REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1999 SEP 20 P 12: 34

TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
National Association of Life Underwriters Political Action Committee

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

CITY, STATE and ZIP CODE
Washington, DC 20006

2. FEC IDENTIFICATION NUMBER
C00005249

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

4. TYPE OF REPORT

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

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

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

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

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

SUMMARY 5. Covering Period Aug 1, 1999 through Aug 31, 1999	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 19 99		$ 485,731.48
(b) Cash on Hand at Beginning of Reporting Period August 1, 1999	$ 287,028.00	
(c) Total Receipts (from Line 19)	$ 51,637.45	$ 582,029.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 338,665.45	$ 1,067,760.88
7. Total Disbursements (from Line 30)	$ 28,099.21	$ 757,194.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 310,566.24	$ 310,566.24
9. Debts and Obligations Owed TO the Committee (Itemized on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 26,405.73	

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

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

Type or Print Name of Treasurer
Kevin M. Madden, CPA

Signature of Treasurer
Kevin M Madden, CPA

Date
9/20/99

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

FEC FORM 3X
(revised 9/93)

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

(revised 1/1/01)

NAME OF COMMITTEE
National Association of Life Underwriters Political Action Committee

REPORT COVERING PERIOD FROM 8/1/99 TO 8/31/99

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees	16,175.69	108,473.80
i. Itemized (use Schedule A)		
ii. Unitemized	31,086.72	467,221.90
iii. Total (add i and ii) >	47,262.41	575,695.70
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) >	47,262.41	575,695.70
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)	4,375.04	6,333.70
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11 d, 12, 13, 14, 15, 16, 17, and 18) >	51,637.45	582,029.40
20. Total Federal Receipts (subtract line 18 from line 19) >	51,637.45	582,029.40
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal Non-Federal Activity (from Schedule 1-14)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	17,899.21	367,972.14
c. Total Operating Expenditures (add a i, a ii, and b) >	17,899.21	367,972.14
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	10,000.00	375,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	200.00	14,222.50
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) >	200.00	14,222.50
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	28,099.21	757,194.64
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	28,099.21	757,194.64
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	47,262.41	575,695.70
33. Total Contribution Refunds (from line 28d)	200.00	14,222.50
34. Net Contributions (other than loans)(subtract line 33 from 32)	47,062.41	561,473.20
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	17,899.21	367,972.14
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) >	17,899.21	367,972.14

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SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 26

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James M. Allen 134 S. Grand Avenue Waukesha, WI 53186-6009 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 218.40	8/10/99	$42.00
Scott Allen 2680 Pike Dr East Helena, MT 59635-3439 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 236.70	8/10/99	$8.50
Stephen D. Andersen 1621 Dixie Trail Lincoln, NE 68527-9431 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 411.60	8/10/99	$84.00
Carol A. Anderson LUTCF, CFP 1310 North 58th St Omaha, NE 68132-1307 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 245.00	8/10/99	$50.00
Daniel W. Anderson CLU, ChFC 423 River Street Minneapolis, MN 55406 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 400.00	8/23/99	$400.00
Robert B. Anderson CLU 109 E. Main St., #204 Jonesborough, TN 37659-0127 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 436.80	8/10/99	$84.00
Felix Arceneaux CLU, ChFC, LUT 8315 Suffolk Drive Shreveport, LA 71106-5913 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 202.50	8/10/99	$45.00

SUBTOTAL of Receipts This Page (optional) ..... $ 713.50

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

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dale M. Bayard 2021 Marge Lane Sulphur, LA 70663-5223 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Felix R. Baz-Dresch CLU, ChFC 10805 W 98 Terrace OP, KS 66214-2331 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Craig Beachnaw LIC 3217 West Saginaw Lansing, MI 48917-2310 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Fred R. Bean CLU 5208 Crestwood Little Rock, AR 72207 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 472.00	8/10/99	$84.00
Kent A. Bennett LUTCF RR #3, Box 350-D Muncy, PA 17756 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
David B. Bianchi CLU 1125 Beldon Way Reno, NV 89503-3164 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 260.00	8/10/99	$50.00
Blandy Boocock 6001 N. Nauni Valley Drive Paradise Valley, AZ 85253-5134 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 615.00	8/20/99	$15.00

