

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 STEVEN WALKER

Signature of Treasurer STEVEN WALKER [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="89114.87"/>	<input type="text" value="89114.87"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="88452.81"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10348.38"/>	<input type="text" value="45686.32"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="98801.19"/>	<input type="text" value="134801.19"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3500.00"/>	<input type="text" value="39500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="95301.19"/>	<input type="text" value="95301.19"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10028.26	42249.04
(ii) Unitemized .....	320.12	3437.28
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10348.38	45686.32
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10348.38	45686.32
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	10348.38	45686.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10348.38	45686.32

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	39500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3500.00	39500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3500.00	39500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10348.38	45686.32
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10348.38	45686.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

WE ARE AMENDING OUR 2013 12-DAY PRE-SPECIAL (12S) REPORT COVERING 07/01/2013 THRU 09/04/2013 (FEC-888023) TO REDESIGNATE A CONTRIBUTION IN THE AMOUNT OF \$1,000.00 DATED 08/21/2013 TO BYRNE FOR CONGRESS INC (C00545673) FROM PRIMARY 2014 TO SPECIAL PRIMARY 2013.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 55  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. SCOTT ADAMS**

Mailing Address 3124 PINE RIDGE ROAD

City BIRMINGHAM	State AL	Zip Code 35213
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SVP & CHIEF HR OFFICER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002522S000001L11A1**

Amount of Each Receipt this Period  

48.75
-------

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**B. SCOTT ADAMS**

Mailing Address 3124 PINE RIDGE ROAD

City BIRMINGHAM	State AL	Zip Code 35213
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SVP & CHIEF HR OFFICER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002528S000001L11A1**

Amount of Each Receipt this Period  

48.75
-------

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**C. SCOTT ADAMS**

Mailing Address 3124 PINE RIDGE ROAD

City BIRMINGHAM	State AL	Zip Code 35213
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SVP & CHIEF HR OFFICER
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002532S000001L11A1**

Amount of Each Receipt this Period  

48.75
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>146.25</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. SCOTT ADAMS**

Mailing Address 3124 PINE RIDGE ROAD

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SVP & CHIEF HR OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt **08 / 31 / 2013**

**Transaction ID : B002541S000001L11A1**

Amount of Each Receipt this Period **48.75**

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. M. LEE BARTLETT**

Mailing Address 3155 PINE RIDGE ROAD

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP CORPORATE ACCOUNTING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **997.16**

Date of Receipt **07 / 15 / 2013**

**Transaction ID : B002523S000001L11A1**

Amount of Each Receipt this Period **62.78**

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. M. LEE BARTLETT**

Mailing Address 3155 PINE RIDGE ROAD

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP CORPORATE ACCOUNTING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **997.16**

Date of Receipt **07 / 31 / 2013**

**Transaction ID : B002529S000001L11A1**

Amount of Each Receipt this Period **62.78**

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... **174.31**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. M. LEE BARTLETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3155 PINE RIDGE ROAD

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP CORPORATE ACCOUNTING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 997.16

Date of Receipt 08 / 15 / 2013  
**Transaction ID : B002533S000001L11A1**

Amount of Each Receipt this Period 62.78

PAYROLL DEDUCTION

**B. M. LEE BARTLETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 3155 PINE RIDGE ROAD

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP CORPORATE ACCOUNTING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 997.16

Date of Receipt 08 / 31 / 2013  
**Transaction ID : B002542S000001L11A1**

Amount of Each Receipt this Period 62.78

PAYROLL DEDUCTION

**C. RICHARD J. BIELEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3720 WIMBLETON LANE

City BIRMINGHAM State AL Zip Code 35223

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation VICE CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4950.00

Date of Receipt 07 / 15 / 2013  
**Transaction ID : B002522S000002L11A1**

Amount of Each Receipt this Period 312.50

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 438.06

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

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

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

FOR LINE NUMBER: PAGE 10 OF 55  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. RICHARD J. BIELEN**

Mailing Address 3720 WIMBLETON LANE

City State Zip Code  
BIRMINGHAM AL 35223

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

Name of Employer Occupation  
PROTECTIVE LIFE CORPORATION VICE CHAIRMAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2013  
**Transaction ID : B002528S000002L11A1**

Amount of Each Receipt this Period  
312.50

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. RICHARD J. BIELEN**

Mailing Address 3720 WIMBLETON LANE

City State Zip Code  
BIRMINGHAM AL 35223

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

Name of Employer Occupation  
PROTECTIVE LIFE CORPORATION VICE CHAIRMAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2013  
**Transaction ID : B002532S000002L11A1**

Amount of Each Receipt this Period  
312.50

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. RICHARD J. BIELEN**

Mailing Address 3720 WIMBLETON LANE

City State Zip Code  
BIRMINGHAM AL 35223

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

Name of Employer Occupation  
PROTECTIVE LIFE CORPORATION VICE CHAIRMAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2013  
**Transaction ID : B002541S000002L11A1**

Amount of Each Receipt this Period  
312.50

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 937.50

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

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

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

FOR LINE NUMBER: PAGE 11 OF 55  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. EDNA BOATRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 OAKS DRIVE  
 City BIRMINGHAM State AL Zip Code 35209  
 Date of Receipt 07 / 15 / 2013  
 Transaction ID : B002523S000002L11A1  
 Amount of Each Receipt this Period 42.00  
 PAYROLL DEDUCTION  
 FEC ID number of contributing federal political committee. C  
 Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 672.00

**B. EDNA BOATRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 OAKS DRIVE  
 City BIRMINGHAM State AL Zip Code 35209  
 Date of Receipt 07 / 31 / 2013  
 Transaction ID : B002529S000002L11A1  
 Amount of Each Receipt this Period 42.00  
 PAYROLL DEDUCTION  
 FEC ID number of contributing federal political committee. C  
 Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 672.00

**C. EDNA BOATRIGHT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 107 OAKS DRIVE  
 City BIRMINGHAM State AL Zip Code 35209  
 Date of Receipt 08 / 15 / 2013  
 Transaction ID : B002533S000002L11A1  
 Amount of Each Receipt this Period 42.00  
 PAYROLL DEDUCTION  
 FEC ID number of contributing federal political committee. C  
 Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 672.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 126.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. EDNA BOATRIGHT**

