REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
SECRETARIAT

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
The Prudential Insurance Company of America Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
751 Broad Street

CITY, STATE and ZIP CODE
Newark, NJ 07102

2. FEC IDENTIFICATION NUMBER
C00127779

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

4. TYPE OF REPORT

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

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

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

☒ Thirtieth day report following the General Election on 11/03/98 in the State of ALL

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

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/15/98 through 11/23/98			
6. (a) Cash on Hand January 1, 19 98			$ 13,161.81
(b) Cash on Hand at Beginning of Reporting Period		$ 26,315.89	
(c) Total Receipts (from Line 19)		$ 62,169.35	$ 160,783.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		$ 88,485.34	$ 163,944.91
7. Total Disbursements (from Line 30)		$ 77,668.38	$ 153,127.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		$ 10,816.96	$ 10,816.96
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		$ 47,871.68	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Type or Print Name of Treasurer
Steven Wlodychak Assistant Treasurer

Signature of Treasurer
Steven Wlodychak

Date
12/2/98

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)

4-00173

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

(revised 1/1/91)

NAME OF COMMITTEE: The Prudential Insurance Company of America Political Action Committee

REPORT COVERING PERIOD FROM: 10/15/98 TO: 11/23/98

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	11,536.81	79,082.91	11(a)(i)
ii. Unitemized	632.54	20,700.39	11(a)(ii)
iii. Total (add i and ii) ➤	12,169.35	100,783.30	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	12,169.35	100,783.30	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	50,000.00	50,000.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	62,169.35	150,783.30	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	62,169.35	150,783.30	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	16.42	275.99	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	16.42	275.99	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	49,050.00	118,500.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	4,351.96	4,351.96	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0.00	0.00	28(d)
29. Other Disbursements	24,250.00	30,000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	77,668.38	153,127.95	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	77,668.38	153,127.95	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	12,169.35	100,783.30	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	12,169.35	100,783.30	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	16.42	275.99	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	16.42	275.99	37

4-00199

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 20

FOR LINE NUMBER 11 a I

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)
The Prudential Insurance Company of America Political Action Committee

A. 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
Arthur F Ryan 10 Oak Forest Lane Mendham, NJ 07945 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 6,000.00	11/13/98	6,000.00
B. Full Name, Mailing Address and ZIP Code JAMES M O'CONNOR 35 SOUTH ALWARD AVE BASKING RIDGE, NJ 07920 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 404.40	Payroll Deduction	35.35 ($17.69 Biweekly)
C. Full Name, Mailing Address and ZIP Code PRISCILLA A MYERS 33 EAGLE NEST RD MORRISTOWN, NJ 07960 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 3,462.06	Payroll Deduction	167.30 ($83.65 Biweekly)
D. Full Name, Mailing Address and ZIP Code Annamay Kinne 30 Battlebrook Lane Princeton, NJ 08540 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 497.49	Payroll Deduction	43.26 ($21.63 Biweekly)
E. Full Name, Mailing Address and ZIP Code DAVID L BUTLER 16 PARKVIEW RD CRANBURY, NJ 08512 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 279.92	Payroll Deduction	24.68 ($12.34 Biweekly)
F. Full Name, Mailing Address and ZIP Code E M CAULFIELD 4 PARK LANE MADISON, NJ 07940 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 2,845.64	Payroll Deduction	259.62 ($129.81 Biweekly)
G. Full Name, Mailing Address and ZIP Code EDWARD P BAIRD 140 MOUNTAIN AVE SUMMIT, NJ 07901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 1,396.99	Payroll Deduction	91.35 ($45.68 Biweekly)

SUBTOTAL of Receipts This Page (optional)	5,621.59
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)
The Prudential Insurance Company of America Political Action Committee

A. 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
DENNIS M BUSHE 46 BLACKBURN ROAD SUMMIT, NJ 07901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 985.95	Payroll Deduction	55.74 ($43.37 Biweekly)
B. Full Name, Mailing Address and ZIP Code PAUL G O LEARY 719 BELMONT ROAD RIDGEWOOD, NJ 07450 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 301.23	Payroll Deduction	26.54 ($13.27 Biweekly)
C. Full Name, Mailing Address and ZIP Code BRYAN V MAGUIRE 1 BELLERIVE COURT MIDDLETOWN, NJ 07748 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 308.90	Payroll Deduction	27.34 ($13.67 Biweekly)
D. Full Name, Mailing Address and ZIP Code HELEN M GALT 4 ASPEN DR NORTH CALDWELL, NJ 07006 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 928.74	Payroll Deduction	80.76 ($40.38 Biweekly)
E. Full Name, Mailing Address and ZIP Code THOMAS J LOFTUS 1604 GROUSE LANE MOUNTAINSIDE, NJ 07092 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 214.81	Payroll Deduction	19.10 ($9.55 Biweekly)
F. Full Name, Mailing Address and ZIP Code JONATHAN M GREENE 61 ESSEX ROAD SUMMIT, NJ 07901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 3,354.88	Payroll Deduction	164.62 ($92.31 Biweekly)
G. Full Name, Mailing Address and ZIP Code BARBARA R GOLD 28 FOXBURN STREET NEW CITY, NY 10956 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 376.97	Payroll Deduction	32.76 ($16.38 Biweekly)

SUBTOTAL of Receipts This Page (optional) 457.88

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

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 3 OF 20
	FOR LINE NUMBER 11 a I

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM M BETHKE 151 LAKE DRIVE MOUNTAIN LAKES, NJ 07046	The Prudential Insurance Company of America	Payroll Deduction	201.92 ($100.96 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date: $ 2,272.35	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANDREW D CROOKS 323 TURTLE TRAIL LAKE MARY, FL 32746	The Prudential Insurance Company of America	Payroll Deduction	32.00 ($16.00 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date: $ 363.36	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN L WESTNEY 5080 NORTHLAND DRIVE ATLANTA, GA 30342	The Prudential Insurance Company of America	Payroll Deduction	32.24 ($16.12 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date: $ 396.56	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RONALD P JOELSON 5 TARTAN DR BASKING RIDGE, NJ 07920	The Prudential Insurance Company of America	Payroll Deduction	115.38 ($57.69 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date: $ 2,887.10	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID E HURLEY 18522 S E SEA OAKS LN TEQUESTA, FL 33469	The Prudential Insurance Company of America	Payroll Deduction	19.62 ($11.64 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date: $ 290.60	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BRIAN G HARMS 28 DARREN DRIVE MARTINSVILLE, NJ 08836	The Prudential Insurance Company of America	Payroll Deduction	33.88 ($16.83 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date: $ 369.82	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MAUREEN E ADOLF 807 WEST END 2-A NEW YORK, NY 10024	The Prudential Insurance Company of America	Payroll Deduction	15.84 ($7.92 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date: $ 290.04	

SUBTOTAL of Receipts This Page (optional)	450.66
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

