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## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Amalgamated Life Insurance Company Political Action Committee 730 Broadway ADDRESS (number and street) Check if different than previously New York NY 10003 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00369827 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2007 06 30 2007 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. Victoria R. Sartor Type or Print Name of Treasurer Electronically Filed by Victoria R. Sartor 07 30 2007 Signature of Treasurer 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. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

## SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name Amalgamated Life Insurance Company Political Action Committee <sup>®</sup> D " D 0 1 0 1 2007 0.6 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand <sup>°</sup>2007 48905.16 January 1 (b) Cash on Hand at 48905.16 Begining of Reporting Period ..... 6508.15 6508.15 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 55413.31 55413.31 6(a) and 6(c) for Column B) ..... 5000.00 5000.00 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 50413.31 50413.31 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

Amalgamated Life Insurance Company Political Action Committee

0 1 3<sup>D</sup>0 м N 0 1 м м 0 6 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 2450.00 2450.00 (i) Itemized (use Schedule A) .......... 3962.00 3962.00 (ii) Unitemized ..... (iii) TOTAL (add 6412.00 6412.00 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 6412.00 6412.00 Totals to Line 33, page 5) ...... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 96.15 96.15 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 6508.15 6508.15 12, 13, 14, 15, 16, 17, and 18(c)) .....

6508.15

6508.15

### **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) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party		
2	Committees	0.00	0.00
	Federal Candidates/Committees	5000.00	5000.00
	and Other Political Committees Independent Expenditure	3000.00	3000.00
	(use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00
	(use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	• •		
	Loans MadeRefunds of Contributions To:	0.00	0.00
о.	(a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(100 = 100 = 0 (0), (0), (100 (0))		
9.	Other Disbursements	0.00	0.00
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
1.	Total Disbursements (add Lines 21(c), 22,		
•	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5000.00	5000.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	5000.00	5000.00
	from Line 31)	5000.00	5000.00

## **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)	6412.00	6412.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6412.00	6412.00
66. 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

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 33 (check only one)  X 11a 11b 11c 12
An	y information copied from such Reports and Sta	tements may	, -	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) Amalgamated Life Insurance Company	Political Ad	ction Committee	
۹.	Full Name (Last, First, Middle Initial) Kevin Cleary Mailing Address 3111 Timothy Road			Date of Receipt
	- <u></u>			05 23 2007
	City Bellmore	State NY	Zip Code 11710	Transaction ID: SA11A1.8545
	FEC ID number of contributing federal political committee.	C	11710	Amount of Each Receipt this Period  20.00
	Name of Employer Amalgamated Life Insurance Company Receipt For:	Occupation AVP Aggregate	n e Year-to-Date ▼	
	Primary General Other (specify) ▼	33 13	220.00	
3.	Full Name (Last, First, Middle Initial) Kevin Cleary			Date of Receipt
	Mailing Address 3111 Timothy Road			06 / 06 / 2007
	City	State	Zip Code	Transaction ID: SA11A1.8592
	Bellmore FEC ID number of contributing federal political committee.	C	11710	Amount of Each Receipt this Period  20.00
	Name of Employer Amalgamated Life Insurance Company	Occupation AVP		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		240.00	
Э.	Full Name (Last, First, Middle Initial) Kevin Cleary			Date of Receipt
	Mailing Address 3111 Timothy Road			06 / 20 / Y Y Y Y Y Y Y
	City Bellmore	State NY	Zip Code 11710	Transaction ID: SA11A1.8616
	FEC ID number of contributing	C	11710	Amount of Each Receipt this Period  20.00
	federal political committee.			
	Name of Employer Amalgamated Life Insurance Company	Occupation AVP		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
S	UBTOTAL of Receipts This Page (optional)			60.00
T	OTAL This Period (last page this line number or	nly)	<b>)</b>	

SCHEDULE A (FEC Form 3X)		ſ	Hoo concrete as head (s)	FOR LINE NUMBER: PAGE 7/33		
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)		
		Detailed Summary Page		X 11a 11b 11c 12		
۸r	ny information copied from such Reports and State	omonte may	not be cold or used by any perso	13 14 15 16 17		
or	for commercial purposes, other than using the na	me and add	ress of any political committee to	solicit contributions from such committee.		
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)					
$\rangle$	Amalgamated Life Insurance Company F	Political Ac	tion Committee			
۹.	Full Name (Last, First, Middle Initial) Martin R. Cohen			Date of Receipt		
	Mailing Address 63 Jefferson Avenue			03 / 28 / 2007		
	City	State	Zip Code	Transaction ID: SA11A1.8447		
	Islip Terrace	NY	11752	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		30.00		
	Name of Employer Amalgamated Life Insurance Company Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Actu Aggregate				
3.	Full Name (Last, First, Middle Initial) Martin R. Cohen			Date of Receipt		
	Mailing Address 63 Jefferson Avenue			0 4 1 1 2 0 0 7		
	City	State	Zip Code	Transaction ID: SA11A1.8498		
	Islip Terrace	NY	11752	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		30.00		
	Name of Employer Amalgamated Life Insurance	Occupation		7		
	Company	Chief Actu	•			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00			
).	Full Name (Last, First, Middle Initial) Martin R. Cohen			Date of Receipt		
	Mailing Address 63 Jefferson Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.8499		
	Islip Terrace	NY	11752	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		30.00		
	Name of Employer Amalgamated Life Insurance Company Receipt For:  Primary General Other (specify) ▼	Occupation Chief Actu Aggregate				
s	UBTOTAL of Receipts This Page (optional)			90.00		
_						