Mailing Address 107 OAKS DRIVE

City BIRMINGHAM State AL Zip Code 35209

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **672.00**

Date of Receipt **08 / 31 / 2013**

**Transaction ID : B002542S000002L11A1**

Amount of Each Receipt this Period **42.00**

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. SALLIE M. BRYANT**

Mailing Address 4008 ACTON CIRCLE

City BIRMINGHAM State AL Zip Code 35243

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **07 / 15 / 2013**

**Transaction ID : B002523S000003L11A1**

Amount of Each Receipt this Period **21.00**

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. SALLIE M. BRYANT**

Mailing Address 4008 ACTON CIRCLE

City BIRMINGHAM State AL Zip Code 35243

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **07 / 31 / 2013**

**Transaction ID : B002529S000003L11A1**

Amount of Each Receipt this Period **21.00**

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... **84.00**

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

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

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

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. SALLIE M. BRYANT**  
Full Name (Last, First, Middle Initial)

Mailing Address 4008 ACTON CIRCLE

City BIRMINGHAM State AL Zip Code 35243

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 15 / 2013  
**Transaction ID : B002533S000003L11A1**

Amount of Each Receipt this Period 21.00

PAYROLL DEDUCTION

**B. SALLIE M. BRYANT**  
Full Name (Last, First, Middle Initial)

Mailing Address 4008 ACTON CIRCLE

City BIRMINGHAM State AL Zip Code 35243

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation DIRECTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt 08 / 31 / 2013  
**Transaction ID : B002542S000003L11A1**

Amount of Each Receipt this Period 21.00

PAYROLL DEDUCTION

**C. STEVE M. CALLAWAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2900 REDMONT PARK CIRCLE #501W

City BIRMINGHAM State AL Zip Code 35205

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR ASSOCIATE COUNSEL, SVP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1306.88

Date of Receipt 07 / 15 / 2013  
**Transaction ID : B002522S000003L11A1**

Amount of Each Receipt this Period 87.96

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 129.96

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

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

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

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

NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. STEVE M. CALLAWAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2900 REDMONT PARK CIRCLE  
#501W

City BIRMINGHAM State AL Zip Code 35205

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR ASSOCIATE COUNSEL, SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1306.88

Date of Receipt  
07 / 31 / 2013  
Transaction ID : B002528S000003L11A1

Amount of Each Receipt this Period  
87.96

PAYROLL DEDUCTION

**B. STEVE M. CALLAWAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2900 REDMONT PARK CIRCLE  
#501W

City BIRMINGHAM State AL Zip Code 35205

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR ASSOCIATE COUNSEL, SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1306.88

Date of Receipt  
08 / 15 / 2013  
Transaction ID : B002532S000003L11A1

Amount of Each Receipt this Period  
87.96

PAYROLL DEDUCTION

**C. STEVE M. CALLAWAY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2900 REDMONT PARK CIRCLE  
#501W

City BIRMINGHAM State AL Zip Code 35205

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR ASSOCIATE COUNSEL, SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1306.88

Date of Receipt  
08 / 31 / 2013  
Transaction ID : B002541S000003L11A1

Amount of Each Receipt this Period  
87.96

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 263.88

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

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

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

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

NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. GREGG CARIOLANO**  
Full Name (Last, First, Middle Initial)

Mailing Address 5200 AUTUMNWINDS DR.

City ST. LOUIS	State MO	Zip Code 63129
-------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation CFO, APD
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002523S000004L11A1**

Amount of Each Receipt this Period  

22.50
-------

**PAYROLL DEDUCTION**

**B. GREGG CARIOLANO**  
Full Name (Last, First, Middle Initial)

Mailing Address 5200 AUTUMNWINDS DR.

City ST. LOUIS	State MO	Zip Code 63129
-------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation CFO, APD
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002529S000004L11A1**

Amount of Each Receipt this Period  

22.50
-------

**PAYROLL DEDUCTION**

**C. GREGG CARIOLANO**  
Full Name (Last, First, Middle Initial)

Mailing Address 5200 AUTUMNWINDS DR.

City ST. LOUIS	State MO	Zip Code 63129
-------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation CFO, APD
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002533S000004L11A1**

Amount of Each Receipt this Period  

22.50
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>67.50</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 55  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. GREGG CARIOLANO**

Mailing Address 5200 AUTUMNWINDS DR.

City State Zip Code  
ST. LOUIS MO 63129

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

Name of Employer Occupation  
PROTECTIVE LIFE INSURANCE COMPANY CFO, APD

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2013  
**Transaction ID : B002542S000004L11A1**

Amount of Each Receipt this Period  
 22.50

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. ELAINE L. CHAO**

Mailing Address 217 C STREET N.E.

City State Zip Code  
WASHINGTON DC 20002

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

Name of Employer Occupation  
THE HERITAGE FOUNDATION DISTINGUISHED FELLOW

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2013  
**Transaction ID : B002534S000001L11A1**

Amount of Each Receipt this Period  
 425.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. KURT GUSKE**

Mailing Address 220 HONEY TREE LANE

City State Zip Code  
LYNCHBURG VA 24502

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

Name of Employer Occupation  
PROTECTIVE LIFE INSURANCE COMPANY VICE PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2013  
**Transaction ID : B002523S000006L11A1**

Amount of Each Receipt this Period  
 15.75

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 463.25

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

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. KURT GUSKE**  
Full Name (Last, First, Middle Initial)

Mailing Address 220 HONEY TREE LANE

City LYNCHBURG State VA Zip Code 24502

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2013  
**Transaction ID : B002529S000006L11A1**

Amount of Each Receipt this Period  
 15.75

PAYROLL DEDUCTION

**B. KURT GUSKE**  
Full Name (Last, First, Middle Initial)

Mailing Address 220 HONEY TREE LANE

City LYNCHBURG State VA Zip Code 24502

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2013  
**Transaction ID : B002533S000006L11A1**