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FOR LINE NUMBER 11 a I

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
PETER B SAYRE 29 EAST DRIVE LIVINGSTON, NJ 07039 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 420.17	Payroll Deduction	20.00 ($10.00 Biweekly)
B. 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
JOEL L ROSENBERG 10650 CENTENNIAL DR ALPHARETTA, GA 30022 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 227.75	Payroll Deduction	21.00 ($10.50 Biweekly)
C. 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
CYNTHIA A PATELLA 10011 BENNINGTON DRIVE TAMPA, FL 33626 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 267.63	Payroll Deduction	13.00 ($6.00 Biweekly)
D. 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
PAUL D EGAN 315 TRADEA TARN ROSWELL, GA 30076 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 299.00	Payroll Deduction	26.00 ($13.00 Biweekly)
E. 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
DEBORAH J GINGHER 16 MATTBEN DRIVE WARREN, NJ 07059 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 738.43	Payroll Deduction	35.48 ($18.23 Biweekly)
F. 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 O'GORMAN 606 BRENTWOOD DR TARRYTOWN, NY 10591 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 1,168.32	Payroll Deduction	104.24 ($52.12 Biweekly)
G. 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 B BERKOWITZ 242 ELMWOOD AVENUE HOBOKUS, NJ 07423 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 210.81	Payroll Deduction	18.54 ($9.27 Biweekly)

SUBTOTAL of Receipts This Page (optional)	241.24
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11 a I

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
WILLIAM D FRIEL 639 PARK AVE MANHASSET, NY 11030 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 1,947.58	Payroll Deduction	173.08 ($86.54 Biweekly)
B. Full Name, Mailing Address and ZIP Code IRA J KLEINMAN 14 RAINBOW RIDGE DRIVE LIVINGSTON, NJ 07039 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 2,255.84	Payroll Deduction	196.16 ($98.08 Biweekly)
C. Full Name, Mailing Address and ZIP Code MICHAEL I HYMAN 6 RIDGEWOOD DRIVE RANDOLPH, NJ 07869 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 304.58	Payroll Deduction	25.74 ($13.37 Biweekly)
D. Full Name, Mailing Address and ZIP Code RICHARD F LAMBERT 60 KNOLLCROFT ROAD BASKING RIDGE, NJ 07920 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 358.34	Payroll Deduction	31.16 ($15.58 Biweekly)
E. Full Name, Mailing Address and ZIP Code PAUL J LANG 224 LORRAINE DRIVE BERKELEY HEIGHTS, NJ 07922 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 391.48	Payroll Deduction	34.04 ($17.02 Biweekly)
F. Full Name, Mailing Address and ZIP Code LEE F WOOD 380 RECTOR PL APT9HL NEW YORK, NY 10280 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 247.42	Payroll Deduction	21.50 ($10.80 Biweekly)
G. Full Name, Mailing Address and ZIP Code BRIAN P MURPHY 857 NEW ENGLAND DR WESTFIELD, NJ 07090 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 398.13	Payroll Deduction	34.62 ($17.31 Biweekly)

SUBTOTAL of Receipts This Page (optional) 517.60

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

4-07179

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 8 OF 20
	FOR LINE NUMBER 11 a I

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARTIN A BERKOWITZ 60 HICKORY RD SHORT HILLS, NJ 07078	The Prudential Insurance Company of America	Payroll Deduction	145.38 ($72.69 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 2,701.26		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID N BRADFORD 49 HOBART AVE SHORT HILLS, NJ 07078	The Prudential Insurance Company of America	Payroll Deduction	40.00 ($20.00 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 460.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LEONARD M SANTORO 364 HIGHLAND AVE UPPER MONTCLAIR, NJ 07043	The Prudential Insurance Company of America	Payroll Deduction	96.16 ($48.08 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 1,056.22		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SHEILAH A FLYNN 310 LUPINE WAY SHORT HILLS, NJ 07078	The Prudential Insurance Company of America	Payroll Deduction	32.22 ($16.11 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 370.53		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN E HANRAHAN 60 BIRCH AVE NORTH CALDWELL, NJ 07006	The Prudential Insurance Company of America	Payroll Deduction	15.10 ($7.55 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 259.72		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM F GASHLIN 35 WOODCREST RD BOONTON, NJ 07005	The Prudential Insurance Company of America	Payroll Deduction	20.16 ($10.08 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 228.15		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT F MONTELLIONE 13 RAILSEDGE RD BELL MEAD, NJ 08502	The Prudential Insurance Company of America	Payroll Deduction	26.01 ($13.69 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 308.86		

SUBTOTAL of Receipts This Page (optional)	375.03
TOTAL This Period (last page this line number only)	

4-00179

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11 a I

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
Cedward Chaplin 17 Ridge Road Summit, NJ 07901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Occupation: Insurance Executive Aggregate Year-to-Date: $ 782.92	Payroll Deduction	56.09 ($34.04 Biweekly)
B. Full Name, Mailing Address and ZIP Code DAVID A NACHMAN 5 DIANE DRIVE MORGANVILLE, NJ 07751 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Occupation: Insurance Executive Aggregate Year-to-Date: $ 293.11	Payroll Deduction	27.75 ($13.88 Biweekly)
C. Full Name, Mailing Address and ZIP Code ROGGER A LAWSON 330 E 38TH ST NEW YORK, NY 10016 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Occupation: Insurance Executive Aggregate Year-to-Date: $ 2,931.55	Payroll Deduction	259.62 ($129.81 Biweekly)
D. Full Name, Mailing Address and ZIP Code FRANK N CORSI 4 PHYLLIS DRIVE SUCCASAUNNA, NJ 07876 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Occupation: Insurance Executive Aggregate Year-to-Date: $ 303.03	Payroll Deduction	27.19 ($13.87 Biweekly)
E. Full Name, Mailing Address and ZIP Code PATRICIA F O MALLEY 8 ROBERTS RD RANDOLPH, NJ 07869 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Occupation: Insurance Executive Aggregate Year-to-Date: $ 206.90	Payroll Deduction	18.22 ($9.11 Biweekly)
F. Full Name, Mailing Address and ZIP Code LAWRENCE B KIEFER 316 ASHLAND RD SUMMIT, NJ 07901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Occupation: Insurance Executive Aggregate Year-to-Date: $ 920.35	Payroll Deduction	80.38 ($40.19 Biweekly)
G. Full Name, Mailing Address and ZIP Code GEORGE F VORNEHM 5 SEWARD PLACE CHESTER, NJ 07930 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Occupation: Insurance Executive Aggregate Year-to-Date: $ 274.56	Payroll Deduction	24.04 ($12.02 Biweekly)