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X)			Llac concrete cohodulo(a)	FOR LINE NUMBER: PAGE 8 / 33	
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)	
II LIMIZED ILCEIF 13		Detailed Summary Page		X 11a 11b 11c 12	
				13 14 15 16 17	
or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and ado	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.	
$\setminus$	NAME OF COMMITTEE (In Full)				
	Amalgamated Life Insurance Company	Political Ad	ction Committee		
A.	Full Name (Last, First, Middle Initial) Martin R. Cohen			Date of Receipt	
	Mailing Address 63 Jefferson Avenue			05 09 2007	
	City	State	Zip Code	Transaction ID: SA11A1.8546	
	Islip Terrace	NY	11752	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		30.00	
	Name of Employer Amalgamated Life Insurance	Occupation Chief Act			
	Company Receipt For:		Year-to-Date ▼		
	Primary General	1 1	300.00	7	
	Other (specify)	0 0	300.00		
В.	Full Name (Last, First, Middle Initial) Martin R. Cohen			Date of Receipt	
	Mailing Address 63 Jefferson Avenue			05 23 7 2007	
	City	State	Zip Code	Transaction ID: SA11A1.8547	
	Islip Terrace	NY	11752	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		30.00	
	Name of Employer Amalgamated Life Insurance	Occupation			
	Company	Chief Act			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_	
	Other (specify)		330.00		
<u> </u>	Full Name (Last, First, Middle Initial) Martin R. Cohen			Date of Receipt	
	Mailing Address 63 Jefferson Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.8593	
	Islip Terrace	NY	11752	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		30.00	
	Name of Employer Amalgamated Life Insurance Company Receipt For:  Primary  General  Occupat Chief A Aggrega				
			Year-to-Date ▼		
				7	
	Other (specify) ▼	0 0	360.00		
s	UBTOTAL of Receipts This Page (optional)			90.00	
T	OTAL This Period (last page this line number of	only)			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9/33	
ITEMIZED RECEIPTS		or each category of the	(check only one)	
••	EMIZED RECEIL TO		Detailed Summary Page	X   11a     11b     11c     12     15     16     17
Ar	ny information copied from such Reports and Sta	atements may	not be sold or used by any perso	
or	for commercial purposes, other than using the n	name and add	dress of any political committee to	solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Amalgamated Life Insurance Company	Political Ad	ction Committee	
_	Full Name (Last, First, Middle Initial)			5. (5. ).
Α.	Martin R. Cohen  Mailing Address 63 Jefferson Avenue			Date of Receipt
	Walling Address 63 Jenerson Avenue			06 20 2007
	City	State	Zip Code	Transaction ID: SA11A1.8617
	Islip Terrace	NY	11752	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer	Occupation	n	7
	Amalgamated Life Insurance Company	Chief Act	<u> </u>	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	390.00	
	Carlor (opediny) 🔻	0 0	1 1 1 1 1 1 1	
В.	Full Name (Last, First, Middle Initial) Patrick J. Coughlan			Date of Receipt
	Mailing Address 5933 Palmetto Street			05 23 2007
	City	State	Zip Code	Transaction ID: SA11A1.8549
	<u>Philadelphia</u>	PA	19120	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer	Occupation	n	7
	Receipt For:	VP	Voor to Data	_
	Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼		220.00	
_	Full Name (Last, First, Middle Initial)			
C.	Patrick J. Coughlan  Mailing Address 5933 Palmetto Street			Date of Receipt
	Mailing Address 5933 Palmetto Street			06 06 2007
	City	State	Zip Code	Transaction ID: SA11A1.8594
	Philadelphia	PA	19120	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer	Occupation VP	1	
		Aggregate	e Year-to-Date ▼	
	Primary General	, , , ,	240.00	1
	Other (specify) ▼	0 0		1
	LIDTOTAL of Descripts This Descripts 1			70.00
	UBTOTAL of Receipts This Page (optional)		······	
Т	OTAL This Period (last page this line number or	nly)		

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 10 / 33
•			Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	iress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\angle$	Amalgamated Life Insurance Company	Political Ad	ction Committee	
Α.	Full Name (Last, First, Middle Initial) Patrick J. Coughlan			Date of Receipt
	Mailing Address 5933 Palmetto Street			0 6 2 0 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11A1.8618
	Philadelphia	PA	19120	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		20.00
	Name of Employer	Occupation VP	1	
	Receipt For:	1	Year-to-Date ▼	
	Primary General	33 15		1
	Other (specify) ▼	1	260.00	
В.	Full Name (Last, First, Middle Initial) Thomas D. Delaney			Date of Receipt
	Mailing Address 314 Foster Avenue			M M / D D / Y Y Y Y
				05 23 2007
	City	State	Zip Code	Transaction ID: SA11A1.8551
	Sayville	NY	11782	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	rederal political committee.			
	Name of Employer Amalgamated Life Insurance	Occupation		
	Co.	+ -	es & Mktg	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	, ,	220.00	
	Other (specify) ▼	0 0	0 0 0 0 0 0 0	
<u> </u>	Full Name (Last, First, Middle Initial) Thomas D. Delaney			Date of Receipt
<b>J</b> .	Mailing Address 314 Foster Avenue			M M / D D / Y Y Y Y
				06 06 2007
	City	State	Zip Code	Transaction ID: SA11A1.8595
	Sayville	NY	11782	Amount of Each Receipt this Period
	FEC ID number of contributing	C		20.00
	federal political committee.			
	Name of Employer Amalgamated Life Insurance	Occupation		
	Co. Receipt For:		es & Mktg Year-to-Date ▼	
	Primary General	Aggregate	TOUT TO DUIC ¥	1
	Other (specify)		240.00	
				1
6	UBTOTAL of Receipts This Page (optional)			60.00
$\vdash$	22.2.7.2 of Hosoipia Tillo Fago (optional)			