SUBTOTAL of Receipts This Page (optional) ..... $ 443.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John J. Bradley CLU 148 Grove Street Westwood, MA 02090 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 374.95	8/10/99	$83.33
John Proctor Braica CLU, ChFC 108 Howland Ave East Providence, RI 02914-3055 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 342.50	8/10/99	$8.50
Gary A. Bramon CLU, ChFC 269 San Felipe Way Novato, CA 94945-1687 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 382.50	8/10/99	$85.00
C. Robert Brown CLU, LUTCF 8675 WestCott Germantown, TN 38138-7738 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 268.00	8/10/99	$100.00
Joe D. Byars CLU, LUTCF 214 No. 12th St Ft Smith, AR 72901-2713 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Lawrence A. Chargin 7931 N. Locan Clovis, CA 93612 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Thomas R. Clark CLU, ChFC 974 73rd Street #26 Des Moines, IA 50312-1026 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 520.00	8/10/99	$100.00

SUBTOTAL of Receipts This Page (optional)	$ 502.83
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Gordon Thomas Colburn 958 East Wingate St. Covina, CA 91724 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 250.00	8/6/99	$150.00
Randy Collins 3241 Tudor Dr Lexington, KY 40503-3430 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 203.40	8/10/99	$42.00
George S. Condes 4350 Hebron Drive Las Vegas, NV 89117-4944 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
R. Michael Condrey CLU, ChFC 907 Williamson Dr Raleigh, NC 27608-2307 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 297.00	8/30/99	$22.00
Thomas E. Cooper LUTCF, RHU 2341 McVay Cove Memphis, TN 38138 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 340.00	8/10/99	$100.00
David Lewis Corrie 462 S 4th Ave #1900, NML Louisville, KY 40202-3445 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 436.80	8/10/99	$84.00
Orris Crum 7300 W. 110th Street #950 Overland Park, KS 66210-2350 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 436.80	8/10/99	$84.00

SUBTOTAL of Receipts This Page (optional) ..... $ 524.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 26

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
R. Scott Culbertson CFP, CEBS 2023 Cato Drive, #102 State College, PA 16801-2765 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Vincent M. D'Addona CLU, ChFC 141 Greenway Road Lido Beach, NY 11561-4828 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 382.50	8/10/99	$85.00
Steven M. Daniel CLU, ChFC, LUT 2600 Meadowbrook Dr Butte, MT 59701-4028 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 273.40	8/10/99	$42.00
Glen A. Davenport LUTCF 11528 Jefferson Avenue Newport News, VA 23601-1931 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 250.00	8/11/99	$125.00
John A. Davidson LUTCF 1329 E Thousand Oaks Blvd., Suite 128 Thousand Oaks, CA 91362 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Joseph L. Davis CLU, ChFC, CFP 1420 Primrose Road N.W. Washington, DC 20012-1224 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 436.80	8/10/99	$84.00
William James DeBruin LUTCF 106 Edgewood Lane Combined Locks, WI 54113 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00

SUBTOTAL of Receipts This Page (optional) ..... $ 546.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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PAGE 6 OF 26

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Richard F. DeFluri 140 Laurel Meadow Lane Boalsburg, PA 16827 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 250.00	8/23/99	$250.00
John R. Dean CLU, ChFC, MSF 1700 S.W. 15th Ave. Willmar, MN 56201 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 236.00	8/10/99	$42.00
David S. Dickenson II, CLU, ChFC 3785-I Lawder Road Chagrin Falls, OH 44022 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Michael D. Dixon CLU 4505 Las Virgenes Rd. #200 Calabasas, CA 91302-1956 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Anthony J. Domino Jr., CLU, ChFC 83 LONG LOTS ROAD New Canaan, CT 06840 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 500.00	8/30/99	$500.00
Daniel D. Duren LUTCF 5539 S. 27th Street #206 Lincoln, NE 68512 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 205.80	8/10/99	$42.00
Daniel Eddleman CLU 475 Sansome St #1800 San Francisco, CA 94111-3141 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00