SUBTOTAL of Receipts This Page (optional)	505.29
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. 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
STEVEN B SAPERSTEIN 270 DUTCH FARM RD BRIDGEWATER, NJ 08807	The Prudential Insurance Company of America Insurance Executive $ 329.59	Payroll Deduction	28.86 ($14.33 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
B. 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
WILLIAM R TRANTER 6 PADDOCK DR NEW HOPE, PA 18938	The Prudential Insurance Company of America Insurance Executive $ 893.65	Payroll Deduction	77.70 ($38.85 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
C. 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
RICHARD H SAXE 59 HANCE ROAD FAIR HAVEN, NJ 07704	The Prudential Insurance Company of America Insurance Executive $ 393.62	Payroll Deduction	26.70 ($13.35 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
D. 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
GAIL T GROSSMANN 180 MORRIS AVE MOUNTAIN LAKES, NJ 07046	The Prudential Insurance Company of America Insurance Executive $ 253.00	Payroll Deduction	22.60 ($11.30 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
E. 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
MATTHEW J CHANIN 31 SURREY LN LIVINGSTON, NJ 07039	The Prudential Insurance Company of America Insurance Executive $ 533.76	Payroll Deduction	47.12 ($23.56 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
F. 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
STEPHEN F AUTH 21 RUNNYMEDE ROAD CHATHAM, NJ 07928	The Prudential Insurance Company of America Insurance Executive $ 1,213.91	Payroll Deduction	115.38 ($57.69 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
G. 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
GEORGE A FLECK 31 FAIRHAND COURT BRIDGEWATER, NJ 08807	The Prudential Insurance Company of America Insurance Executive $ 274.41	Payroll Deduction	24.24 ($12.12 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	342.40
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
RICHARD J SCHAFFIN 206 TALLWOOD LANE GREEN BROOK, NJ 08812 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 367.08	Payroll Deduction	31.92 ($15.96 Biweekly)
B. 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
FRANCES K HACKETT 1111 CLINTON TERRACE SOUTH PLAINFIELD, NJ 07080 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 241.91	Payroll Deduction	21.44 ($10.72 Biweekly)
C. 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
ANDREW M ANDALORO 208 WORTHINGTON AVENUE SPRING LAKE, NJ 07762 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 297.63	Payroll Deduction	26.64 ($13.27 Biweekly)
D. 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
MARY K DONELIK 20 BRADFORD STREET NEW PROVIDENCE, NJ 07974 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 230.88	Payroll Deduction	19.48 ($8.22 Biweekly)
E. 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
PHILLIP J GRIGG 35 RUNNING BROOK RD BRIDGEWATER, NJ 08807 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 355.34	Payroll Deduction	31.16 ($15.58 Biweekly)
F. 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
CHER R ZUCKER-MALTESE 48 PHILHOWER ROAD LEBANON, NJ 08833 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 297.47	Payroll Deduction	26.16 ($13.08 Biweekly)
G. 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
Jeanette Pollock 27 Martinsville Rd Liberty Corner, NJ 07938 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 320.82	Payroll Deduction	27.88 ($13.94 Biweekly)

SUBTOTAL of Receipts This Page (optional)	164.68
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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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 committees.

NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
Edward Price 49 North Baums Court Livingston, NJ 07039 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 575.00	Payroll Deduction	50.00 ($25.00 Biweekly)
B. Full Name, Mailing Address and ZIP Code PETER P BEGANS 1608 CHARNITA CT VIENNA, VA 22182 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 264.43	Payroll Deduction	25.04 ($12.52 Biweekly)
C. Full Name, Mailing Address and ZIP Code JOSEPH L BRESCHER 251 RIDGE ROAD WATCHUNG, NJ 07060 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 288.69	Payroll Deduction	26.88 ($12.83 Biweekly)
D. Full Name, Mailing Address and ZIP Code KENNETH J TYMINSKI 21 PHILLIPS ROAD NEWTON, NJ 07860 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 694.45	Payroll Deduction	32.70 ($16.35 Biweekly)
E. Full Name, Mailing Address and ZIP Code DEBORAH A BELLO 26 SANDALWOOD DRIVE WARREN, NJ 07059 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 392.35	Payroll Deduction	18.90 ($9.45 Biweekly)
F. Full Name, Mailing Address and ZIP Code STEVEN N WLODYCHAK 166 HICKORY TAVERN RD GILLETTE, NJ 07933 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 246.86	Payroll Deduction	21.62 ($10.81 Biweekly)
G. Full Name, Mailing Address and ZIP Code Jjoseph Frankel 19 Hampton Road Eatontown, NJ 07724 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 915.63	Payroll Deduction	79.62 ($39.81 Biweekly)

SUBTOTAL of Receipts This Page (optional)	253.74
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
EDWARD H WILSON 48 JENNIFER DR RED BANK, NJ 07701 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 281.75	Payroll Deduction	24.60 ($12.25 Biweekly)
B. Full Name, Mailing Address and ZIP Code NEIL N JASEY 9 KEASBEY ROAD SOUTH ORANGE, NJ 07079 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 933.34	Payroll Deduction	81.16 ($40.58 Biweekly)
C. Full Name, Mailing Address and ZIP Code LESTER F LOCKWOOD 45 LAURELWOOD DRIVE ROCKAWAY, NJ 07866 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 290.70	Payroll Deduction	27.30 ($13.65 Biweekly)
D. Full Name, Mailing Address and ZIP Code MARY C URSANO 17 AUTUMN LANE FREEHOLD, NJ 07728 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 221.44	Payroll Deduction	19.92 ($9.96 Biweekly)
E. Full Name, Mailing Address and ZIP Code STEVEN G VITTORIO 31 BASE RD DENVILLE, NJ 07834 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 247.67	Payroll Deduction	23.46 ($11.73 Biweekly)
F. Full Name, Mailing Address and ZIP Code KENNETH L DAVIS 6360 N GLACIER LANE MAPLE GROVE, MN 55311 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 276.60	Payroll Deduction	24.22 ($12.11 Biweekly)
G. Full Name, Mailing Address and ZIP Code FRED H FUNK 15 NALRON DRIVE LEDGEWOOD, NJ 07852 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 275.33	Payroll Deduction	24.30 ($12.15 Biweekly)

SUBTOTAL of Receipts This Page (optional) 224.86

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

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
SUSAN L BLOUNT 235 LONGWOOD AVE CHATHAM, NJ 07928 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 393.76	Payroll Deduction	34.24 ($17.12 Biweekly)
B. Full Name, Mailing Address and ZIP Code THOMAS G O HARA 8416 BROOK ROAD MCLEAN, VA 22102 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 865.21	Payroll Deduction	49.42 ($24.71 Biweekly)
C. Full Name, Mailing Address and ZIP Code JOYCE R LEIBOWITZ 95 HURON DR CHATHAM TWSP, NJ 07928 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 521.61	Payroll Deduction	46.74 ($23.37 Biweekly)
D. Full Name, Mailing Address and ZIP Code KIERAN J QUINN 161 W HAZELWOOD AV RAHWAY, NJ 07065 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 336.26	Payroll Deduction	29.24 ($14.62 Biweekly)
E. Full Name, Mailing Address and ZIP Code JAMES A TOLLIVER 12 BEAVER RIDGE ROAD MORRIS PLAINS, NJ 07950 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 375.97	Payroll Deduction	32.98 ($16.49 Biweekly)
F. Full Name, Mailing Address and ZIP Code SHARON C TAYLOR 7 ORCHARD COURT MONTCLAIR, NJ 07042 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 363.43	Payroll Deduction	32.96 ($16.49 Biweekly)
G. Full Name, Mailing Address and ZIP Code Martin Lawlor 7 Bedford Place Morristown, NJ 07960 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 227.00	Payroll Deduction	20.00 ($10.00 Biweekly)