Amount of Each Receipt this Period  
 15.75

PAYROLL DEDUCTION

**C. KURT GUSKE**  
Full Name (Last, First, Middle Initial)

Mailing Address 220 HONEY TREE LANE

City LYNCHBURG State VA Zip Code 24502

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2013  
**Transaction ID : B002542S000006L11A1**

Amount of Each Receipt this Period  
 15.75

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	47.25
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. BRUCE HEEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4004 MILNER WAY

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation VP, LAD ACCOUNTING
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002523S000007L11A1**

Amount of Each Receipt this Period  

30.00
-------

**PAYROLL DEDUCTION**

**B. BRUCE HEEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4004 MILNER WAY

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation VP, LAD ACCOUNTING
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002529S000007L11A1**

Amount of Each Receipt this Period  

30.00
-------

**PAYROLL DEDUCTION**

**C. BRUCE HEEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4004 MILNER WAY

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation VP, LAD ACCOUNTING
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002533S000007L11A1**

Amount of Each Receipt this Period  

30.00
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. BRUCE HEEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4004 MILNER WAY

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation VP, LAD ACCOUNTING
---	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002542S000007L11A1**

Amount of Each Receipt this Period  
30.00

PAYROLL DEDUCTION

**B. DERRY HERRING**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6123 EAGLE POINT CIRCLE

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation CHIEF AUDITOR
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1473.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002522S000006L11A1**

Amount of Each Receipt this Period  
92.92

PAYROLL DEDUCTION

**C. DERRY HERRING**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6123 EAGLE POINT CIRCLE

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation CHIEF AUDITOR
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1473.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002528S000006L11A1**

Amount of Each Receipt this Period  
92.92

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	215.84
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. DERRY HERRING**  
Full Name (Last, First, Middle Initial)

Mailing Address 6123 EAGLE POINT CIRCLE

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation CHIEF AUDITOR
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1473.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002532S000006L11A1**

Amount of Each Receipt this Period  

92.92
-------

**PAYROLL DEDUCTION**

**B. DERRY HERRING**  
Full Name (Last, First, Middle Initial)

Mailing Address 6123 EAGLE POINT CIRCLE

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation CHIEF AUDITOR
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1473.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002541S000006L11A1**

Amount of Each Receipt this Period  

92.92
-------

**PAYROLL DEDUCTION**

**C. CAROLYN JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2537 DOLLY RIDGE ROAD

City BIRMINGHAM	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation EXECUTIVE VICE PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002523S000010L11A1**

Amount of Each Receipt this Period  

100.00
--------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	285.84
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. CAROLYN JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2537 DOLLY RIDGE ROAD

City BIRMINGHAM	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation EXECUTIVE VICE PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002529S000010L11A1**

Amount of Each Receipt this Period  
100.00

PAYROLL DEDUCTION

**B. M. SCOTT KARCHUNAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 14814 BROOKHAVEN PLACE

City CHESTERFIELD	State MO	Zip Code 63017
----------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation SENIOR VICE PRESIDENT
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1060.86

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002523S000011L11A1**

Amount of Each Receipt this Period  
67.71

PAYROLL DEDUCTION

**C. M. SCOTT KARCHUNAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 14814 BROOKHAVEN PLACE

City CHESTERFIELD	State MO	Zip Code 63017
----------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation SENIOR VICE PRESIDENT
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1060.86

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002529S000011L11A1**

Amount of Each Receipt this Period  
67.71

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	235.42
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. M. SCOTT KARCHUNAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 14814 BROOKHAVEN PLACE

City CHESTERFIELD	State MO	Zip Code 63017
----------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation SENIOR VICE PRESIDENT
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1060.86

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002533S000010L11A1**

Amount of Each Receipt this Period  

67.71
-------

**PAYROLL DEDUCTION**

**B. M. SCOTT KARCHUNAS**  
Full Name (Last, First, Middle Initial)

Mailing Address 14814 BROOKHAVEN PLACE

City CHESTERFIELD	State MO	Zip Code 63017
----------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation SENIOR VICE PRESIDENT
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1060.86

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002542S000010L11A1**

Amount of Each Receipt this Period  

67.71
-------

**PAYROLL DEDUCTION**

**C. JESSICA KUBAT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1207 31ST STREET SOUTH

City BIRMINGHAM	State AL	Zip Code 35205
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation ASSOCIATE COUNSEL
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002522S000007L11A1**

Amount of Each Receipt this Period  

20.00
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. JESSICA KUBAT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1207 31ST STREET SOUTH

City BIRMINGHAM State AL Zip Code 35205

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation ASSOCIATE COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **07 / 31 / 2013**  
Transaction ID : **B002528S000007L11A1**

Amount of Each Receipt this Period **20.00**

PAYROLL DEDUCTION

**B. JESSICA KUBAT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1207 31ST STREET SOUTH

City BIRMINGHAM State AL Zip Code 35205

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation ASSOCIATE COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **08 / 15 / 2013**  
Transaction ID : **B002532S000007L11A1**

Amount of Each Receipt this Period **20.00**

PAYROLL DEDUCTION

**C. JESSICA KUBAT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1207 31ST STREET SOUTH

City BIRMINGHAM State AL Zip Code 35205

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation ASSOCIATE COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **08 / 31 / 2013**  
Transaction ID : **B002541S000007L11A1**

Amount of Each Receipt this Period **20.00**

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. FRANK LASSITER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3317 FARING ROAD  
 City BIRMINGHAM State AL Zip Code 35223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **333.60**

Date of Receipt **07 / 15 / 2013**  
**Transaction ID : B002523S000012L11A1**  
 Amount of Each Receipt this Period **21.12**  
 PAYROLL DEDUCTION

**B. FRANK LASSITER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3317 FARING ROAD  
 City BIRMINGHAM State AL Zip Code 35223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **333.60**

Date of Receipt **07 / 31 / 2013**  
**Transaction ID : B002529S000012L11A1**  
 Amount of Each Receipt this Period **21.12**  
 PAYROLL DEDUCTION

**C. FRANK LASSITER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3317 FARING ROAD  
 City BIRMINGHAM State AL Zip Code 35223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **333.60**