# SCHEDULE A (FEC Form 3X)

2	CHEDULE A (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 11/33
			Use separate schedule(s)	(check only		
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a	11b	11c
			Detailed Summary Page	13		15 16 17
Δn	y information copied from such Reports and Statemer	nts mav	not be sold or used by any perso			
or	for commercial purposes, other than using the name a	and add	ress of any political committee to	solicit contrib	utions from	such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)					
\	Amalgamated Life Insurance Company Politi	ical Ac	tion Committee			
/	7 maigamatod Ene modrance Company i ont	1041 710				
	Full Name (Last, First, Middle Initial)					
٩.	Thomas D. Delaney			Date of	Receipt	
	Mailing Address 314 Foster Avenue			ММ		
				0 6	2 0	2007
	City	ate	Zip Code	Transac	tion ID: SA	A11A1.8619
	Sayville N'	Υ	11782	Amount	of Each Re	ceipt this Period
	FEC ID number of contributing	1 '	1 1 1 1 1	'	1 1 1	20.00
	federal political committee.					20.00
	N (5 )			4		
	Amalaamatod Life Incurance	cupation				
	00.		es & Mktg			
		gregate	Year-to-Date ▼			
	Primary General		260.00			
	Other (specify) ▼					
	E. III N. I. a. a. (L. a. I. E' a. I. Affalalla Lattal)					
3	Full Name (Last, First, Middle Initial) Michael Hirsch			Date of	Receint	
•	Mailing Address 91 Bradford Lane			M M	/ D D	/ <b>Y                                   </b>
	Maining Address 91 Bradioid Laile			03	14	2007
	City St	ate	Zip Code	Transac	tion ID: SA	A11A1.8452
	Plainsboro N	J	08536			ceipt this Period
	FFC ID as well as of a satisfaction			7 11100110	Or Eddir Ho	· · · · · ·
	FEC ID number of contributing federal political committee.					40.00
	Amalgamated Life Incurance	cupation				
	Company	ec. VP-	-B			
	Receipt For: Agg	gregate	Year-to-Date ▼			
	Primary General		240.00			
	Other (specify) ▼		240.00			
•	Full Name (Last, First, Middle Initial)			Data of	Danaint	
٠.	Michael Hirsch			Date of		
	Mailing Address 91 Bradford Lane			03	28	2007
	City St	ate	Zip Code			\11A1.8453
	Plainsboro No.		08536			ceipt this Period
			00000	Amount	OI Eacil ne	ceipi inis Feriod
	FEC ID number of contributing federal political committee.					40.00
	rederal political committee.					
	Name of Employer Occ	cupation	1			
	Amalgamated Life Insurance Company  Exe	ec. VP-	-B			
		gregate	Year-to-Date ▼			
	Primary General					
	Other (specify)		280.00			
						400.00
SI	JBTOTAL of Receipts This Page (optional)		<b>)</b>			100.00
T	OTAL This Period (last page this line number only)		<b>)</b>			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 12/33
ıT	EMIZED RECEIPTS		or each category of the	(check only one)
II EIVIIZED NECEIP I 3			Detailed Summary Page	X 11a   11b   11c   12
				13 14 15 16 17
Ar	y information copied from such Reports and Statem for commercial purposes, other than using the name	nents may	not be sold or used by any person	on for the purpose of soliciting contributions
V	NAME OF COMMITTEE (In Full)	e and add	ress or any political committee to	Solicit contributions from Such committee.
	Amalgamated Life Insurance Company Po	litical Ac	tion Committee	
$\angle$	Amalgamated Life insurance Company Fo	milicai Ac	alon Committee	
Α.	Full Name (Last, First, Middle Initial) Michael Hirsch			Date of Receipt
Α.	Mailing Address 91 Bradford Lane			<u> </u>
	Walling Address 91 Bradiord Larie			04 11 2007
	City	State	Zip Code	Transaction ID: SA11A1.8504
	Plainsboro	NJ	08536	Amount of Each Receipt this Period
	FEC ID number of contributing	-		
	federal political committee.	C		40.00
	Amalgamated Life Incurance	Occupation		
	Company	xec. VP		
		Aggregate	Year-to-Date ▼	
	Primary General		320.00	
	Other (specify) ▼	0 0	020.00	
— В	Full Name (Last, First, Middle Initial) Michael Hirsch			Date of Receipt
	Mailing Address 91 Bradford Lane			M M / D D / Y Y Y Y
				04 25 2007
	•	State	Zip Code	Transaction ID: SA11A1.8505
	Plainsboro	NJ	08536	Amount of Each Receipt this Period
	FEC ID number of contributing			40.00
	federal political committee.	С		70.00
	Name of Employer Amalgamated Life Insurance	Occupation	l	
	Company	xec. VP	-B	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		360.00	1
	Other (specify) ▼		300.00	
_	Full Name (Last, First, Middle Initial)			
C.	Michael Hirsch			Date of Receipt
	Mailing Address 91 Bradford Lane			05 09 2007
	City	State	Zip Code	Transaction ID: SA11A1.8552
	Plainsboro	NJ	08536	Amount of Each Receipt this Period
	FEC ID number of contributing	0		40.00
	federal political committee.	С		40.00
	Amalgamated Life Incurance	Occupation		
	Company	xec. VP		
		Aggregate	Year-to-Date ▼	
	Primary General	1 1	400.00	11
	Other (specify) ▼	0 0	400.00	
_				
s	UBTOTAL of Receipts This Page (optional)			120.00
$\vdash$				-

SCHEDULE A (FEC Form 3X)		Llas seperate sebadula(s)	FOR LINE NUMBER: PAGE 13/33			
ITEMIZED RECEIPTS		or each category of the	(check only one)			
••	LIMIZED RECEIL 19		Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17		
Δr	ny information copied from such Reports and State	ments may	y not be sold or used by any nerso			
or	for commercial purposes, other than using the nar	me and add	dress of any political committee to	solicit contributions from such committee.		
$\setminus$	NAME OF COMMITTEE (In Full)					
	Amalgamated Life Insurance Company P	olitical A	ction Committee			
^	Full Name (Last, First, Middle Initial)			Data of Daggint		
Α.	Michael Hirsch  Mailing Address 91 Bradford Lane			Date of Receipt		
	Thaining Address 91 Bradioid Lane			05 23 2007		
	City	State	Zip Code	Transaction ID: SA11A1.8553		
	Plainsboro	NJ	08536	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		40.00		
	Amalgamated Life Insurance	Occupation Exec. VP				
	Company Receipt For:		Year-to-Date ▼	-		
	Primary General	00 0		1		
	Other (specify) ▼		440.00			
В.	Full Name (Last, First, Middle Initial) Michael Hirsch			Date of Receipt		
	Mailing Address 91 Bradford Lane			06 06 2007		
	City	State	Zip Code	Transaction ID: SA11A1.8596		
	Plainsboro	NJ	08536	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		40.00		
	Amalaamata'd Lifa Inguranga	Occupation Exec. VP		7		
	Company Receipt For:		- P Year-to-Date ▼	-		
	Primary General	riggrogato	Total to Bate V	1		
	Other (specify) ▼		480.00			
<u>с.</u>	Full Name (Last, First, Middle Initial) Michael Hirsch			Date of Receipt		
	Mailing Address 91 Bradford Lane			M M / D D / Y Y Y Y		
				06 20 2007		
	City Plainsboro	State	Zip Code	Transaction ID: SA11A1.8620		
		NJ	08536	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		40.00		
	Amalgamated Life Incurance	Occupation				
Company Exec. v			-B e Year-to-Date ▼	_		
	Receipt For: Primary General	Aggregate	rtear-to-Date V			
	Other (specify) ▼		520.00			
<u>ر</u>	UBTOTAL of Receipts This Page (optional)			120.00		
$\vdash$				-		
Т	TOTAL This Period (last page this line number only)					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 33 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Ar or	y information copied from such Reports and Statements more for commercial purposes, other than using the name and a	ay not be sold or used by any persoddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Amalgamated Life Insurance Company Political A	Action Committee	
А.	Company	Zip Code 11577  on Vice President te Year-to-Date ▼  240.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: SA11A1.8454  Amount of Each Receipt this Period  40.00
	Mailing Address 42 Center Court  City State Roslyn Heights NY  FEC ID number of contributing federal political committee.  Name of Employer Amalgamated Life Insurance Company Senior Se	Zip Code 11577  on Vice President te Year-to-Date ▼ 280.00	Transaction ID: SA11A1.8455  Amount of Each Receipt this Period  40.00
<b>-</b> .	Company	Zip Code 11577  on Vice President te Year-to-Date ▼  320.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y  Transaction ID: SA11A1.8506  Amount of Each Receipt this Period  40.00
s	UBTOTAL of Receipts This Page (optional)	<b>)</b>	120.00
т	OTAL This Period (last page this line number only)		