SUBTOTAL of Receipts This Page (optional) 245.60

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SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
STUART L LIEBESKIND 24 PITNEY COURT BASKING RIDGE, NJ 07920 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 323.88	Payroll Deduction	28.36 ($14.18 Biweekly)
B. Full Name, Mailing Address and ZIP Code JOHN J BARILLA 8 BEECH DRIVE MORRIS PLAINS, NJ 07950 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 227.15	Payroll Deduction	20.00 ($10.00 Biweekly)
C. Full Name, Mailing Address and ZIP Code TERRY J HARTZEL 1507 HARMON COVE TOWERS SECAUCUS, NJ 07094 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 397.86	Payroll Deduction	32.88 ($16.44 Biweekly)
D. Full Name, Mailing Address and ZIP Code PAUL F BLINN 1 OAK STREET MATAWAN, NJ 07747 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 230.77	Payroll Deduction	21.38 ($10.69 Biweekly)
E. Full Name, Mailing Address and ZIP Code JAMES J AVERY 19 REVERE CT PRINCETON JCT, NJ 08550 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 652.65	Payroll Deduction	57.70 ($28.85 Biweekly)
F. Full Name, Mailing Address and ZIP Code DAVID M BALDERSTON 28 COLONY DRIVE SUMMIT, NJ 07901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 234.15	Payroll Deduction	20.76 ($10.38 Biweekly)
G. Full Name, Mailing Address and ZIP Code BEVERLY R BARNEY 5993 N DEER RUN RD DOYLESTOWN, PA 18901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 619.35	Payroll Deduction	32.12 ($16.06 Biweekly)

SUBTOTAL of Receipts This Page (optional)	213.28
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
ANNE E BOSSI 31 STONELEIGH PARK WESTFIELD, NJ 07090 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 546.25	Payroll Deduction	47.60 ($23.75 Biweekly)
B. Full Name, Mailing Address and ZIP Code LOUIS S SHUNTICH 58 PONDEROSA DR HOLLAND, PA 18966 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 288.40	Payroll Deduction	25.60 ($12.80 Biweekly)
C. Full Name, Mailing Address and ZIP Code THOMAS G MYERS 9 STONEHENGE DR HOLMDEL, NJ 07733 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 306.71	Payroll Deduction	23.29 ($13.70 Biweekly)
D. Full Name, Mailing Address and ZIP Code JAMES A TIGNANELLI 10 PEACHTREE LANE HOLMDEL, NJ 07733 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 373.75	Payroll Deduction	32.50 ($16.25 Biweekly)
E. Full Name, Mailing Address and ZIP Code LEWIS R HOOD 227 C COLUMBUS DR JERSEY CITY, NJ 07302 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 352.82	Payroll Deduction	31.16 ($15.58 Biweekly)
F. Full Name, Mailing Address and ZIP Code MARK R FETTING 11530 FALLS ROAD LUTHERVILLE, MD 21093 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 3,150.92	Payroll Deduction	132.70 ($66.35 Biweekly)
G. Full Name, Mailing Address and ZIP Code MICHAEL R SHAPIRO 22 BROOKSIDE TERRACE NORTH CALDWELL, NJ 07006 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 549.44	Payroll Deduction	31.16 ($15.58 Biweekly)

SUBTOTAL of Receipts This Page (optional) 323.91

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. 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
ROGER S PRATT 35 NORMANDY COURT BASKING RIDGE, NJ 07920 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 209.48	Payroll Deduction	21.26 ($10.63 Biweekly)
B. Full Name, Mailing Address and ZIP Code JOHN M LIFTIN 26 EAST 22ND ST NEW YORK, NY 10010 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation $ 450.00	Date (month, day, year) Payroll Deduction	100.00 ($50.00 Biweekly)
C. Full Name, Mailing Address and ZIP Code THOMAS W CRAWFORD 2406 SYLVAN DRIVE POINT PLEASANT, NJ 08742 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 1,432.84	Payroll Deduction	134.33 ($67.31 Biweekly)
D. Full Name, Mailing Address and ZIP Code NEVA A FELTON-SMITH 94 HAINES AVENUE PISCATAWAY, NJ 08854 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 297.24	Payroll Deduction	27.60 ($13.80 Biweekly)
E. Full Name, Mailing Address and ZIP Code JACK O RICHARDSON 132 CHERRY LA DOYLESTOWN, PA 18901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 205.60	Payroll Deduction	18.18 ($9.09 Biweekly)
F. Full Name, Mailing Address and ZIP Code JAMES P WOLF 8485 RIVER LAKE DR ROSWELL, GA 30075 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 288.04	Payroll Deduction	25.44 ($12.72 Biweekly)
G. Full Name, Mailing Address and ZIP Code RSCOTT MC CLESTER 3 PUDDINGSTONE WAY FLORHAM PARK, NJ 07932 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 326.37	Payroll Deduction	28.70 ($14.35 Biweekly)

SUBTOTAL of Receipts This Page (optional) 355.51

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NAME OF COMMITTEE (in Full)
The Prudential Insurance Company of America 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
A. JAMES A YOAKUM 382 MORRIS AVE UNIT C-1 SUMMIT, NJ 07901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 353.74	Payroll Deduction	30.76 ($15.38 Biweekly)
B. DAN M DEGOOD 11 JARRETT COURT PRINCETON JUNCTION, NJ 08550 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 230.00	Payroll Deduction	20.00 ($10.00 Biweekly)
C. GREGORY M MILLS 11 CAYUGA WAY BASKING RIDGE, NJ 07920 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 460.00	Payroll Deduction	40.00 ($20.00 Biweekly)
D. Kevin R Wagner 3825 Berwick Island Drive Jacksonville, FL 32224 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 220.00	Payroll Deduction	25.00 ($0.00 Biweekly)
E. SUZANNE T MARQUARD 404 STERLING PLACE BROOKLYN, NY 11238 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 801.10	Payroll Deduction	33.06 ($16.64 Biweekly)
F. TIMOTHY E FEIGE 30 BATTLEBROOK LANE PRINCETON, NJ 08540 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 1,778.13	Payroll Deduction	84.52 ($42.31 Biweekly)
G. DAVID A TWARDOCK 90 WHITTREDGE RD SUMMIT, NJ 07901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	The Prudential Insurance Company of America Insurance Executive $ 862.50	Payroll Deduction	75.00 ($37.50 Biweekly)
		SUBTOTAL of Receipts This Page (optional)	308.46
		TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11 a I