Date of Receipt **08 / 15 / 2013**  
**Transaction ID : B002533S000011L11A1**  
 Amount of Each Receipt this Period **21.12**  
 PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>63.36</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. FRANK LASSITER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3317 FARING ROAD

City BIRMINGHAM State AL Zip Code 35223

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.60

Date of Receipt 08 / 31 / 2013  
Transaction ID : B002542S000011L11A1

Amount of Each Receipt this Period 21.12

PAYROLL DEDUCTION

**B. DEBORAH J. LONG**  
Full Name (Last, First, Middle Initial)

Mailing Address 3576 SHANDWICK PLACE

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR VP & GENERAL COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3360.00

Date of Receipt 07 / 15 / 2013  
Transaction ID : B002522S000009L11A1

Amount of Each Receipt this Period 210.00

PAYROLL DEDUCTION

**C. DEBORAH J. LONG**  
Full Name (Last, First, Middle Initial)

Mailing Address 3576 SHANDWICK PLACE

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR VP & GENERAL COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3360.00

Date of Receipt 07 / 31 / 2013  
Transaction ID : B002528S000009L11A1

Amount of Each Receipt this Period 210.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 441.12

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

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

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

FOR LINE NUMBER: PAGE 26 OF 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. DEBORAH J. LONG**

Mailing Address 3576 SHANDWICK PLACE

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SENIOR VP & GENERAL COUNSEL
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002532S000009L11A1**

Amount of Each Receipt this Period  
210.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. DEBORAH J. LONG**

Mailing Address 3576 SHANDWICK PLACE

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SENIOR VP & GENERAL COUNSEL
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002541S000009L11A1**

Amount of Each Receipt this Period  
210.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. DAVID LOPER**

Mailing Address 1300 27TH PLACE SOUTH #32

City BIRMINGHAM	State AL	Zip Code 35205
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SR ASSOCIATE COUNSEL, SVP
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
336.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002522S000010L11A1**

Amount of Each Receipt this Period  
21.00

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	441.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. DAVID LOPER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 27TH PLACE SOUTH #32

City BIRMINGHAM	State AL	Zip Code 35205
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SR ASSOCIATE COUNSEL, SVP
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002528S000010L11A1**

Amount of Each Receipt this Period  

21.00
-------

**PAYROLL DEDUCTION**

**B. DAVID LOPER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 27TH PLACE SOUTH #32

City BIRMINGHAM	State AL	Zip Code 35205
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SR ASSOCIATE COUNSEL, SVP
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002532S000010L11A1**

Amount of Each Receipt this Period  

21.00
-------

**PAYROLL DEDUCTION**

**C. DAVID LOPER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 27TH PLACE SOUTH #32

City BIRMINGHAM	State AL	Zip Code 35205
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SR ASSOCIATE COUNSEL, SVP
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002541S000010L11A1**

Amount of Each Receipt this Period  

21.00
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>63.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. DAVID LUCZYNSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 191 JOAQUIN CIRCLE

City DANVILLE State CA Zip Code 94526

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **582.80**

Date of Receipt  
**07 / 15 / 2013**  
**Transaction ID : B002523S000013L11A1**

Amount of Each Receipt this Period  
**36.65**

PAYROLL DEDUCTION

**B. DAVID LUCZYNSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 191 JOAQUIN CIRCLE

City DANVILLE State CA Zip Code 94526

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **582.80**

Date of Receipt  
**07 / 31 / 2013**  
**Transaction ID : B002529S000013L11A1**

Amount of Each Receipt this Period  
**36.65**

PAYROLL DEDUCTION

**C. DAVID LUCZYNSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 191 JOAQUIN CIRCLE

City DANVILLE State CA Zip Code 94526

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **582.80**

Date of Receipt  
**08 / 15 / 2013**  
**Transaction ID : B002533S000012L11A1**

Amount of Each Receipt this Period  
**36.65**

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>109.95</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. DAVID LUCZYNSKI**  
Full Name (Last, First, Middle Initial)

Mailing Address 191 JOAQUIN CIRCLE

City DANVILLE State CA Zip Code 94526

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **582.80**

Date of Receipt **08 / 31 / 2013**  
**Transaction ID : B002542S000012L11A1**

Amount of Each Receipt this Period **36.65**

PAYROLL DEDUCTION

**B. JOHN J. MCMAHON JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 2140 WARWICK DRIVE SOUTH

City BIRMINGHAM State AL Zip Code 35209

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

Name of Employer LIGON INDUSTRIES, LLC Occupation CHAIRMAN OF THE BOARD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **956.25**

Date of Receipt **08 / 15 / 2013**  
**Transaction ID : B002534S000002L11A1**

Amount of Each Receipt this Period **318.75**

PAYROLL DEDUCTION

**C. WILLIAM L. MCMULLEN JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 2556 WHETSTONE ROAD

City BIRMINGHAM State AL Zip Code 35243

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SECOND VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **517.36**

Date of Receipt **07 / 15 / 2013**  
**Transaction ID : B002523S000014L11A1**

Amount of Each Receipt this Period **32.58**

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... **387.98**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 55
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. WILLIAM L. MCMULLEN JR**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2556 WHETSTONE ROAD

City BIRMINGHAM	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SECOND VICE PRESIDENT
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
517.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002529S000014L11A1**

Amount of Each Receipt this Period  

32.58
-------

**PAYROLL DEDUCTION**

**B. WILLIAM L. MCMULLEN JR**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2556 WHETSTONE ROAD

City BIRMINGHAM	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SECOND VICE PRESIDENT
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
517.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002533S000013L11A1**

Amount of Each Receipt this Period  

32.58
-------

**PAYROLL DEDUCTION**

**C. WILLIAM L. MCMULLEN JR**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2556 WHETSTONE ROAD

City BIRMINGHAM	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SECOND VICE PRESIDENT
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
517.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002542S000013L11A1**

Amount of Each Receipt this Period  

32.58
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	97.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 31 OF 55  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. LORI OSWALD**

Mailing Address 303 LE JEUNE WAY

City State Zip Code  
BIRMINGHAM AL 35209

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

Name of Employer Occupation  
PROTECTIVE LIFE INSURANCE COMPANY VP CORPORATE ACCOUNTING