SUBTOTAL of Receipts This Page (optional)	$ 1,086.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Donald A. Eichelberger CLU, ChFC, LUT 3217 Highway D65 Dysart, IA 52224-9750 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 436.80	8/10/99	$84.00
Randall E. Ellington CLU, ChFC 110 Elderberry Lane Longwood, FL 32779-3310 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 307.50	8/9/99	$187.50
Byron Hyatt Erstad Jr. 2510 S Nantucket Way Boise, ID 83706-5095 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Stephen D. Estler CLU, ChFC 600 Corporate Dr. #200 Ft Lauderdale, FL 33334-3603 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 205.80	8/10/99	$42.00
Gerald E. Ferrier LUTCF, CTP 608 Sudden Valley Bellingham, WA 98226-4812 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Jeffery L. Ferrier LUTCF, RHU 2012 Niagara Drive Bellingham, WA 98226-5914 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 450.00	8/10/99	$100.00
Thomas F. Flournoy Jr., CLU 2651 Stanislaus Circle Macon, GA 31204-2849 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00

SUBTOTAL of Receipts This Page (optional)	$ 623.50
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 8 OF 26

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Steven M. Frank CLU 5501 Alcove Avenue No. Hollywood, CA 91607-1923 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Debra L. Franklin CLU, CFP 888 7th Avenue, Ste. 201 New York, NY 10106 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 436.80	8/10/99	$84.00
James E. Freilinger CLU, ChFC, MSF 1199 Shore Rd. Cape Elizabeth, ME 04107-2112 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 225.00	8/31/99	$75.00
Gary G. Friedlander LUTCF 1761 NW 17 Lane Gainesville, FL 32605-4084 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 205.80	8/10/99	$42.00
Peter Fulchiron CLU, LUTCF 411 San Andreas Drive Novato, CA 94945-1237 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 480.00	8/10/99	$120.00
Peter Fulchiron CLU, LUTCF 411 San Andreas Drive Novato, CA 94945-1237 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 480.00	8/19/99	($60.00)
Del D. Gab CLU Box 2094 Dickinson, ND 58602-2094 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 275.00	8/10/99	$50.00

SUBTOTAL of Receipts This Page (optional) ..... $ 395.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Seymour Geller CLU, ChFC, CFP 360 First Avenue New York, NY 10010-4912 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 500.00	8/2/99	$250.00
Richard E. Geno CLU, ChFC, CFP 21449 Toll Gate Road Saratoga, CA 95070-5771 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 232.50	8/10/99	$85.00
Lee M. Goeres LUTCF Box 4003 Missoula, MT 59806-4003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 241.00	8/10/99	$25.00
Julian H. Good Jr., CLU, ChFC 5534 Jacquelyn Court New Orleans, LA 70124-1047 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 250.00	8/23/99	$100.00
Michael P. Grossman CFP 152 Hampshire Dr Glastonbury, CT 06033-3059 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Joseph H. Gwinn CLU, ChFC, CPC P. O. Box 308 Vinton, VA 24179-0308 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 302.50	8/10/99	$8.50
Robert J. Haberman LUTCF 6511 Campbell Lincoln, NE 68510-4119 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 300.00	8/5/99	$300.00

SUBTOTAL of Receipts This Page (optional) ..... $ 852.50

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Bruce A. Hager 808 Harwood Drive Fargo, ND 58104 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 436.80	8/10/99	$84.00
Karl Erik Hansen CLU, ChFC, LUT 218 N. El Monte Avenue Los Altos, CA 94022-2354 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 382.50	8/10/99	$85.00
Sharon L. Hansen P. O. Box 2305 Mt Vernon, WA 98273-7305 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 225.00	8/10/99	$50.00
Alex Hanson CLU, ChFC One Harding Road Portsmouth, NH 03801-5814 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 403.20	8/10/99	$84.00
Thomas M. Haweo CLU, ChFC 900 Rockhurst Drive Lincoln, NE 68510-4114 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 401.80	8/10/99	$82.00
Samuel H. Hazleton IV, CLU, ChFC 951 Albany Shaker Rd. Latham, NY 12110-1409 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Terry K. Headley LUTCF 20704 Meadow Ridge Dr. Springfield, NE 68059 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 576.00	8/10/99	$120.00