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code DENNIS R KINZIG 20 HILLCREST WAY BASKING RIDGE, NJ 07920 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive Aggregate Year-to-Date $ 929.68	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 69.62 ($34.81 Biweekly)
B. Full Name, Mailing Address and ZIP Code SUSANNE F SULLIVAN 2 EDGEHILL AVENUE CHATHAM, NJ 07928 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive Aggregate Year-to-Date $ 211.10	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 18.78 ($9.39 Biweekly)
C. Full Name, Mailing Address and ZIP Code MARK J DONAHUE 2374 WIGAN COURT HIGHLANDS RANCH, CO 80126 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive Aggregate Year-to-Date $ 269.79	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 23.46 ($11.73 Biweekly)
D. Full Name, Mailing Address and ZIP Code BRYN T DOUDS 10 DORCHESTER ROAD SUMMIT, NJ 07901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive Aggregate Year-to-Date $ 271.64	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 23.35 ($11.68 Biweekly)
E. Full Name, Mailing Address and ZIP Code DOUGLAS L NELSON 285 LITTLE YORK MILFORD, NJ 08848 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive Aggregate Year-to-Date $ 207.07	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 16.24 ($8.12 Biweekly)
F. Full Name, Mailing Address and ZIP Code CHRYSTAL L VEAZEY-WATSON 66 ORTON ROAD WEST CALDWELL, NJ 07006 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive Aggregate Year-to-Date $ 301.34	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 26.86 ($13.43 Biweekly)
G. Full Name, Mailing Address and ZIP Code GEORGE T COLEMAN 81 VICTORIA DRIVE BASKING RIDGE, NJ 07920 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer The Prudential Insurance Company of America Occupation Insurance Executive Aggregate Year-to-Date $ 352.07	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 30.98 ($15.49 Biweekly)

SUBTOTAL of Receipts This Page (optional) 211.85

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 18 OF 20
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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BERNARD V PETERSON 605 DORIAN ROAD WESTFIELD, NJ 07090	The Prudential Insurance Company of America	Payroll Deduction	31.92 ($15.96 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > $ 362.73	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES W CASSITY 3510 ALCORN BEND DRIVE SUGAR LAND, TX 77478	The Prudential Insurance Company of America	Payroll Deduction	48.08 ($24.04 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > $ 553.92	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICHARD D STEWART 4521 GATESIDE LANE MARIETTA, GA 30067	The Prudential Insurance Company of America	Payroll Deduction	34.62 ($17.31 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > $ 398.63	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BOB J STUTZMAN 705 MERRITT CT NAPERVILLE, IL 60540	The Prudential Insurance Company of America	Payroll Deduction	61.54 ($30.77 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > $ 707.71	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KENNETH W JANDA 2202 ROYAL ADELAIDE DR. KATY, TX 77450	The Prudential Insurance Company of America	Payroll Deduction	24.42 ($12.21 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > $ 276.48	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C R JOHNSON 17014 SANDESTINE DRIVE HOUSTON, TX 77095	The Prudential Insurance Company of America	Payroll Deduction	16.94 ($8.47 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > $ 216.76	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GABRIELLA E MORRIS 1 BRENTWOOD COURT BASKING RIDGE, NJ 07920	The Prudential Insurance Company of America	Payroll Deduction	26.92 ($13.46 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive	Aggregate Year-to-Date > $ 309.59	

SUBTOTAL of Receipts This Page (optional)	249.44
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11 a I

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT L SMITH 1719 TYPHOON SAN ANTONIO, TX 78248	The Prudential Insurance Company of America Occupation Insurance Executive	Payroll Deduction	25.42 ($14.71 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 332.66		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SANDRA A BOEN 9325 CTY RD 116 CORCORAN, MN 55340	The Prudential Insurance Company of America Occupation Insurance Executive	Payroll Deduction	22.76 ($11.38 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 256.11		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BONNIE J MC AREAVY 63 COUNTEY SQUIRE WAY BRANCHBURG, NJ 08876	The Prudential Insurance Company of America Occupation Insurance Executive	Payroll Deduction	28.84 ($14.42 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 669.16		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KATHLEEN A HAYCRAFT 4011 ALCORN BEND DR SUGAR LAND, TX 77479	The Prudential Insurance Company of America Occupation Insurance Executive	Payroll Deduction	19.18 ($9.59 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 216.52		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rstephen Wright 15 Pheasant Run Kinnelon, NJ 07405	The Prudential Insurance Company of America Occupation Insurance Executive	Payroll Deduction	35.86 ($17.93 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 407.01		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEPHEN C PARKER 284 CLAREMONT AVE VERONA, NJ 07044	The Prudential Insurance Company of America Occupation Insurance Executive	Payroll Deduction	25.98 ($12.99 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 295.54		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANDREW R DOWNS 208 N GERONA AVE SAN GABRIEL, CA 91775	The Prudential Insurance Company of America Occupation	Payroll Deduction	20.00 ($10.00 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 220.00		

SUBTOTAL of Receipts This Page (optional)	162.04
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11 a I

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANN C NEUMANN 601 CRATER CAMP DR. CALABASAS, CA 91302	The Prudential Insurance Company of America	Payroll Deduction	16.02 ($8.01 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 204.46		
B. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
KALMAN J KETZLACH 3 FAIRWAY DRIVE GREEN BROOK, NJ 08812	The Prudential Insurance Company of America	Payroll Deduction	83.84 ($41.92 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 884.19		
C. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
RICHARD E MEADE 15 WOODHILL DRIVE MAPLEWOOD, NJ 07040	The Prudential Insurance Company of America	Payroll Deduction	80.76 ($40.38 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 1,748.58		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
ROBERT B LIKINS 15 WOODCREST AVE SHORT HILLS, NJ 07078	The Prudential Insurance Company of America	Payroll Deduction	33.46 ($16.73 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 457.65		
E. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
DIANNE L KROPP 7911 BEVERLY HILL ST HOUSTON, TX 77063	The Prudential Insurance Company of America	Payroll Deduction	25.92 ($13.46 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 309.53		
F. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
KEITH Y MIYAHIRA IVY TRAIL APTS #13086 CHESAPEAKE, VA 23320	The Prudential Insurance Company of America	Payroll Deduction	31.82 ($15.91 Biweekly)
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Insurance Executive		
	Aggregate Year-to-Date > $ 368.93		
G. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	274.82
TOTAL This Period (last page this line number only)	11,539.81

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 13

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code City National Bank 900 Broad Street Newark, NJ 07102	Name of Employer Occupation	Date (month, day, year) 10/27/95	Amount of Each Receipt this Period 50,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 50,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	50,000.00
TOTAL This Period (last page this line number only)	50,000.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code First Union National Bank 765 Broad Street Office Newark, NJ 07102	Purpose of Disbursement 10/98 Service Fee Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 8.00
B. Full Name, Mailing Address and ZIP Code First Union National Bank 765 Broad Street Office Newark, NJ 07102	Purpose of Disbursement 10/98 Service Fee Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/13/98	Amount of Each Disbursement This Period 8.42
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
SUBTOTAL of Disbursements This Page (optional)			16.42
TOTAL This Period (last page this line number only)			16.42