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
666.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2013  
**Transaction ID : B002523S000015L11A1**

Amount of Each Receipt this Period  
41.67

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. LORI OSWALD**

Mailing Address 303 LE JEUNE WAY

City State Zip Code  
BIRMINGHAM AL 35209

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

Name of Employer Occupation  
PROTECTIVE LIFE INSURANCE COMPANY VP CORPORATE ACCOUNTING

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
666.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2013  
**Transaction ID : B002529S000015L11A1**

Amount of Each Receipt this Period  
41.67

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. LORI OSWALD**

Mailing Address 303 LE JEUNE WAY

City State Zip Code  
BIRMINGHAM AL 35209

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

Name of Employer Occupation  
PROTECTIVE LIFE INSURANCE COMPANY VP CORPORATE ACCOUNTING

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
666.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2013  
**Transaction ID : B002533S000014L11A1**

Amount of Each Receipt this Period  
41.67

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. LORI OSWALD**  
Full Name (Last, First, Middle Initial)

Mailing Address 303 LE JEUNE WAY

City BIRMINGHAM State AL Zip Code 35209

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP CORPORATE ACCOUNTING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 666.72

Date of Receipt 08 / 31 / 2013  
**Transaction ID : B002542S000014L11A1**

Amount of Each Receipt this Period 41.67

PAYROLL DEDUCTION

**B. PHILIP PASSAFIUME**  
Full Name (Last, First, Middle Initial)

Mailing Address 1033 LAKE COLONY LANE

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 15 / 2013  
**Transaction ID : B002522S000012L11A1**

Amount of Each Receipt this Period 18.75

PAYROLL DEDUCTION

**C. PHILIP PASSAFIUME**  
Full Name (Last, First, Middle Initial)

Mailing Address 1033 LAKE COLONY LANE

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2013  
**Transaction ID : B002528S000012L11A1**

Amount of Each Receipt this Period 18.75

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 79.17

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. PHILIP PASSAFIUME**  
Full Name (Last, First, Middle Initial)

Mailing Address 1033 LAKE COLONY LANE

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 15 / 2013  
Transaction ID : B002532S000012L11A1

Amount of Each Receipt this Period 18.75

PAYROLL DEDUCTION

**B. PHILIP PASSAFIUME**  
Full Name (Last, First, Middle Initial)

Mailing Address 1033 LAKE COLONY LANE

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2013  
Transaction ID : B002541S000012L11A1

Amount of Each Receipt this Period 18.75

PAYROLL DEDUCTION

**C. CHANDRASEKHAR PISUPATI**  
Full Name (Last, First, Middle Initial)

Mailing Address 3093 BROOKHILL DRIVE

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2135.44

Date of Receipt 07 / 15 / 2013  
Transaction ID : B002522S000013L11A1

Amount of Each Receipt this Period 133.96

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 171.46

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. CHANDRASEKHAR PISUPATI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3093 BROOKHILL DRIVE  
 City BIRMINGHAM State AL Zip Code 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2135.44

Date of Receipt 07 / 31 / 2013  
**Transaction ID : B002528S000013L11A1**  
 Amount of Each Receipt this Period 133.96  
 PAYROLL DEDUCTION

**B. CHANDRASEKHAR PISUPATI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3093 BROOKHILL DRIVE  
 City BIRMINGHAM State AL Zip Code 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2135.44

Date of Receipt 08 / 15 / 2013  
**Transaction ID : B002532S000013L11A1**  
 Amount of Each Receipt this Period 133.96  
 PAYROLL DEDUCTION

**C. CHANDRASEKHAR PISUPATI**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3093 BROOKHILL DRIVE  
 City BIRMINGHAM State AL Zip Code 35242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROTECTIVE LIFE CORPORATION Occupation SENIOR VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2135.44

Date of Receipt 08 / 31 / 2013  
**Transaction ID : B002541S000013L11A1**  
 Amount of Each Receipt this Period 133.96  
 PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	401.88
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. LANCE POOLE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1769 SHADES VIEW LANE

City BIRMINGHAM	State AL	Zip Code 35216
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation ANNUITY PRODUCT MANAGER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
621.24

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002523S000016L11A1**

Amount of Each Receipt this Period  

39.27
-------

**PAYROLL DEDUCTION**

**B. LANCE POOLE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1769 SHADES VIEW LANE

City BIRMINGHAM	State AL	Zip Code 35216
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation ANNUITY PRODUCT MANAGER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
621.24

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002529S000016L11A1**

Amount of Each Receipt this Period  

39.27
-------

**PAYROLL DEDUCTION**

**C. LANCE POOLE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1769 SHADES VIEW LANE

City BIRMINGHAM	State AL	Zip Code 35216
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation ANNUITY PRODUCT MANAGER
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
621.24

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002533S000015L11A1**

Amount of Each Receipt this Period  

39.27
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	117.81
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

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

Mailing Address 1769 SHADES VIEW LANE

City	State	Zip Code
BIRMINGHAM	AL	35216

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

Name of Employer	Occupation
PROTECTIVE LIFE INSURANCE COMPANY	ANNUITY PRODUCT MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **621.24**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002542S000015L11A1**

Amount of Each Receipt this Period  

39.27
-------

**PAYROLL DEDUCTION**

**B. EVA T. ROBERTSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1322 ANGLEWOOD CIRCLE

City	State	Zip Code
BIRMINGHAM	AL	35216

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

Name of Employer	Occupation
PROTECTIVE LIFE CORPORATION	VICE PRES., INVESTOR RELATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **592.92**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002522S000014L11A1**

Amount of Each Receipt this Period  

37.50
-------

**PAYROLL DEDUCTION**

**C. EVA T. ROBERTSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1322 ANGLEWOOD CIRCLE

City	State	Zip Code
BIRMINGHAM	AL	35216

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

Name of Employer	Occupation
PROTECTIVE LIFE CORPORATION	VICE PRES., INVESTOR RELATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **592.92**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002528S000014L11A1**

Amount of Each Receipt this Period  

37.50
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>114.27</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. EVA T. ROBERTSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1322 ANGLEWOOD CIRCLE