SUBTOTAL of Receipts This Page (optional)	$ 589.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Dennis L. Helgeson CLU, ChFC 2601 Bel Air Drive Minot, ND 58703-1749 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Edward J. Hendricks LUTCF 45 Margarita Court Reno, NV 89511-6616 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Ronald C. Hester CLU, ChFC Route 5 Box 23 Boone, NC 28607-9302 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 351.75	8/10/99	$85.00
Edward C. Hiers CLU, ChFC 75 South Hills Dr Bedford, NH 03110-4922 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 201.60	8/10/99	$42.00
Richard L. Hill CLU, ChFC 5431 Brandywine Circle Lincoln, NE 68516-5048 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 411.60	8/10/99	$84.00
Michael J. Hiller ChFC W. 267 S. 7930 Stony Pt. Ct. Mukwonago, WI 53149-9687 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Rubie A. Hord III 15 Tapoan Road Richmond, VA 23226-3218 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 500.00	8/2/99	$500.00

SUBTOTAL of Receipts This Page (optional) ..... $ 837.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Darrel V. Hovde P. O. Box 1806 Minot, ND 58702-1806 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Martha D. Hovis CLU, ChFC, LUT 3216 Stonesthrow Drive Newton, NC 28658-8710 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 275.00	8/30/99	$275.00
John P. Huntington CLU, ChFC 241 Howland Road East Greenwich, RI 02818-2638 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 210.00	8/10/99	$42.00
William V. Irons CLU, LUTCF 325 Newman Ave Rumford, RI 02916-1255 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 500.00	8/10/99	$100.00
Troy R. Jackson Jr., , CEBS 3512 Lubbock Drive Raleigh, NC 27612-5016 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 247.45	8/10/99	$17.00
Donald C. Jayne CLU, ChFC 20402 Tulsa Street Chatsworth, CA 91311-1723 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 225.00	8/10/99	$50.00
Russell D. Jenkins LUTCF P. O. Box 808 Emporia, KS 66801-0808 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 655.20	8/10/99	$84.00

SUBTOTAL of Receipts This Page (optional) ..... $ 610.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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National Association of Life Underwriters Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
E. Dunbar Jewell CLU, ChFC 1212 South Boulevard #102 Charlotte, NC 28203-4208 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 203.70	8/10/99	$42.00
Terry M. Kaltenbach CLU, ChFC 1358 Ahlrich Ave Encinitas, CA 92024-4029 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 450.00	8/10/99	$100.00
John B. Kearns LUTCF P. O. Box 1029 Scottsbluff, NE 69363-1029 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 205.80	8/10/99	$42.00
Michael L. Kerley 9424 Talisman Drive Vienna, VA 22182-3419 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 334.60	8/16/99 8/16/99	$23.08 $23.08
Randy R. Kilgore CLU, LUTCF, RH 375 Oakhurst Lane Colorado Springs, CO 80906-4399 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 500.00	8/2/99	$500.00
Casey C. Knake 2902 Mach I Dr. Norfolk, NE 68701-3238 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 247.80	8/10/99	$84.00
Richard A. Koob CLU, ChFC, AEP 301 Frederick Street Waukesha, WI 53186-8116 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 436.80	8/10/99	$84.00

SUBTOTAL of Receipts This Page (optional)	$ 898.15
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Michael J. Kraft CLU 1127 Union Street Alameda, CA 94501 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 382.50	8/10/99	$85.00
Ronald F. Kramer LUTCF P. O. Box 26 Pierce, NE 68767-0026 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 205.80	8/10/99	$42.00
James H. Krueger CLU,MSFS,MSM,C 6 Wagon Wheel Tr Appleton, WI 54915-9782 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Thomas R. Laster RHU 3030 NW Expressway #811 Oklahoma City, OK 73112 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Donald J. Levine CLU, ChFC, CFP 18 College View Way Belmont, CA 94002-2213 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 476.50	8/10/99	$17.00
Lawrence E. Lounds CLU, ChFC, LUT G-3526 Miller Rd. Ste-B Flint, MI 48507-1236 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
J. Peter Lyons CLU, ChFC, MSF 54 Cranmore Road Wellesley, MA 02181-1330 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 301.50	8/10/99	$67.00

