey 1001 Pennsylvania Avenue, NW Washington DC 20004-2599 Receipt For: [ ] Primary [X] General [ ] Other (specify) :	American Council of Life Insurance Occupation: Senior Counsel Aggregate Year-to-Date > $ 631.30	05/31/2000	126.26
Mr. Bruce W. Boyes 100 Court Street Binghamton NY 13902-3902 Receipt For: [ ] Primary [X] General [ ] Other (specify) :	Security Mutual Life Insurance Occupation: President & CEO Aggregate Year-to-Date > $ 400.00	05/23/2000	400.00
Mr. George B. Kozol P. O. Box 1625 Binghamton NY 13902-1625 Receipt For: [ ] Primary [X] General [ ] Other (specify) :	Security Mutual Life Insurance Company Occupation: Vice President - Advanced Markets Aggregate Year-to-Date > $ 400.00	05/23/2000	400.00
Mr. J. Bruce Ferguson 1001 Pennsylvania Avenue, NW Washington DC 20004-2599 Receipt For: [ ] Primary [X] General [ ] Other (specify) :	American Council of Life Insurance Occupation: Deputy Vice President Aggregate Year-to-Date > $ 286.50	05/31/2000	57.30

SUBTOTALS of Receipts This Page (Optional) .....

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