SC	HEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/33
	MIZED RECEIPTS		or each category of the	(check only one)  X 11a  11b  11c  12
	<del></del>		Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Any or fo	information copied from such Reports and Stater r commercial purposes, other than using the name	ments may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
\ N	IAME OF COMMITTEE (In Full)			
<i>&gt;</i>	Amalgamated Life Insurance Company Po	olitical Ac	ction Committee	_
<b>4.</b> <u>J</u>	ull Name (Last, First, Middle Initial) eanne Jarvis-Meara			Date of Receipt
_	Mailing Address 42 Center Court			04 / 25 / Y Y Y Y
	ity Roslyn Heights	State NY	Zip Code 11577	Transaction ID: SA11A1.8507
F	EC ID number of contributing ederal political committee.	C	11377	Amount of Each Receipt this Period 40.00
<u>C</u>	malgamated Life Insurance Company		ce President	
H	eceipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	
<b>3.</b> <u>J</u>	ull Name (Last, First, Middle Initial) eanne Jarvis-Meara			Date of Receipt
_	Mailing Address 42 Center Court			05 / 09 / 2007
	ity	State	Zip Code	Transaction ID: SA11A1.8554
	Roslyn Heights	NY	11577	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		40.00
N A	malgamated Life Incurance	Occupation	n ce President	
	ompany		Year-to-Date ▼	$\dashv$
	Primary General Other (specify) ▼	33 13	400.00	
_	ull Name (Last, First, Middle Initial) eanne Jarvis-Meara			Date of Receipt
N	failing Address 42 Center Court			05 23 7 2007
	ity	State	Zip Code	Transaction ID: SA11A1.8555
	Roslyn Heights	NY	11577	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		40.00
N A	malgamated Life Incurance	Occupation		
	Ompany		ce President Year-to-Date ▼	
	Primary General Other (specify) ▼	, iggregate	440.00	
SUE	BTOTAL of Receipts This Page (optional)			120.00
TO	ΓΔΙ This Period (last nage this line number only	)	•	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: (check only one)	PAGE 16/33
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 1	11c 12 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	on for the purpose of solic solicit contributions from	iting contributions such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Amalgamated Life Insurance Company F	Political Ad	ction Committee		
Α.	Full Name (Last, First, Middle Initial) Jeanne Jarvis-Meara Mailing Address 42 Center Court  City Roslyn Heights  FEC ID number of contributing	State NY	Zip Code 11577	Date of Receipt  M M M / D D D 0 6  Transaction ID: S  Amount of Each Re	2 0 0 7 A11A1.8597
	Rame of Employer Amalgamated Life Insurance Company Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Vi	n ce President e Year-to-Date ▼ 480.00		
3.	Full Name (Last, First, Middle Initial) Jeanne Jarvis-Meara Mailing Address 42 Center Court	Stata	Zip Code	Date of Receipt  M M / D D 2 0	2007
	City Roslyn Heights	State NY	21p Code 11577	Transaction ID: S  Amount of Each Re	
	FEC ID number of contributing federal political committee.	C			40.00
	Name of Employer Amalgamated Life Insurance Company Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		ce President  Year-to-Date ▼  520.00		
 C.	Full Name (Last, First, Middle Initial) Arthur M. Kurek			Date of Receipt	
	Mailing Address 10 Claremont Avenue			0 3 1 4	
	City Bloomfield	State NJ	Zip Code 07003	Transaction ID: S  Amount of Each Re	
	FEC ID number of contributing federal political committee.	C	0.000	Amount of Each 16	40.00
	Name of Employer Amalgamated Life Insurance Company Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		ce President  Year-to-Date ▼  240.00		
s	UBTOTAL of Receipts This Page (optional)				120.00
T	OTAL This Period (last page this line number on	ly)	<b>)</b>		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/33	
	EMIZED RECEIPTS		or each category of the	(check only one)	
-			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17	,
Ar	ny information copied from such Reports and Sta	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions	٦
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.	_
$\setminus$	NAME OF COMMITTEE (In Full)	Dalitiaal A	ation Committee		
/	Amalgamated Life Insurance Company	Political A	ction Committee		
	Full Name (Last, First, Middle Initial)			Date of Descript	_
٦.	Arthur M. Kurek  Mailing Address 10 Claremont Avenue			Date of Receipt	
				03 28 2007	
	City	State	Zip Code	Transaction ID: SA11A1.8459	
	Bloomfield	NJ	07003	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		40.00	
	Name of Employer Amalgamated Life Insurance	Occupation	n ce President		
	Company Receipt For:		Year-to-Date ▼	-	
	Primary General	33 -3		1	
	Other (specify)	0 0	280.00		
3.	Full Name (Last, First, Middle Initial) Arthur M. Kurek			Date of Receipt	
	Mailing Address 10 Claremont Avenue	0 4			
	City	State	Zip Code	Transaction ID: SA11A1.8510	
	Bloomfield	NJ	07003	Amount of Each Receipt this Period	Τ
	FEC ID number of contributing federal political committee.	C		40.00	
	Name of Employer Amalgamated Life Insurance	Occupation			
	Company Receipt For:		ce President Year-to-Date ▼	_	
	Primary General	Aggregate	: Teal-10-Date V		
	Other (specify) ▼	0 0	320.00		
Э.	Full Name (Last, First, Middle Initial) Arthur M. Kurek			Date of Receipt	
	Mailing Address 10 Claremont Avenue			0 4 2 5 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11A1.8511	
	Bloomfield	NJ	07003	Amount of Each Receipt this Period	_
	FEC ID number of contributing federal political committee.	С		40.00	
	Name of Employer Amalgamated Life Insurance	Occupation		7	
	Company	l	ce President		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		360.00		
s	UBTOTAL of Receipts This Page (optional)			120.00	_
			•		
T	OTAL This Period (last page this line number or	nly)			