City BIRMINGHAM	State AL	Zip Code 35216
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation VICE PRES., INVESTOR RELATIONS
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
592.92

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002532S000014L11A1**

Amount of Each Receipt this Period  
37.50

PAYROLL DEDUCTION

**B. EVA T. ROBERTSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1322 ANGLEWOOD CIRCLE

City BIRMINGHAM	State AL	Zip Code 35216
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation VICE PRES., INVESTOR RELATIONS
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
592.92

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002541S000014L11A1**

Amount of Each Receipt this Period  
37.50

PAYROLL DEDUCTION

**C. JOHN SAWYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2619 W LEGENDARY RUN

City CINCINNATI	State OH	Zip Code 45245
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation VP
---	------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1328.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002523S000017L11A1**

Amount of Each Receipt this Period  
83.00

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	158.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

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

Mailing Address 2619 W LEGENDARY RUN

City CINCINNATI	State OH	Zip Code 45245
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation VP
---	------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1328.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002529S000017L11A1**

Amount of Each Receipt this Period  

83.00
-------

**PAYROLL DEDUCTION**

**B. JOHN SAWYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2619 W LEGENDARY RUN

City CINCINNATI	State OH	Zip Code 45245
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation VP
---	------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1328.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002533S000016L11A1**

Amount of Each Receipt this Period  

83.00
-------

**PAYROLL DEDUCTION**

**C. JOHN SAWYER**  
Full Name (Last, First, Middle Initial)

Mailing Address 2619 W LEGENDARY RUN

City CINCINNATI	State OH	Zip Code 45245
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY	Occupation VP
---	------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1328.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002542S000016L11A1**

Amount of Each Receipt this Period  

83.00
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	249.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. MARY SIMMONS**

Mailing Address 135 CR 812

City HEFLIN State AL Zip Code 36264

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 15 / 2013**

**Transaction ID : B002523S000018L11A1**

Amount of Each Receipt this Period  
**25.00**

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. MARY SIMMONS**

Mailing Address 135 CR 812

City HEFLIN State AL Zip Code 36264

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 31 / 2013**

**Transaction ID : B002529S000018L11A1**

Amount of Each Receipt this Period  
**25.00**

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. MARY SIMMONS**

Mailing Address 135 CR 812

City HEFLIN State AL Zip Code 36264

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 15 / 2013**

**Transaction ID : B002533S000017L11A1**

Amount of Each Receipt this Period  
**25.00**

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **75.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

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

Mailing Address 2749 PADEN TRAIL

City BIRMINGHAM State AL Zip Code 35226

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 568.00

Date of Receipt 08 / 15 / 2013  
Transaction ID : B002533S000018L11A1

Amount of Each Receipt this Period 35.77

PAYROLL DEDUCTION

**B. JOHN SIMON**  
Full Name (Last, First, Middle Initial)

Mailing Address 2749 PADEN TRAIL

City BIRMINGHAM State AL Zip Code 35226

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 568.00

Date of Receipt 08 / 31 / 2013  
Transaction ID : B002542S000018L11A1

Amount of Each Receipt this Period 35.77

PAYROLL DEDUCTION

**C. FRANK SOTTOSANTI**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 MAGNOLIA RIDGE

City BIRMINGHAM State AL Zip Code 35243

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation SENIOR VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 571.52

Date of Receipt 07 / 15 / 2013  
Transaction ID : B002523S000020L11A1

Amount of Each Receipt this Period 35.72

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 107.26

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. FRANK SOTTOSANTI**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 MAGNOLIA RIDGE

City BIRMINGHAM State AL Zip Code 35243

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

Name of Employer: PROTECTIVE LIFE INSURANCE COMPANY Occupation: SENIOR VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **571.52**

Date of Receipt: **07 / 31 / 2013**  
Transaction ID : **B002529S000020L11A1**

Amount of Each Receipt this Period: **35.72**

PAYROLL DEDUCTION

**B. FRANK SOTTOSANTI**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 MAGNOLIA RIDGE

City BIRMINGHAM State AL Zip Code 35243

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

Name of Employer: PROTECTIVE LIFE INSURANCE COMPANY Occupation: SENIOR VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **571.52**

Date of Receipt: **08 / 15 / 2013**  
Transaction ID : **B002533S000019L11A1**

Amount of Each Receipt this Period: **35.72**

PAYROLL DEDUCTION

**C. FRANK SOTTOSANTI**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 MAGNOLIA RIDGE

City BIRMINGHAM State AL Zip Code 35243

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

Name of Employer: PROTECTIVE LIFE INSURANCE COMPANY Occupation: SENIOR VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **571.52**

Date of Receipt: **08 / 31 / 2013**  
Transaction ID : **B002542S000019L11A1**

Amount of Each Receipt this Period: **35.72**

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>107.16</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. WAYNE E. STUENKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2120 WOODLARK LANE

City BIRMINGHAM State AL Zip Code 35216

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SR VICE PRESIDENT, CHIEF ACTUARY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2860.00

Date of Receipt 07 / 15 / 2013  
Transaction ID : B002523S000021L11A1

Amount of Each Receipt this Period 180.00

PAYROLL DEDUCTION

**B. WAYNE E. STUENKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2120 WOODLARK LANE

City BIRMINGHAM State AL Zip Code 35216

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SR VICE PRESIDENT, CHIEF ACTUARY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2860.00

Date of Receipt 07 / 31 / 2013  
Transaction ID : B002529S000021L11A1

Amount of Each Receipt this Period 180.00

PAYROLL DEDUCTION

**C. WAYNE E. STUENKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2120 WOODLARK LANE

City BIRMINGHAM State AL Zip Code 35216

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation SR VICE PRESIDENT, CHIEF ACTUARY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2860.00

Date of Receipt 08 / 15 / 2013  
Transaction ID : B002533S000020L11A1

Amount of Each Receipt this Period 180.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 540.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. WAYNE E. STUENKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 2120 WOODLARK LANE

City BIRMINGHAM	State AL	Zip Code 35216
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation SR VICE PRESIDENT, CHIEF ACTUARY
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2860.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2013