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 6
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Jefferson Committee PO Box 77137 Washington, DC 20013	William J. Jefferson, U.S. HOUSE 2nd LA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hoosiers for Tim Roemer P.O. Box 4400 South Bend, IN 46634	Tim Roemer, U.S. HOUSE 3rd IN Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ellen Tauscher for Congress 1270 Springbrook Road Walnut Creek, CA 94596	Ellen Tauscher, U.S. HOUSE 10th CA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/15/98	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Reelect Ed Towns 442 New Jersey Ave, SE Washington, DC 20003	Edolphus Towns, U.S. HOUSE 10th NY Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/15/98	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Evan Bayh for U.S. Senate 1 North Capitol Suite 200 Indianapolis, IN 46204	Evan Bayh, U.S. SENATE IN Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Andrews for Congress Committee Box 286 Oaklyn, NJ 08107	Robert E. Andrews, U.S. HOUSE 1st NJ Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Don Payne for Congress P.O. Box 20408 Newark, NJ 07114	Donald M. Payne, U.S. HOUSE 10th NJ Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Heather Wilson for Congress 8400 San Mateo Street Suite G Albuquerque, NM 87109	Heather Wilson, U.S. HOUSE 1st NM Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/19/98	1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Campbell Victory Fund P.O. Box 480168 Denver, CO 80248	Ben Nighthorse Campbell, U.S. SENATE CO Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	3,000.00

SUBTOTAL of Disbursements This Page (optional)	9,000.00
TOTAL This Period (last page this line number only)	

FEC Form 3 (2/94)

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 6
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Freedom Project 111 C Street, SE Washington, DC 20002	Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	10/27/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Leadership 2000 3517 S Street N.W. Washington, DC 20007	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code ViewPAC 1156 21st Street N.W. Washington, DC 20036	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Women's Victory Fund 430 South Capitol St. S.E. Washington, DC 20003	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 1,500.00
E. Full Name, Mailing Address and ZIP Code John Breaux for Senate Committee P.O. Box 4042 Baton Rouge, LA 70821	Purpose of Disbursement John B. Breaux, U.S. SENATE LA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code A Lot of People Supporting Tom Daschle 424 C Street, N.E. First Floor Washington, DC 20002	Purpose of Disbursement Thomas A. Daschle, U.S. SENATE SD Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Faircloth for Senate 3901 Barrett Drive Suite 300 Raleigh, NC 27609	Purpose of Disbursement Lauch Faircloth, U.S. SENATE NC Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code Friends of Blanche Lincoln P.O. Box 3197 Little Rock Ar 72203,	Purpose of Disbursement Blanche Lincoln, U.S. SENATE AR Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 2,000.00
I. Full Name, Mailing Address and ZIP Code Don Benton for Congress 16313 North East Leaper Road Vancouver, WA 98686	Purpose of Disbursement Don Benton, U.S. HOUSE 3rd WA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 250.00

SUBTOTAL of Disbursements This Page (optional)	9,750.00
TOTAL This Period (last page this line number only)	

4-00173

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of John Boehner 6862 Cincinnati-Dayton Road West Chester, OH 45069-0189	John A. Boehner, U.S. HOUSE 8th OH Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Bill Clay P.O. Box 1630 Washington, DC 20013	Purpose of Disbursement William L. Clay, U.S. HOUSE 1st MO Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Peter Deutsch for Congress P.O. Box 817689 Hollywood, FL 33081	Purpose of Disbursement Peter Deutsch, U.S. HOUSE 20th FL Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code Fowler for Congress P.O. Box 330087 Jacksonville, FL 32205	Purpose of Disbursement Tillie K. Fowler, U.S. HOUSE 4th FL Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 500.00
E. Full Name, Mailing Address and ZIP Code Bob Franks for Congress P.O. Box 681 New Providence, NJ 07974	Purpose of Disbursement Bob Franks, U.S. HOUSE 7th NJ Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Gutknecht for U.S. Congress P.O. Box 6428 Rochester, MN 55903	Purpose of Disbursement Gil Gutknecht, U.S. HOUSE 1st MN Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 250.00
G. Full Name, Mailing Address and ZIP Code Darlene Hooley for Congress P.O. Box 2050 SalemLINN, OR 97308	Purpose of Disbursement Darlene Hooley, U.S. HOUSE 5th OR Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 500.00
H. Full Name, Mailing Address and ZIP Code Nancy Johnson for Congress P.O. Box 1988 New Britain, CT 06050	Purpose of Disbursement Nancy L. Johnson, U.S. HOUSE 6th CT Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 1,000.00
I. Full Name, Mailing Address and ZIP Code Kildee for Congress Committee 4425 South Saginaw Flint, MI 48507	Purpose of Disbursement Dale E. Kildee, U.S. HOUSE 9th MI Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 500.00

SUBTOTAL of Disbursements This Page (optional)	6,750.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 4 OF 6
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

The Prudential Insurance Company of America Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Knollenberg for Congress 27887 Orchard Lake Road Farmington Hills, MI 48334	Joe Knollenberg, U.S. HOUSE 11th MI Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00
B. Friends of Congressman Bob Livingston 5153 General De Gaulle Drive, Suite 210 New Orleans, LA 70131	Bob Livingston, U.S. HOUSE 1st LA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	1,000.00
C. Menendez for Congress P.O. Box 848 Union City, NJ 07087	Robert Menendez, U.S. HOUSE 13th NJ Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00
D. Juanita McDonald for Congress 21639 S Avalon Blvd #174 Carson, CA 90745	Juanita Millender-McDonald, U.S. HOUSE 37th CA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00
E. Pappas for Congress 3616 Route 22 West Somerville, NJ 08876	Mike Pappas, U.S. HOUSE 12th NJ Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	1,000.00
F. Friends of Cliff Stearns P.O. Box 308 Silver Springs, FL 34489-0986	Clifford B. Stearns, U.S. HOUSE 6th FL Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00
G. John Sweeney for Congress P.O. Box 4137 Clifton Parks, NY 12065	John Sweeney, U.S. HOUSE 22nd NY Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00
H. Peter Torkildsen for Congress P.O. Box 398 Danvers, MA 01832	Peter Torkildsen, U.S. HOUSE 6th MA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00
I. Mel Watt for Congress Committee 515 N POPLAR ST CHARLOTTE, NC 28202	Melvin Watt, U.S. HOUSE 12th NC Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00

SUBTOTAL of Disbursements This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 5 OF 5