SUBTOTAL of Receipts This Page (optional) ..... $ 379.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Gene L. Mahn CLU, ChFC 1635 La Granada Drive Thousand Oaks, CA 91362-2146 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 326.50	8/10/99	$17.00
Waylon T. Mangum LUTCF 9197 Fair Hill Place Mechanicsville, VA 23116 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 294.00	8/10/99	$84.00
Claude A. Marlowe Jr., LUTCF 1101 Radcliffe Avenue Kingsport, TN 37664-2025 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
Darren Scott Mason CLU, ChFC 178 Shorecliff Rd Corona Del Mar, CA 92625-2648 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 374.95	8/10/99	$83.33
Carl James Maus LUTCF 417 Monitor Way St. Charles, MO 63303 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 436.80	8/10/99	$84.00
Barry A. McBride 9249 North 102nd Street Scottsdale, AZ 85258-5706 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 218.40	8/10/99	$42.00
William K. McGreevy CLU, LUTCF 4705 South Lewis Avenue Sioux Falls, SD 57103-5413 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 500.00	8/27/99	$250.00

SUBTOTAL of Receipts This Page (optional) ..... $ 602.33

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Richard E. McKinnon 2632 W. Kennewick Kennewick, WA 99336-3123 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 378.00	8/10/99	$84.00
Robert F. McKown CLU, ChFC 17 White Rd Wayland, MA 01778-2416 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 382.50	8/10/99	$85.00
Dennis R. Merideth CLU, ChFC 5961 N. Camino Esquina Tucson, AZ 85718-4627 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 454.80	8/10/99	$84.00
David A. Middaugh CLU, AFP 3273 Evergreen Road Fargo, ND 58102-1214 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 624.00	8/10/99	$120.00
Harlan V. Miller CLU, ChFC 5839 Overhill Lane Dayton, OH 45429-6043 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 225.00	8/10/99	$50.00
Robert A. Miller 850 Third Ave., 15th Flr. New York, NY 10022-6222 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 336.00	8/10/99	$84.00
Robert A. Miller 850 Third Ave., 15th Flr. New York, NY 10022-6222 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 336.00	8/13/99	($42.00)

SUBTOTAL of Receipts This Page (optional)	$ 465.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James W. Monteverde CLU, ChFC, AEP Water Works Road Sewickley, PA 15143 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 450.00	8/10/99	$100.00
Raymond H. Moran CLU, ChFC 1072 Island Drive Memphis, TN 38103-5815 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 436.80	8/10/99	$84.00
Herbert F. Morgan 515 Vinnedge Ride Tallahassee, FL 32303-5141 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 411.60	8/10/99	$84.00
Robert M. Nelson CLU, LUTCF 14712 Shirley Street Omaha, NE 68144-2144 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 490.00	8/10/99	$100.00
Michael Louis Nichols LUTCF 505 Harris Avennue Panama City, FL 32401 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 340.30	8/10/99	$17.00
Michael Louis Nichols LUTCF 505 Harris Avennue Panama City, FL 32401 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 340.30	8/23/99	$7.00
Shirley A. Nielsen LUTCF 1524 COVENTRY LN #53 GRAND ISLAND, NE 68801-7009 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 205.80	8/10/99	$42.00

SUBTOTAL of Receipts This Page (optional)	$ 434.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Frank R. Nolimal CLU, ChFC, LUT 2017 Grafton Ave Henderson, NV 89014 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 260.00	8/10/99	$50.00
James F. O'Connell CLU 400 S. Jefferson #450 Spokane, WA 99204-3177 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 378.00	8/10/99	$84.00
James W. Oglesby LUTCF P. O. Box 7156 Asheville, NC 28802 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 540.20	8/10/99	$120.00
James B. Ollis P. O. Box 1209 Laurinburg, NC 28353-1209 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 203.70	8/10/99	$42.00
Rae Lee Olson 419 North Shoreline Blvd. Mountain View, CA 94043-4605 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 382.50	8/10/99	$85.00
Mitchell W. Ostrove CLU, ChFC 4 New King Street White Plains, NY 10604-1202 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 378.00	8/10/99	$84.00
Patricia Ann Owens 16130 Ventura Blvd. #400 Encino, CA 91436 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 215.00	8/6/99	$215.00