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 33 (check only one)	_
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11	7
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Amalgamated Life Insurance Company	Political A	ction Committee		
۹.	Full Name (Last, First, Middle Initial) Arthur M. Kurek  Mailing Address 10 Claremont Avenue			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.8558	
	Bloomfield  FEC ID number of contributing federal political committee.	NJ C	07003	Amount of Each Receipt this Period 40.00	
	Name of Employer Amalgamated Life Insurance Company Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	1	ce President  Year-to-Date   400.00		
3.	Full Name (Last, First, Middle Initial) Arthur M. Kurek Mailing Address 10 Claremont Avenue			Date of Receipt	
	City	State	Zip Code	05 23 2007 2007	
	Bloomfield	NJ	07003	Transaction ID: SA11A1.8559  Amount of Each Receipt this Period	_
	FEC ID number of contributing federal political committee.	C	07000	40.00	
	Name of Employer Amalgamated Life Insurance Company Receipt For: Primary General Other (specify)		n ce President e Year-to-Date ▼		
_	Full Name (Last, First, Middle Initial)	0 0		Date of Descipt	
٠.	Arthur M. Kurek  Mailing Address 10 Claremont Avenue			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.8599	
	Bloomfield  FEC ID number of contributing federal political committee.	NJ C	07003	Amount of Each Receipt this Period 40.00	
	Name of Employer Amalgamated Life Insurance Company Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	·	ce President  e Year-to-Date ▼  480.00		
S	UBTOTAL of Receipts This Page (optional)			120.00	
T	OTAL This Period (last page this line number or	nly)	<b>)</b>		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 33 (check only one)  X 11a 11b 11c 12
Ar	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee
$\sum_{i=1}^{\infty}$	NAME OF COMMITTEE (In Full) Amalgamated Life Insurance Company F		• •	
۹.	Full Name (Last, First, Middle Initial) Arthur M. Kurek			Date of Receipt
	Mailing Address 10 Claremont Avenue			06 20 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.8623
	Bloomfield	NJ	07003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer Amalgamated Life Insurance Company	Occupation Senior Vi	n ce President	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		520.00	
_	Full Name (Last, First, Middle Initial) Claire Levitt-Davis			Date of Receipt
٥.	Mailing Address 84 Boulder Ridge Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.8561
	Scarsdale	NY	10583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer Amalgamated Life Insurance	Occupation		7
	Company Receipt For:	President	-AMM Year-to-Date ▼	_
	Primary General Other (specify) ▼	- Iggi Ogalo	220.00	
<b>)</b> .	Full Name (Last, First, Middle Initial) Claire Levitt-Davis			Date of Receipt
Mailing Address 84 Boulder Ridge Road				06 06 2007
	City	State	Zip Code	Transaction ID: SA11A1.8600
	Scarsdale FEO ID and the street of the stree	NY	10583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer Amalgamated Life Insurance Company	Occupation President	-AMM	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		240.00	
s	UBTOTAL of Receipts This Page (optional)			80.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NU		PAGE 20/33
ITEMIZED RECEIPTS			or each category of the	(check only on	· —	44. 🗆 40
			Detailed Summary Page	X 11a	11b	11c   12 15   16   17
An	ly information copied from such Reports and Stater for commercial purposes, other than using the nan	ments may	not be sold or used by any perso			
or		ne and add	lress of any political committee to	solicit contributio	ons from si	uch committee.
/	NAME OF COMMITTEE (In Full)		0			
/	Amalgamated Life Insurance Company Po	olitical Ac	ction Committee			
Δ	Full Name (Last, First, Middle Initial) Claire Levitt-Davis			Date of Re	ceint	
٠.	Mailing Address 84 Boulder Ridge Road			M M /	D D	/ Y Y Y Y
				0 6	20	2007
	City	State	Zip Code			11A1.8624
	Scarsdale F50 ID and the state of a satisfaction	NY	10583	Amount of	∟ach Rec	eipt this Period
	FEC ID number of contributing federal political committee.	C				20.00
	Amalgamated Life Insurance	Occupation		7		
	Company	President Aggregate	-AMM Year-to-Date ▼	$\dashv$		
	Primary General	gg. oguto				
	Other (specify) ▼		260.00			
3.	Full Name (Last, First, Middle Initial) Ronald Minikes			Date of Re	ceipt	
	Mailing Address 24 Burling Avenue			03	D D D	2007
	City	State	Zip Code	Transactio	n ID: SA	11A1.8466
	White Plains	NY	10605	Amount of	Each Rec	eipt this Period
	FEC ID number of contributing federal political committee.	С				40.00
	Amalgamatod Life Incurance	Occupation				
	Company	President		4		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
	Other (specify) ▼	0 0	240.00			
<b>D.</b>	Full Name (Last, First, Middle Initial) Ronald Minikes			Date of Re	ceipt	
	Mailing Address 24 Burling Avenue			03	28	2007
	City	State	Zip Code			11A1.8467
	White Plains	NY	10605			eipt this Period
	FEC ID number of contributing	_		1		40.00
	federal political committee.	С				70.00
	Amalgamated Life Incurance	Occupation				
	Company	President	Year-to-Date ▼	$\dashv$		
	Primary General	Aggregate				
	Other (specify) ▼	0 0	280.00			
s	UBTOTAL of Receipts This Page (optional)					100.00
	. 5 ,		<u> </u>			
T	OTAL This Period (last page this line number only	·)	<b>&gt;</b>			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER:	PAGE 21/33
ITEMIZED RECEIPTS			or each category of the	(check only one)	
TIEMIZED TIEGEN 10			Detailed Summary Page	X 11a 11b	11c   12 15   16   17
۸۰	winformation against from such Departs and St	estamanta mai	, not be cold or used by any norse	13 14 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	
or	y information copied from such Reports and St for commercial purposes, other than using the	name and add	frict be sold of used by any perso dress of any political committee to	solicit contributions from	such committee.
	NAME OF COMMITTEE (In Full)				
$\rangle$	Amalgamated Life Insurance Company	Political Ad	ction Committee		
A.	Full Name (Last, First, Middle Initial) Ronald Minikes			Date of Receipt	
	Mailing Address 24 Burling Avenue	Otata	7'- 0-4-	0 4 D D D 1 1	2007
	City White Plains	State	Zip Code	Transaction ID: S	
	White Plains	NY	10605	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			40.00
	Name of Employer Amalgamated Life Insurance Company	Occupation President			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General		320.00	1	
	Other (specify) ▼	0 0	8 8 8 8 8 8		
В.				Date of Receipt	
	Mailing Address 24 Burling Avenue			04 25	
	City	State	Zip Code	Transaction ID: S	A11A1.8519
	White Plains	NY	10605	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			40.00
	Name of Employer Amalgamated Life Insurance	Occupation	1		
	Company	President	<u> </u>		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		360.00		
— С.	Full Name (Last, First, Middle Initial) Ronald Minikes			Date of Receipt	
٠.	Mailing Address 24 Burling Avenue			M M / D D	/ <b>Y Y Y Y Y</b>
				05 09	2007
	City	State	Zip Code	Transaction ID: S	A11A1.8566
	White Plains	NY	10605	Amount of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	C			40.00
Amalgamated Lîfe Insurance Company		Occupation		7	
		President			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify)		400.00		
	Strict (openity) \	0 0	0 0 0 0 0 0 0	1	
s	UBTOTAL of Receipts This Page (optional)				120.00
$\vdash$	ago (optional)			-	
T	OTAL This Period (last page this line number of	only)	<b>)</b>		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 22 / 33	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
TIEMIZED TIEGEN 10			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	4-7
Any information copied from such Reports and Statements ma			r not be cold or used by any parce		17
or	for commercial purposes, other than using the	name and add	rnot be sold of used by any perso Iress of any political committee to	solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
$\rangle$	Amalgamated Life Insurance Company	Political Ad	ction Committee		
Α.	Full Name (Last, First, Middle Initial) Ronald Minikes			Date of Receipt	
	Mailing Address 24 Burling Avenue		7: 0 !	05 23 2007	
	City	State	Zip Code	Transaction ID: SA11A1.8567	
	White Plains	NY	10605	Amount of Each Receipt this Period	-
	FEC ID number of contributing federal political committee.	C		40.00	
	Name of Employer Amalgamated Life Insurance Company	Occupation President			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General	1	440.00		
	Other (specify)	0 0			
В.				Date of Receipt	
	Mailing Address 24 Burling Avenue			06 06 2007	
	City	State	Zip Code	Transaction ID: SA11A1.8603	
	White Plains	NY	10605	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		40.00	
	Name of Employer Amalgamated Life Insurance	Occupation	1	7	
	Company	President			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		480.00		
_	Full Name (Last, First, Middle Initial)			D. (D. )	
C.	Ronald Minikes  Mailing Address 24 Rurling Avenue			Date of Receipt	
	Mailing Address 24 Burling Avenue			06 20 2007	
	City	State	Zip Code	Transaction ID: SA11A1.8627	
	White Plains	NY	10605	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		40.00	
Amalgamated Life Insurance Company Pre		Occupation President			
			Year-to-Date ▼	-	
		39 - 3			
	Other (specify)		520.00		
s	UBTOTAL of Receipts This Page (optional)			120.00	Ī
$\vdash$					ī
T	OTAL This Period (last page this line number of	only)	<b>&gt;</b>		