**Transaction ID : B002542S000020L11A1**

Amount of Each Receipt this Period  
180.00

PAYROLL DEDUCTION

**B. CARL THIGPEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 8030 GREYSTONE GREEN

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation VICE PRESIDENT, INVESTMENTS
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002522S000016L11A1**

Amount of Each Receipt this Period  
80.00

PAYROLL DEDUCTION

**C. CARL THIGPEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 8030 GREYSTONE GREEN

City BIRMINGHAM	State AL	Zip Code 35242
--------------------	-------------	-------------------

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

Name of Employer PROTECTIVE LIFE CORPORATION	Occupation VICE PRESIDENT, INVESTMENTS
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002528S000016L11A1**

Amount of Each Receipt this Period  
80.00

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	340.00
<b>TOTAL</b> This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. CARL THIGPEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 8030 GREYSTONE GREEN

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation VICE PRESIDENT, INVESTMENTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1280.00

Date of Receipt 08 / 15 / 2013  
Transaction ID : B002532S000016L11A1

Amount of Each Receipt this Period 80.00

PAYROLL DEDUCTION

**B. CARL THIGPEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 8030 GREYSTONE GREEN

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation VICE PRESIDENT, INVESTMENTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1280.00

Date of Receipt 08 / 31 / 2013  
Transaction ID : B002541S000016L11A1

Amount of Each Receipt this Period 80.00

PAYROLL DEDUCTION

**C. ALLEN THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1407 SUTHERLAND PLACE

City HOMEWOOD State AL Zip Code 35209

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation VICE PRESIDENT, IT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 517.72

Date of Receipt 07 / 15 / 2013  
Transaction ID : B002522S000017L11A1

Amount of Each Receipt this Period 32.56

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 192.56

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

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

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

FOR LINE NUMBER: PAGE 46 OF 55  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. ALLEN THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1407 SUTHERLAND PLACE  
 City State Zip Code  
 HOMEWOOD AL 35209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PROTECTIVE LIFE CORPORATION VICE PRESIDENT, IT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 517.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2013  
**Transaction ID : B002528S000017L11A1**  
 Amount of Each Receipt this Period  
 32.56  
 PAYROLL DEDUCTION

**B. ALLEN THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1407 SUTHERLAND PLACE  
 City State Zip Code  
 HOMEWOOD AL 35209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PROTECTIVE LIFE CORPORATION VICE PRESIDENT, IT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 517.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2013  
**Transaction ID : B002532S000017L11A1**  
 Amount of Each Receipt this Period  
 32.56  
 PAYROLL DEDUCTION

**C. ALLEN THOMPSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1407 SUTHERLAND PLACE  
 City State Zip Code  
 HOMEWOOD AL 35209  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PROTECTIVE LIFE CORPORATION VICE PRESIDENT, IT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 517.72

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2013  
**Transaction ID : B002541S000017L11A1**  
 Amount of Each Receipt this Period  
 32.56  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 97.68  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 47 OF 55  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. KATHERINE TIERNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 161 PEACHTREE CIRCLE  
 City BIRMINGHAM State AL Zip Code 35213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 571.52

Date of Receipt 07 / 15 / 2013  
**Transaction ID : B002523S000022L11A1**  
 Amount of Each Receipt this Period 35.72  
 PAYROLL DEDUCTION

**B. KATHERINE TIERNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 161 PEACHTREE CIRCLE  
 City BIRMINGHAM State AL Zip Code 35213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 571.52

Date of Receipt 07 / 31 / 2013  
**Transaction ID : B002529S000022L11A1**  
 Amount of Each Receipt this Period 35.72  
 PAYROLL DEDUCTION

**C. KATHERINE TIERNEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 161 PEACHTREE CIRCLE  
 City BIRMINGHAM State AL Zip Code 35213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 571.52

Date of Receipt 08 / 15 / 2013  
**Transaction ID : B002533S000021L11A1**  
 Amount of Each Receipt this Period 35.72  
 PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 107.16  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. KATHERINE TIERNEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 161 PEACHTREE CIRCLE

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 571.52

Date of Receipt 08 / 31 / 2013  
**Transaction ID : B002542S000021L11A1**

Amount of Each Receipt this Period 35.72

PAYROLL DEDUCTION

**B. STEVEN WALKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1517 HIGHLAND LAKES TRAIL

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation SENIOR VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3200.00

Date of Receipt 07 / 15 / 2013  
**Transaction ID : B002523S000023L11A1**

Amount of Each Receipt this Period 200.00

PAYROLL DEDUCTION

**C. STEVEN WALKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 1517 HIGHLAND LAKES TRAIL

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation SENIOR VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3200.00

Date of Receipt 07 / 31 / 2013  
**Transaction ID : B002529S000023L11A1**

Amount of Each Receipt this Period 200.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 435.72

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

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

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

FOR LINE NUMBER: PAGE 49 OF 55  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. STEVEN WALKER**

Mailing Address 1517 HIGHLAND LAKES TRAIL

City State Zip Code  
BIRMINGHAM AL 35242

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

Name of Employer Occupation  
PROTECTIVE LIFE INSURANCE COMPANY SENIOR VICE PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2013  
**Transaction ID : B002533S000022L11A1**

Amount of Each Receipt this Period  
200.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**B. STEVEN WALKER**

Mailing Address 1517 HIGHLAND LAKES TRAIL

City State Zip Code  
BIRMINGHAM AL 35242

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

Name of Employer Occupation  
PROTECTIVE LIFE INSURANCE COMPANY SENIOR VICE PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2013  
**Transaction ID : B002542S000022L11A1**

Amount of Each Receipt this Period  
200.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)  
**C. MATTHEW WEBER**

Mailing Address 5800 VALLEY PARK DRIVE

City State Zip Code  
LOUISVILLE KY 40299

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

Name of Employer Occupation  
PROTECTIVE LIFE INSURANCE COMPANY DIVISIONAL SALES MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
419.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2013  
**Transaction ID : B002523S000024L11A1**

Amount of Each Receipt this Period  
26.20

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 426.20

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. MATTHEW WEBER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5800 VALLEY PARK DRIVE