SUBTOTAL of Receipts This Page (optional)	$ 680.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Rick Patterson CLU, ChFC, LUT 204 Thistlewood Ct Longwood, FL 32779 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent Aggregate Year-to-Date $ 411.60	8/10/99	$84.00
Gary H. Pendleton CLU, ChFC 2908 Lake Boone Street, Suite 201 Raleigh, NC 27608 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent Aggregate Year-to-Date $ 404.14	8/10/99	$83.33
Dennis W. Pike Jr., CLU, ChFC 2112 Hunters Wood Ln. Lexington, KY 40502-3066 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent Aggregate Year-to-Date $ 218.40	8/10/99	$42.00
Patricia Pilone 5 Coopers Run Rd Cherry Hill, NJ 08003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent Aggregate Year-to-Date $ 250.00	8/9/99	$250.00
R. Jan Pinney CLU, ChFC, CPC 5152 Ellington Court Granite Bay, CA 95746-7188 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent Aggregate Year-to-Date $ 378.00	8/10/99	$84.00
Robert W. Powell CLU, LUTCF, LL 6 Timber Knoll Dr. Washington Cross, PA 18977-1000 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent Aggregate Year-to-Date $ 300.00	8/26/99	$300.00
Bradley W. Pratt CLU, LUTCF 121 E. Main #106, P O Box 3045 Mankato, MN 56002 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent Aggregate Year-to-Date $ 236.00	8/10/99	$42.00

SUBTOTAL of Receipts This Page (optional)	$ 885.33
TOTAL This Period (last page this line number only)	

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Contributions From Individuals (Itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Laurene B. Prevette LUTCF, RHU 741 Romany Road Charlotte, NC 28203-4849 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 231.50	8/10/99	$17.00
Laurene B. Prevette LUTCF, RHU 741 Romany Road Charlotte, NC 28203-4849 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 231.50	8/30/99	$149.05
John S. Pugh CLU, MSFS 6642 Oceanfront Virginia Beach, VA 23451-2052 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 225.00	8/10/99	$50.00
Richard L. Rowlings CLU, ChFC 6 Greenmeadow Lane Bedford, NH 03110 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 340.00	8/16/99	$60.00
Robert M. Roach CLU, ChFC 980 Ridge Crest Drive Gahanna, OH 43230 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 407.50	8/10/99	$85.00
Sherri A. Rush P.O. Box 10876 Napa, CA 94581-2876 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 250.00	8/23/99	$150.00
Zayton David Russell CLU, ChFC, LUT 2423 Carlisle Place Sarasota, FL 34231-7013 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 411.60	8/10/99	$84.00

SUBTOTAL of Receipts This Page (optional)	$ 595.05
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Daniel L. Rust LUTCF 114 W. Arnold Bozeman, MT 59715-6129 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 449.50	8/10/99	$35.00
Gregory B. Schaeffer LUTCF, FIC 2315 30th Ave. Kenosha, WI 53144 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 218.40	8/10/99	$42.00
Walter M. Schieffer Jr., LUTCF Rt 3, Box 43 Perry, OK 73077-9513 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 217.20	8/10/99	$42.00
James D. Schulz CLU, ChFC 6601 South 66th. St. Lincoln, NE 68516-3657 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 403.20	8/10/99	$84.00
Walter J. Scott Jr., CLU 1022 WASHINGTON AVE. OSHKOSH, WI 54901-5354 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 436.80	8/10/99	$84.00
Dale J. Seymour CLU, ChFC 1789 Indian Woods Circle, #200, The Metro Woods Building Maumee, OH 43537 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 430.00	8/10/99	$20.00
James P. Shaheen LUTCF 3939 Linden Ave Long Beach, FL 90807-2714 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 225.00	8/10/99	$50.00