SC	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23/33	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	7 17
An	y information copied from such Reports and Stat	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions	
	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.	
$\setminus$	NAME OF COMMITTEE (In Full)	Dalitiaal As	ation Committee		
	Amalgamated Life Insurance Company F	Political At	ction Committee		
	Full Name (Last, First, Middle Initial)			Data of Danaira	
٠.	William Porozok  Mailing Address 68 Mitchell Avenue			Date of Receipt	1
				05 23 2007	
	City	State	Zip Code	Transaction ID: SA11A1.8571	
	Piscataway	NJ	08854	Amount of Each Receipt this Period	_
	FEC ID number of contributing federal political committee.	C		20.00	
	Name of Employer Amlagamated Life Insurance	Occupation		7	
	Company	AVP Acc		4	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		220.00		
				·	
3.	Full Name (Last, First, Middle Initial) William Porozok			Date of Receipt	
	Mailing Address 68 Mitchell Avenue			M M / D D / Y Y Y Y	1
	Oit.	04-4-	7in Onda	06 06 2007	
	City Piscataway	State NJ	Zip Code 08854	Transaction ID: SA11A1.8605	
	FEC ID number of contributing		00004	Amount of Each Receipt this Period	
	federal political committee.	C		20.00	
	Name of Employer	Occupation	<u> </u>	+	
	Amlagamated Life Insurance Company	AVP Acc			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		240.00		
	Other (specify)	0 0	0 0 0 0 0 0 0		
`	Full Name (Last, First, Middle Initial) William Porozok			Date of Receipt	
<i>J</i> .	Mailing Address 68 Mitchell Avenue			M M / D D / Y Y Y	1
				06 20 2007	
	City Piscataway	State NJ	Zip Code 08854	Transaction ID: SA11A1.8629	
	FEC ID number of contributing		00004	Amount of Each Receipt this Period	
	federal political committee.	C		20.00	
	Name of Employer	Occupation	1	+	
	Amlagamated Life Insurance Company	AVP Acco			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		260.00		
	other (specify) \		0 0 0 0 0 0 0		
				00.00	
SI	JBTOTAL of Receipts This Page (optional)		••••••••••••••••••••••••••••••••••••••	60.00	_
T	OTAL This Period (last page this line number on	lv)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 24 / 33
ITEMIZED RECEIPTS			or each category of the	(check only one)
II LIMIZED NEGLIF 13			Detailed Summary Page	X   11a   11b   11c   12
Δ.	information conicd from our by Donath and Otak			13 14 15 16 17
or	y information copied from such Reports and State for commercial purposes, other than using the na	me and add	rnot be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Amalgamated Life Insurance Company F	Political Ac	ction Committee	
A.	Full Name (Last, First, Middle Initial) Victoria R. Sartor			Date of Receipt
	Mailing Address 117 Burke Place			03 / 28 / 2007
	City	State	Zip Code	Transaction ID: SA11A1.8473
	Paramus	NJ	07652	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Amalgamated Life Insurance Company	Occupation VP, Finar	n nce Reporting	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		210.00	1
	Other (specify) ▼		210.00	
В.	Full Name (Last, First, Middle Initial) Victoria R. Sartor			Date of Receipt
	Mailing Address 117 Burke Place			04 11 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.8524
	Paramus	NJ	07652	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer	Occupation	1	
	Amalgamated Life Insurance Company		nce Reporting	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		240.00	
	Other (specify)			
C.	Full Name (Last, First, Middle Initial) Victoria R. Sartor			Date of Receipt
	Mailing Address 117 Burke Place			M M / D D / Y Y Y Y
				04 25 2007
	City	State	Zip Code	Transaction ID: SA11A1.8525
	Paramus	NJ	07652	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Amalgamated Life Insurance Company		Occupation VP, Finar	n nce Reporting	
	Receipt For:		Year-to-Date ▼	
	Primary General		270.00	1
	Other (specify) ▼		270.00	
s	UBTOTAL of Receipts This Page (optional)			90.00
$\vdash$	· · · · · · · · · · · · · · · · · · ·			
т	OTAL This Period (last page this line number onl	y)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE		PAGE 25/33
ITEMIZED RECEIPTS			or each category of the	(check only		
	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a	11b	11c   12
_				13	14	15 16 17
An or	y information copied from such Reports and Statement for commercial purposes, other than using the name an	ts may	y not be sold or used by any perso dress of any political committee to	n for the purp solicit contrib	ose of solicituditions from s	such committee.
_	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,			
$\rangle$	Amalgamated Life Insurance Company Politic	cal A	ction Committee			
۹.	Full Name (Last, First, Middle Initial) Victoria R. Sartor			Date of	Receipt	
	Mailing Address 117 Burke Place			0 5	09	2007
	City Stat		Zip Code			11A1.8572
	<u>Paramus</u> NJ		07652	Amount	of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.					30.00
	Name of Employer Amalgamated Life Insurance Company  Occu VP, I	•	n nce Reporting			
		regate	e Year-to-Date ▼			
	Primary General	-	200.00			
	Other (specify) ▼	0	300.00			
3.	Full Name (Last, First, Middle Initial) Victoria R. Sartor			Date of	Receipt	
	Mailing Address 117 Burke Place			0 5	23	2007
	City Stat		Zip Code	Transac	tion ID: SA	11A1.8573
	<u>Paramus</u> NJ	<u> </u>	07652	Amount	of Each Re	ceipt this Period
	FEC ID number of contributing federal political committee.					30.00
	Name of Employer Amalgamated Life Insurance	•				
	Company		nce Reporting			
	Receipt For: Aggr Primary General	regate	e Year-to-Date ▼			
	Other (specify) ▼		330.00			
 D.	Full Name (Last, First, Middle Initial) Victoria R. Sartor			Date of	Receipt	
	Mailing Address 117 Burke Place			M M M 0 6	/ D D D O 6	2007
	City Stat	ate.	Zip Code			11A1.8606
	Paramus NJ		07652			ceipt this Period
	FEC ID records or of a cartribution		07002	Amount	OI Lacillio	· · · · · ·
	federal political committee.					30.00
	Name of Employer Amalgamated Life Insurance	•				
	Company		nce Reporting			
	Receipt For: Aggr	regate	e Year-to-Date ▼			
	Other (specify)		360.00			
		0	0 0 0 0 0 0			
s	UBTOTAL of Receipts This Page (optional)					90.00
	1					
T	OTAL This Period (last page this line number only)		<b>&gt;</b>			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:   PAGE 26 / 33   (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X   11a
Ar	ny information copied from such Reports and State for commercial purposes, other than using the nar	ments may	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Amalgamated Life Insurance Company P	olitical A	ction Committee	
Α.	Full Name (Last, First, Middle Initial) Victoria R. Sartor			Date of Receipt
	Mailing Address 117 Burke Place			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.8630
	Paramus	NJ	07652	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Amalaamata'd Lifa Inguranga	Occupation VP, Final	n nce Reporting	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 390.00	
В.	Full Name (Last, First, Middle Initial) Mark Schwartz  Mailing Address 130 Aspinwall Street			Date of Receipt
		01-1-	7'- 0-4-	05 23 2007
	City States Island	State	Zip Code	Transaction ID: SA11A1.8575
	Staten Island	NY	10307	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Amalgamated Life Incurance	Occupation		
	Company Receipt For:	Corporate	e ATT. • Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	220.00	
<b>C</b> .	Full Name (Last, First, Middle Initial) Mark Schwartz			Date of Receipt
	Mailing Address 130 Aspinwall Street			0 6 0 6 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11A1.8607
	Staten Island	NY	10307	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Amalgamated Life Insurance	Occupation Corporate		
Company Receipt For:			Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1 1	240.00	
s	UBTOTAL of Receipts This Page (optional)			70.00
Ļ	OTAL This Period (last page this line number only	n)	•	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 27/33
TEMIZED RECEIPTS		or each category of the	(check only one)
: : : <del></del> : <del></del>		Detailed Summary Page	X   11a   11b   11c   12   15   16   17
Any information copied from such Reports and Sta	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the r  NAME OF COMMITTEE (In Full)	iame and add	uress or any political committee to	Solicit Contributions from such committee.
Amalgamated Life Insurance Company	Political A	ction Committee	
Full Name (Last, First, Middle Initial)  A. Mark Schwartz			Date of Receipt
Mailing Address 130 Aspinwall Street			06 20 7 2007
City <u>Staten Island</u>	State NY	Zip Code 10307	Transaction ID: SA11A1.8631  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10007	20.00
Name of Employer Amalgamated Life Insurance Company	Occupation Corporat		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Thomas G. Thompson			Date of Receipt
Mailing Address 25 South Eliott PA			03 / 28 / Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.8479
Brooklyn 550 ID	NY	11217	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Amalgamated Life Insurance Company	Occupation VP	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		210.00	
Full Name (Last, First, Middle Initial)  7. Thomas G. Thompson			Date of Receipt
Mailing Address 25 South Eliott PA			0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.8530
Brooklyn	NY	11217	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Amalgamated Life Insurance Company	Occupation VP	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		240.00	
SUBTOTAL of Receipts This Page (optional)			80.00
TOTAL This Period (last page this line number o	nly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: (check only one)	PAGE 28/33
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11b 13 14	11c   12 15   16   17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of solic solicit contributions from	iting contributions such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Amalgamated Life Insurance Company	Political A	ction Committee		
۹.	Full Name (Last, First, Middle Initial) Thomas G. Thompson Mailing Address 25 South Eliott PA City Brooklyn	State NY	Zip Code 11217	Date of Receipt  0 4 2 5  Transaction ID: S.	2 0 0 7 A11A1.8531
	FEC ID number of contributing federal political committee.	С		Amount of Each Re	30.00
	Name of Employer Amalgamated Life Insurance Company Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP Aggregate	Year-to-Date ▼ 270.00	]	
3.	Full Name (Last, First, Middle Initial) Thomas G. Thompson Mailing Address 25 South Eliott PA			Date of Receipt  M M M / D D D  0 5 0 9	/ Y Y Y Y Y Y 2007
	City	State	Zip Code	Transaction ID: S	A11A1.8578
	Brooklyn  FEC ID number of contributing federal political committee.	C	11217	Amount of Each Re	30.00
	Name of Employer Amalgamated Life Insurance Company Receipt For: Primary General Other (specify)	Occupation VP Aggregate	e Year-to-Date ▼ 300.00	]	
Full Name (Last, First, Middle Initial)  7. Thomas G. Thompson				Date of Receipt	
	Mailing Address 25 South Eliott PA			0 5 2 3	<sup>/</sup>
	City Brooklyn	State NY	Zip Code 11217	Transaction ID: S. Amount of Each Re	
	FEC ID number of contributing federal political committee.	C			30.00
	Name of Employer Amalgamated Life Insurance Company Receipt For: Primary General Other (specify)	Occupation VP Aggregate	Year-to-Date ▼		
s	UBTOTAL of Receipts This Page (optional)				90.00
T	OTAL This Period (last page this line number or	nly)	<b>)</b>		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 29 / 33		
			or each category of the	(check only one)		
11	EMIZED RECEIPTS		Detailed Summary Page	X   11a   11b   11c   12		
			2 otalioù dallillary i ago	13 14 15 16 17		
Ar or	ly information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
$\rangle$	Amalgamated Life Insurance Company I	Political A	ction Committee			
Α.	Full Name (Last, First, Middle Initial) Thomas G. Thompson			Date of Receipt		
Α.	·			<del>-</del>		
	Mailing Address 25 South Eliott PA			06 06 2007		
	City	State	Zip Code	Transaction ID: SA11A1.8609		
	Brooklyn	NY	11217	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		30.00		
	Name of Employer Amalgamated Life Insurance	Occupation VP	n			
	Company Receipt For:		e Year-to-Date ▼	_		
	Primary General	Aggregate	Teal to Bate V	,		
	Other (specify)		360.00			
		0 0	0 0 0 0 0 0 0			
<u> </u>	Full Name (Last, First, Middle Initial) Thomas G. Thompson			Date of Receipt		
	Mailing Address 25 South Eliott PA			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.8633		
	Brooklyn	NY	11217	Amount of Each Receipt this Period		
	-					
	FEC ID number of contributing federal political committee.	C		30.00		
	Name of Employer Amalgamated Life Insurance	Occupation	n			
	Company	VP				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		390.00	1		
	Other (specify) ▼		390.00			
_	Full Name (Last, First, Middle Initial)					
C.	Rosanne Tralongo			Date of Receipt		
	Mailing Address 9 Lockwood Lane			M M / D D / Y Y Y Y		
				05 23 2007		
	City	State	Zip Code	Transaction ID: SA11A1.8581		
	Closter	NJ	07624	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		20.00		
	Name of Employer	Occupation	 n			
	Amalgamated Life Insurance Company	AVP Fina				
	Receipt For:		e Year-to-Date ▼			
	Primary General	35. 294.0	······································	1		
	Other (specify)		220.00			
	(-1 )/ <b>V</b>	0 0	1 1 1 1 1 1 1	1		
	<b>L</b>					
_	IIDTOTAL of December This December 1		_	80.00		
LS	UBTOTAL of Receipts This Page (optional)		······································			