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. ACLI Life PAC 1001 Pennsylvania Avenue, N.W. Washington, DC 20004-2599	Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	10/27/98	6,000.00
B. Democratic Senatorial Campaign Committee 430 South Capitol Street, SE Washington, DC 20003	Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	10/27/98	6,000.00
C. Committee for the Preservation Capitalism P.O. Box 22814 Alexandria, VA 22304	Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	10/27/98	2,500.00
D. Lazio for Congress P.O. Box 5063 Bay Shore, NY 11706	Purpose of Disbursement: Rick Lazio, U.S. HOUSE 2nd NY Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	600.00
E. OXLEY FOR CONGRESS 1226 SOUTH MAIN STREET FINDLAY, OH 45840	Purpose of Disbursement: Michael G. Oxley, U.S. HOUSE 4th OH Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	1,500.00
F. Don Payne for Congress P.O. Box 20405 Newark, NJ 07114	Purpose of Disbursement: Donald M. Payne, U.S. HOUSE 10th NJ Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00
G. Jim Ramstad Volunteer Committee 8100 Penn Avenue South, #104 Bloomington, MN 55431	Purpose of Disbursement: Jim Ramstad, U.S. HOUSE 3rd MN Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00
H. Talent for Congress 1031 Executive Parkway St. Louis, MO 63141	Purpose of Disbursement: James M. Talent, U.S. HOUSE 2nd MO Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	1,000.00
I. Bill Thomas Campaign P.O. Box 395 Bakersfield, CA 93302	Purpose of Disbursement: Bill Thomas, U.S. HOUSE 21st CA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00

SUBTOTAL of Disbursements This Page (optional)	17,050.00
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 6 OF 8
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Weller for Congress P.O. Box 37 Joliet, IL 60434	Jerry R. Weller, U.S. HOUSE 11th IL Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/27/98	500.00
B. Full Name, Mailing Address and ZIP Code McCain for Senate '98 1130 East Missouri Street Suite 112 Phoenix, AZ 85014	Purpose of Disbursement John McCain, U.S. SENATE AZ Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/28/98	Amount of Each Disbursement This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of John Boehner 8862 Cincinnati-Dayton Road West Chester, OH 45069-4189	Purpose of Disbursement Voided Check - Returned Uncashed Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/30/98	Amount of Each Disbursement This Period -1,000.00
D. Full Name, Mailing Address and ZIP Code Freedom Project 111 C Street, SE Washington, DC 20002	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	Date (month, day, year) 10/30/98	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Bob Schaffer For Congress P.O. Box 1929 Fort Collins, CO 80522	Purpose of Disbursement Bob Schaffer, U.S. HOUSE 4th CO Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/30/98	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code Don Chairez for Congress 4385 South Eatsern Avenue Las Vegas, NV 89119	Purpose of Disbursement Don Chairez, U.S. HOUSE 1st NV Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/30/98	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code Peter Torkildsen for Congress P.O. Box 395 Danvers, MA 01932	Purpose of Disbursement Voided Check - Returned Unashed Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 11/12/98	Amount of Each Disbursement This Period -500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	49,050.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 36

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NAME OF COMMITTEE (in Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code City National Bank of New Jersey 900 Broad Street Newark, NJ 07102	Purpose of Disbursement 11/98 Loan payment Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/16/98	Amount of Each Disbursement This Period 3,481.67
B. Full Name, Mailing Address and ZIP Code City National Bank of New Jersey 900 Broad Street Newark, NJ 07102	Purpose of Disbursement 11/98 Loan Payment Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/16/98	Amount of Each Disbursement This Period 870.30
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	4,351.98
TOTAL This Period (last page this line number only)	4,351.98

4-50173

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

The Prudential Insurance Company of America Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. The Governor Bush Committee 804 Lavaca Suite 1010 Austin, TX 78701	George Bush, GOVERNOR TX Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	2,500.00
B. Lungren for Governor 717 K Street 3rd Floor Sacramento, CA 95814	Dan Lungren, GOVERNOR All CA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	2,000.00
C. Friends of Ross Johnson 18652 MacArthur Boulevard #395 Irvine, CA 92612	Ross Johnson, STATE SENATE CA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	1,000.00
D. Bill Leonard for Assembly 10535 Foothill Boulevard #275 Rancho Cucamonga, CA 91730	Bill Leonard, STATE HOUSE 63rd CA Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/16/98	1,000.00
E. Milligan Campaign P.O.Box 266 Tallahassee, FL 32302	Bob Milligan, COMPTROLLER All FL Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/20/98	500.00
F. Majority '98 719 North Calhoun Street Tallahassee, FL 32303	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	10/20/98	2,000.00
G. John Cosgrove Campaign Fund 201 W. Flagler Street Miami, FL 33130	John Cosgrove, STATE HOUSE 119th FL Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/20/98	250.00
H. Mike Fasano Campaign Fund 6217 Massachusetts Avenue New Port Richey, FL 34653	Michael Fasano, STATE HOUSE 45th FL Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	10/20/98	250.00
I. Senate Majority '98 1032 Wilfred Drive Orlando, FL 32803	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	10/20/98	2,000.00

SUBTOTAL of Disbursements This Page (optional)	11,500.00
TOTAL This Period (last page this line number only)	

FEC 6-00178

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 3

FOR LINE NUMBER 28

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Daryl Jones Campaign Fund 9300 South Dadeland Blvd. #401 Miami, FL 33156	Daryl L. Jones, STATE SENATE FL [ ] Primary [X] General [ ] Other (specify) 1998	10/20/98	250.00
B. Charles Bronson Campaign Fund 1300 Pine Tree Drive Suite 2 Indian Harbor Beach, FL 32937	Charles "Charli Bronson, STATE SENATE FL [ ] Primary [X] General [ ] Other (specify) 1998	10/20/98	250.00
C. Leslie Waters Campaign 7300 Park Street N. Seminole, FL 33777	Leslie Waters, STATE HOUSE 26th FL [ ] Primary [X] General [ ] Other (specify) 1998	10/21/98	500.00
D. Pat Patterson Campaign Fund 386 Lake Charles Road Deland, FL 32724	Pat Patterson, STATE HOUSE 31st FL [ ] Primary [X] General [ ] Other (specify) 1998	10/21/98	250.00
E. Jim Sebesta Campaign Fund 1040 Sanabel Court, N.E. St. Petersburg, FL 33702	Jim Sebesta, STATE HOUSE 20th FL [ ] Primary [X] General [ ] Other (specify) 1998	10/21/98	500.00
F. Louisiana State Democratic Party 263 3rd Street Suite 102 Baton Rouge, LA 70801	Purpose of Disbursement [ ] Primary [ ] General [ ] Other (specify) 1998	10/21/98	1,000.00
G. Florida Democratic Party P.O. Box 1768 Tallahassee, FL 32302	Purpose of Disbursement [ ] Primary [ ] General [ ] Other (specify) 1998	10/27/98	1,000.00
H. Florida Republican Party 719 North Calhoun Street Tallahassee, FL 32302	Purpose of Disbursement [ ] Primary [ ] General [ ] Other (specify) 1998	10/27/98	2,000.00
I. Florida Democratic Party P.O. Box 1789 Tallahassee, FL 32302	Purpose of Disbursement [ ] Primary [ ] General [ ] Other (specify) 1998	10/27/98	1,000.00

SUBTOTAL of Disbursements This Page (optional)	6,750.00
TOTAL This Period (last page this line number only)	

4-00173

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code Oliveira for House Campaign 885 W. Price Rd., Suite 22 Brownsville, TX 78520	Purpose of Disbursement Rene Oliveira, STATE HOUSE 37th TX Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 500.00
B. Full Name, Mailing Address and ZIP Code Averitt for House Committee 6801 Sanger, Suite 199 B Waco, TX 76710	Purpose of Disbursement Kip Averitt, STATE HOUSE 55th TX Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Group Management PAC 4170 Charmichael Court Montgomery, AL 36106	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1998	Date (month, day, year) 10/27/98	Amount of Each Disbursement This Period 5,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	6,000.00
TOTAL This Period (last page this line number only)	24,250.00

SCHEDULE C
(Revised 3/90)

LOANS

Page 1 of 1 for
LINE NUMBER 13
(Use separate schedules for each numbered line)

Name of Committee (In Full)

The Prudential Insurance Company of America Political Action Committee

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
City National Bank of New Jersey 900 Broad Street Newark, NJ 07102	$50,000 - Princp. $ 2,223.54 - Intr	$4351.96	$45,833.34-Prin. $2,038.24-Int.