SUBTOTAL of Receipts This Page (optional)	$ 357.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mark S. Shipp 6401 N. Sheridan Rd Peoria, IL 61614-2930 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 255.20	8/10/99	$50.00
James John Silbernagel LUTCF W 2329 Capital Drive Campbellsport, WI 53010-3010 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 218.40	8/10/99	$42.00
Ken Simons CLU, ChFC, LUT 808 West Fairground Artesia, NM 88210-2232 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 434.20	8/10/99	$83.50
Richard S. Simpson CLU, ChFC 1317 Sylvanca Ave. St. Helena, CA 94574 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 225.00	8/10/99	$50.00
Robert H. Sloan Jr., CLU, ChFC 5 Darl Ct. East Greenwich, RI 02818-1129 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 210.00	8/10/99	$42.00
Paul M. Smith Sr., CLU 433 Ward Parkway 3N Kansas City, MO 64122 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 442.00	8/10/99	$85.00
Russell A. Smith CLU, ChFC 30251 Channel Way Dr. Canyon Lake, CA 92587-7986 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 402.00	8/10/99	$100.00

SUBTOTAL of Receipts This Page (optional)	$ 452.50
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mark V. Snider CLU, ChFC 44 Elmwood Place Athens, OH 45701-1904 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 439.00	8/10/99	$42.00
Walter C. Sprye Jr., CLU, ChFC PO Box 8388 Rocky Mount, NC 27804-1388 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 203.70	8/10/99	$42.00
Billy J. Stanfill CLU 19827 A Henderson Rd Cornelius, NC 28031 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 573.20	8/10/99	$120.00
Billy J. Stanfill CLU 19827 A Henderson Rd Cornelius, NC 28031 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 573.20	8/30/99	$22.00
John P. Steele LUTCF P. O. Box 369 Manhattan, MT 59741-0369 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 242.50	8/10/99	$25.00
David L. Stratton CLU, ChFC 13115 Beach Circle Anchorage, AK 99515-3748 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 700.00	8/10/99	$150.00
Mark Phelan Sudderberg 1751 Clinton St. Rockford, IL 61103 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 218.40	8/10/99	$42.00

SUBTOTAL of Receipts This Page (optional)	$ 443.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Donald R. Svoboda CLU, ChFC 5930 S 58th St #Z Lincoln, NE 68516-3653 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 245.00	8/10/99	$50.00
John Michael Taylor CLU, ChFC 911 Rugate Rd. Columbus, GA 31904 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 378.00	8/10/99	$84.00
Robert L. Tedoldi CLU, ChFC, CFP 9 Pond View Road Bolton, CT 06043-7558 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 378.00	8/10/99	$84.00
Gregory M. Telge CLU, ChFC 118 Madeline Road Manchester, NH 03104 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 201.60	8/10/99	$42.00
Brad Tison CLU, ChFC, CFP 2706 Emma Ave Des Moines, IA 50321-2876 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 436.80	8/10/99	$84.00
Jack B. Turner CLU, ChFC 310 Fairway Drive Clarksville, TN 37043-4729 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 600.00	8/6/99	$600.00
Lynda D. Turner LUTCF 1070 South Bosque Loop Bosque Farms, NM 87068-9063 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 218.40	8/10/99	$42.00

SUBTOTAL of Receipts This Page (optional)	$ 986.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 25 OF 26

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
David R. Tuzson 1226 Peacock Drive Scottsbluff, NE 69361 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 201.60	8/10/99	$42.00
Howard Raymond Utz LUTCF PO Box 480 Mars, PA 16046 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 275.00	8/10/99	$85.00
Robert D. Vieluf LUTCF 403 Crestwood Estates Collinsville, IL 62234-2324 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 218.40	8/10/99	$42.00
David R. Watson CLU, ChFC, AEP 7 Elm Drive Medford, NJ 08055-8840 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 336.00	8/10/99	$42.00
R. Ray Westfall CLU 1325 4th Avenue #1425 Seattle, WA 98101-2509 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 250.00	8/26/99	$250.00
Lester E. Westgard 2714 26th Ave SW Fargo, ND 58103-5006 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 260.00	8/10/99	$50.00
Susan Wier CFP, LUTCF, Ch 8023 South Zikes Rd Bloomington, IN 47401-9178 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Insurance Agent $ 225.00	8/10/99	$50.00

SUBTOTAL of Receipts This Page (optional) ..... $ 561.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 26 OF 26

FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Leroy L. Wilbers Jr., CLU, LUTCF 211 Marshall St. Jefferson City, MO 65101-3226 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 234.00	8/10/99	$45.00
Harold L. Wilshinsky CLU, ChFC 120 North Abington Rd. Clarks Summit, PA 18411-2541 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 500.00	8/12/99	$500.00
Larry J. Winkelhake CLU, ChFC P. O. Bx 26909 Milwaukee, WI 53226-0909 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 231.20	8/10/99	$50.00
Ronald I. Woodmansee CLU, ChFC 25 Picadilly Circle Marlton, NJ 08053-4235 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 225.00	8/10/99	$50.00
Theodore J. Zouzounis CLU 3332 Las Huertas Rd. Lafayette, CA 94549-5109 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self-employed Occupation: Insurance Agent Aggregate Year-to-Date: $ 315.00	8/10/99	$70.00

SUBTOTAL of Receipts This Page (optional)	$ 715.00
TOTAL This Period (last page this line number only)	$ 16,175.69

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21b ii

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

NAME OF COMMITTEE (in Full)

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union National Bank of Washington DC	Bank Charges Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	8/31/99	806.01
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
National Association of Life Underwriters 1922 F Street, NW Washington, DC 20006	Personnel & admin expenses Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	8/31/99	17,093.20
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	17,899.21

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SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE E OF 2

FOR LINE NUMBER 23

Contributions to Federal Candidates/Committees

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

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Bryant for Congress PO Box 1961 Cordova, TN 38088	Contribution: Edward G. Bryant (TN-7-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	8/4/99	$1,000.00
Dan Burton for Congress Box 50593 Indianapolis, IN 46250	Contribution: Dan Burton (IN-6-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	8/3/99	$1,000.00
Friends of Mark Foley P.O. Box 30505 Palm Beach Gardens, FL 33420	Contribution: Mark A. Foley (FL-16-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	8/4/99	$1,500.00
Gallegly For Congress Box 940001 Simi Valley, CA 93094	Contribution: Elton Gallegly (CA-23-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	8/11/99	$1,000.00
Citizens for Gillmor PO Box 910 Port Clinton, OH 43452	Contribution: Paul E. Gillmor (OH-5-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	8/4/99	$1,000.00
Hulshof for Congress PO Box 1621 Columbia, MO 65205	Contribution: Kenny Hulshof (MO-9-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	8/2/99	$1,000.00
LaTourette for Congress Committee 7200 Center Street Suite 102 Mentor, OH 44060	Contribution: Steve C. LaTourette (OH-19-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	8/3/99	$500.00
R.O.Y.B. PAC PO Box 5412 Alexandria, VA 22205	Contribution: R.O.Y.B. PAC (PAC to PAC contribution) Disbursement For: [ ] Primary [ ] General [X] Other: Annual 1999	8/10/99	$1,000.00
Lots of People for Jim Saxton P O Box 795 Mt. Holly, NJ 08060	Contribution: James H. Saxton (NJ-3-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2000	8/13/99	$1,000.00

SUBTOTAL of Disbursements This Page (optional) $9,000.00

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Contributions to Federal Candidates/Committees

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

PAGE 2 OF 2

FOR LINE NUMBER 23

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

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Heather Wilson for Congress 5400 San Mateo NE Suite G Albuquerque, NM 87109	Contribution: Heather Wilson (NM-1-R) Disbursement For: [X] Primary [ ] General [ ] Other: 2010	8/24/99	$1,000.00

SUBTOTAL of Disbursements This Page (optional)	$1,000.00
TOTAL This Period (last page this line number only)	$10,000.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 28(a)

Refunds of Contributions To Individuals

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

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Thomas J. Stroyne Allmerica Financial 2 Gateway Center #2000 Pittsburgh, PA 15222-1402	Refund to Individual Disbursement For: ☐ Primary ☐ General ☒ Other: Other 1999	8/4/99	$200.00

SUBTOTAL of Disbursements This Page (optional)	$200.00
TOTAL This Period (last page this line number only)	$200.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (in Full): National Association of Life Underwriters Political Action Committee	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor: National Association of Life Underwriters, 1922 F Street, NW, Washington, DC 20006	28,935.38	14,563.55	17,093.20	26,405.73
Nature of Debt (Purpose): Personnel & admin expenses				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page in this line only)	26,405.73
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	26,405.73

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 9-20-95
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

JMD
PREPARER

9-24-95
DATE PREPARED

(4/98)