City LOUISVILLE State KY Zip Code 40299

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation DIVISIONAL SALES MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 419.20

Date of Receipt  
07 / 31 / 2013  
Transaction ID : B002529S000024L11A1

Amount of Each Receipt this Period  
26.20

PAYROLL DEDUCTION

**B. MATTHEW WEBER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5800 VALLEY PARK DRIVE

City LOUISVILLE State KY Zip Code 40299

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation DIVISIONAL SALES MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 419.20

Date of Receipt  
08 / 15 / 2013  
Transaction ID : B002533S000023L11A1

Amount of Each Receipt this Period  
26.20

PAYROLL DEDUCTION

**C. MATTHEW WEBER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5800 VALLEY PARK DRIVE

City LOUISVILLE State KY Zip Code 40299

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation DIVISIONAL SALES MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 419.20

Date of Receipt  
08 / 31 / 2013  
Transaction ID : B002542S000023L11A1

Amount of Each Receipt this Period  
26.20

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 78.60

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 OF 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)  
**A. PAUL WELLS**

Mailing Address 4186 EAGLE CREST DRIVE

City	State	Zip Code
BIRMINGHAM	AL	35242

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

Name of Employer	Occupation
PROTECTIVE LIFE INSURANCE COMPANY	VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **392.96**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

**Transaction ID : B002523S000025L11A1**

Amount of Each Receipt this Period  

24.77
-------

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**B. PAUL WELLS**

Mailing Address 4186 EAGLE CREST DRIVE

City	State	Zip Code
BIRMINGHAM	AL	35242

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

Name of Employer	Occupation
PROTECTIVE LIFE INSURANCE COMPANY	VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **392.96**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : B002529S000025L11A1**

Amount of Each Receipt this Period  

24.77
-------

**PAYROLL DEDUCTION**

Full Name (Last, First, Middle Initial)  
**C. PAUL WELLS**

Mailing Address 4186 EAGLE CREST DRIVE

City	State	Zip Code
BIRMINGHAM	AL	35242

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

Name of Employer	Occupation
PROTECTIVE LIFE INSURANCE COMPANY	VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **392.96**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2013

**Transaction ID : B002533S000024L11A1**

Amount of Each Receipt this Period  

24.77
-------

**PAYROLL DEDUCTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>74.31</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. PAUL WELLS**  
Full Name (Last, First, Middle Initial)

Mailing Address 4186 EAGLE CREST DRIVE

City BIRMINGHAM State AL Zip Code 35242

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

Name of Employer PROTECTIVE LIFE INSURANCE COMPANY Occupation VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 392.96

Date of Receipt 08 / 31 / 2013  
**Transaction ID : B002542S000024L11A1**

Amount of Each Receipt this Period 24.77

PAYROLL DEDUCTION

**B. VANESSA WILSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 444 EAST 75TH STREET APT 3H

City NEW YORK State NY Zip Code 10021

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

Name of Employer GOLDEN SEEDS, LLC Occupation CHIEF FINANCIAL OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 956.25

Date of Receipt 08 / 15 / 2013  
**Transaction ID : B002534S000003L11A1**

Amount of Each Receipt this Period 318.75

PAYROLL DEDUCTION

**C. CHARLES WINDHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 312 RICHMAR DRIVE

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation ASSISTANT VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 259.08

Date of Receipt 07 / 15 / 2013  
**Transaction ID : B002522S000018L11A1**

Amount of Each Receipt this Period 16.33

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 359.85

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

**A. CHARLES WINDHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 312 RICHMAR DRIVE

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation ASSISTANT VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 259.08

Date of Receipt  
07 / 31 / 2013  
Transaction ID : B002528S000018L11A1

Amount of Each Receipt this Period  
16.33

PAYROLL DEDUCTION

**B. CHARLES WINDHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 312 RICHMAR DRIVE

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation ASSISTANT VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 259.08

Date of Receipt  
08 / 15 / 2013  
Transaction ID : B002532S000018L11A1

Amount of Each Receipt this Period  
16.33

PAYROLL DEDUCTION

**C. CHARLES WINDHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 312 RICHMAR DRIVE

City BIRMINGHAM State AL Zip Code 35213

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

Name of Employer PROTECTIVE LIFE CORPORATION Occupation ASSISTANT VICE PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 259.08

Date of Receipt  
08 / 31 / 2013  
Transaction ID : B002541S000018L11A1

Amount of Each Receipt this Period  
16.33

PAYROLL DEDUCTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	48.99
<b>TOTAL</b> This Period (last page this line number only).....	10028.26

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. BYRNE FOR CONGRESS, INC.**

Mailing Address PO BOX 2743

City MOBILE State AL Zip Code 36652

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**BRADLEY BYRNE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AL District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2013

Transaction ID : B002538S000001L23

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. BYRNE FOR CONGRESS, INC.**

Mailing Address PO BOX 2743

City MOBILE State AL Zip Code 36652

Purpose of Disbursement  
CHANGE DESIGNATION FROM P'2014 TO S'2013

011

Candidate Name  
**BRADLEY BYRNE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AL District: 01

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
SPECIAL PRIMARY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2013

Transaction ID : B002597S000002L23

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. BYRNE FOR CONGRESS, INC.**

Mailing Address PO BOX 2743

City MOBILE State AL Zip Code 36652

Purpose of Disbursement  
CHANGE DESIGNATION FROM P'2014 TO S'2013

011

Candidate Name  
**BRADLEY BYRNE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: AL District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2013

Transaction ID : B002597S000001L23

Amount of Each Disbursement this Period

-1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PROTECTIVE LIFE CORPORATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. FREEDOM FUND**

Mailing Address 701 8TH STREET NW  
SUITE 500

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**FREEDOM FUND**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : B002526S000001L23

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. SESSIONS CAMPAIGN COMMITTEE**

Mailing Address 4131 CARMICHAEL ROAD

City MONTGOMERY State AL Zip Code 36106

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**JEFF SESSIONS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AL District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 21 / 2013

Transaction ID : B002539S000001L23

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2500.00

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

3500.00