S	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 30 / 33
	EMIZED RECEIPTS	or each category of the	(check only one)
•••	LIMIZED RECEIP 13	Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
Ar	ny information copied from such Reports and Statements for commercial purposes, other than using the name and	may not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	71	
$  \rangle$	Amalgamated Life Insurance Company Politica	LAction Committee	
	7 maigamatou Eno mouranos company i onto		
_	Full Name (Last, First, Middle Initial)		
A.	Rosanne Tralongo		Date of Receipt
	Mailing Address 9 Lockwood Lane		06 06 2007
	City State	Zip Code	
	City State Closter NJ	21p Code 07624	Transaction ID: SA11A1.8610
		07624	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		20.00
	Name of Employer Occup	ation	7
	Amalgamated Life Insurance Company  AVP F	inance	
		gate Year-to-Date ▼	
	Primary General	040.00	1
	Other (specify) ▼	240.00	
В.	Full Name (Last, First, Middle Initial) Rosanne Tralongo		Date of Receipt
	Mailing Address 9 Lockwood Lane		M M / D D / Y Y Y Y
	a g a a a a a a a a a a a a a a a a a a		06 20 2007
	City State	Zip Code	Transaction ID: SA11A1.8634
	<u>Closter</u> NJ	07624	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee		20.00
	federal political committee.		20.00
	Name of Employer Occup	ation	-
	Amalgamated Life Insurance	inance	
	Company	gate Year-to-Date ▼	
	Primary General		1
	Other (specify) ▼	260.00	
_	Full Name (Last, First, Middle Initial)		Data of Bassist
C.	Elizabeth Veloso		Date of Receipt
	Mailing Address 64 Thornton Street		05 23 2007
	City State	Zip Code	Transaction ID: SA11A1.8583
	<u>Lawrence</u> MA	01841	Amount of Each Receipt this Period
	FEC ID number of contributing		20.00
	federal political committee.		20.00
	Name of Employer Occup	ation	7
	Amalgamated Life Insurance Company  Direct	or - AD. Service	
		gate Year-to-Date ▼	
	Primary General	220.00	
	Other (specify) ▼	220.00	
s	UBTOTAL of Receipts This Page (optional)	<b>.</b>	60.00
H	,		
т	OTAL This Period (last page this line number only)	<b>&gt;</b>	

S	CHEDULE A (FEC Form 3X)		Llea caparata cabadula(c)	FOR LINE NUMBER: PAGE 31 / 33
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
•••	EMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
Ar or	ly information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may and add	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Amalgamated Life Insurance Company Political	tical Ac	ction Committee	
A.	Full Name (Last, First, Middle Initial) Elizabeth Veloso			Date of Receipt
	Mailing Address 64 Thornton Street			06 06 2007
		State	Zip Code	Transaction ID: SA11A1.8611
	Lawrence	ΛA	01841	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			20.00
	Amalaamatad Lifa Inguranga	cupation rector -	AD. Service	
		ggregate	Year-to-Date ▼	
	Primary General		240.00	1
	Other (specify) ▼	0 0	0 0 0 0 0 0	
В.	Full Name (Last, First, Middle Initial) Elizabeth Veloso			Date of Receipt
	Mailing Address 64 Thornton Street			06 20 7 2007
	•	State	Zip Code	Transaction ID: SA11A1.8635
	<u>Lawrence</u> N	<u>//A</u>	01841	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			20.00
	Amalgamated Life Incurance	cupation		
	Company		AD. Service	
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	
_	Full Name (Last, First, Middle Initial)			D. (D. )
C.	Jeffrey Warbet Mailing Address 49-10 Scarborough Street			Date of Receipt
	Mailing Address 49-10 Scarborough Street			05 23 2007
	City S	State	Zip Code	Transaction ID: SA11A1.8585
	Freehold	IJ	07728	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			20.00
	Name of Employer Oc	cupation	1	
	Amalgamated Lîfe Insurance Company  Sr.	. Vice F	President	
	Receipt For: Ag	ggregate	Year-to-Date ▼	
	Primary General		220.00	1
	Other (specify) ▼	0 0	220.00	1
s	UBTOTAL of Receipts This Page (optional)		<b>_</b>	60.00
$\vdash$				
Ιт	OTAL This Period (last page this line number only)			

Primary

Other (specify)

General

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

PAGE 32/33 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 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) Amalgamated Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Jeffrey Warbet Date of Receipt Mailing Address 49-10 Scarborough Street 06 06 2007 City State Zip Code Transaction ID: SA11A1.8612 Freehold NJ 07728 Amount of Each Receipt this Period FEC ID number of contributing 20.00 C federal political committee. Name of Employer Amalgamated Life Insurance Occupation Sr. Vice President Company Aggregate Year-to-Date ▼ Receipt For: General Primary 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeffrey Warbet Date of Receipt Mailing Address 49-10 Scarborough Street 06 20 2007 City Transaction ID: SA11A1.8636 State Zip Code Freehold NJ 07728 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Amalgamated Life Insurance Occupation Sr. Vice President Company Receipt For: Aggregate Year-to-Date ▼

260.00

SUBTOTAL of Receipts This Page (optional)	•	40.00
TOTAL This Period (last page this line number only)	<b>•</b>	2450.00

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	<u> </u>			
SCHEDULE B (FEC Form 3X)		Use seperate schedule(s)		NUMBER: PAGE 33/33
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	y one)  22 X 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and S for commercial purposes, other than using the			
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
	Amalgamated Life Insurance Compan	y Political Action Committee		
	Full Name (Last, First, Middle Initial)			Transaction ID: SB23.8439
۹.	Latino Latino Citizens for Respect			Date of Disbursement
	Mailing Address 371 Whitfield, #3			01
	City	State Zip Code		Amount of Each Disbursement this Period
	Guilford	CT 06437		5000.00
	Purpose of Disbursement		011	5000.00
	Candidate Name		Category/ Type	
	Office Sought: House Dis	bursement For:		
	Senate	Primary General		
	President	Other (specify)		
	State: District:			

		5000.00	1
SUBTOTAL of Disbursements This Page (optional)	<b>&gt;</b>	5000.00	┙
			i
TOTAL This Period (last page this line number only)	•	5000.00	