Election: ☐ Primary ☒ General ☐ Other (specify):

Terms: Date Incurred 10/23/98 Date Due 10/23/99 Interest Rate 8.00%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Amount Guaranteed Outstanding: $
No Guarantors Named for this loan Loan Guaranteed w/ future rcpts.	
2. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Amount Guaranteed Outstanding: $
3. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Amount Guaranteed Outstanding: $

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

Election: ☐ Primary ☐ General ☐ Other (specify):

Terms: Date Incurred _____ Date Due _____ Interest Rate _____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Amount Guaranteed Outstanding: $
2. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Amount Guaranteed Outstanding: $
3. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Amount Guaranteed Outstanding: $

SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page in this line only)	$47,871.58

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FE8AN121

SCHEDULE C-1
Federal Election Commission
Washington, D.C. 20463

Supplementary for Information found on Page 1 of Schedule C

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

NAME OF COMMITTEE (IN FULL)	FEC IDENTIFICATION NUMBER	
The Prudential Insurance Company of America Political aCtion Committee	C00127779	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)	AMOUNT OF LOAN	INTEREST RATE (APR)
City National Bank of New Jersey 900 Broad Street Newark, NJ 07102	$50,000.00	8.000%
	DATE INCURRED OR ESTABLISHED	DATE DUE
	10/23/98	10/23/99

A. Has loan been restructured? [X] No [ ] Yes If yes, date originally incurred: _____

B. If line of credit, amount of this draw: _____ ; total outstanding balance: _____

C. Are other parties secondarily liable for the debt incurred?
[X] No [ ] Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
[X] No [ ] Yes If yes, specify: _____

What is the value of this collateral? _____

Does the lender have a perfected security interest in it? [ ] No [ ] Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?

[ ] No [X] Yes If yes, specify: Future PAC receipts via Payroll Deduction What is the estimated value? $52,223.52

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: 11/98 Location of account: City National Bank of New Jersey

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER
TYPED NAME Peter Sayre SIGNATURE _____ DATE 11/16/98

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.

II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.

III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE	TITLE	DATE
TYPED NAME Stanley Weeks SIGNATURE _____	Senior Vice President	11/19/98

FE6ANG0

PROMISSORY NOTE

[illegible]

References in the shaded area are for Lender's use only and do not limit the applicability of this document to any particular loan or item.

Borrower: Prudential Insurance Company of America, Political Action Committee (TIN: 2281900818)
751 Broad Street
Newark, NJ 07102

Lender: CITY NATIONAL BANK OF NJ
900 BROAD STREET
NEWARK, NJ 07102

Principal Amount: $50,000.00 **Interest Rate: 8.000%** **Date of Note: October 23, 1998**

PROMISE TO PAY. Prudential Insurance Company of America, Political Action Committee ("Borrower") promises to pay to CITY NATIONAL BANK OF NJ ("Lender"), or order, in lawful money of the United States of America, the principal amount of Fifty Thousand & 00/100 Dollars ($50,000.00), together with interest at the rate of 8.000% per annum on the unpaid principal balance from October 23, 1998, until paid in full, together with all applicable fees and expenses.

PAYMENT. Borrower will pay this loan in 12 payments of $4,351.98 each payment. Borrower's first payment is due November 23, 1998, and all subsequent payments are due on the same day of each month after that. Borrower's final payment will be due on October 23, 1999, and will be for all principal, accrued interest, and all other applicable fees and expenses, if any, not yet paid. Payments include principal and interest. The annual interest rate for this Note is computed on a 365/360 basis; that is, by applying the ratio of the annual interest rate over a year of 360 days, multiplied by the outstanding principal balance, multiplied by the actual number of days the principal balance is outstanding. Borrower will pay Lender at Lender's address shown above or at such other place as Lender may designate in writing. Unless otherwise agreed or required by applicable law, payments will be applied first to accrued unpaid interest, then to principal, and any remaining amount to any unpaid collection costs and late charges.

PREPAYMENT. Borrower may pay without penalty all or a portion of the amount owed earlier than it is due. Early payments will not, unless agreed to by Lender in writing, relieve Borrower of Borrower's obligation to continue to make payments under the payment schedule. Rather, they will reduce the principal balance due and may result in Borrower making fewer payments.

DEFAULT. Borrower will be in default if any of the following happens: (a) Borrower fails to make any payment when due. (b) Borrower breaks any promise Borrower has made to Lender, or Borrower fails to comply with or to perform when due any other term, obligation, covenant, or condition contained in this Note or any agreement related to this Note, or in any other agreement or loan Borrower has with Lender. (c) Borrower defaults under any loan, extension of credit, security agreement, purchase or sales agreement, or any other agreement, in favor of any other creditor or person that may materially affect any of Borrower's property or Borrower's ability to repay this Note or perform Borrower's obligations under this Note or any of the Related Documents. (d) Any representation or statement made or furnished to Lender by Borrower or on Borrower's behalf is false or misleading in any material respect either now or at the time made or furnished. (e) Borrower becomes insolvent, a receiver is appointed for any part of Borrower's property, Borrower makes an assignment for the benefit of creditors, or any proceeding is commenced either by Borrower or against Borrower under any bankruptcy or insolvency laws. (f) Any creditor tries to take any of Borrower's property on or in which Lender has a lien or security interest. This includes a garnishment of or levy on any of Borrower's accounts with Lender. (g) Any guarantor dies or any of the other events described in this default section occurs with respect to any guarantor of this Note. (h) A material adverse change occurs in Borrower's financial condition, or Lender believes the prospect of payment or performance of the Indebtedness is impaired. (i) Lender in good faith deems itself insecure.

If any default, other than a default in payment, is curable and if Borrower has not been given a notice of a breach of the same provision of this Note within the preceding twelve (12) months, it may be cured (and no event of default will have occurred) if Borrower, after receiving written notice from Lender demanding cure of such default: (a) cures the default within fifteen (15) days; or (b) if the cure requires more than fifteen (15) days, immediately initiates steps which Lender deems in Lender's sole discretion to be sufficient to cure the default and thereafter continues and completes all reasonable and necessary steps sufficient to produce compliance as soon as reasonably practical.

LENDER'S RIGHTS. Upon default, Lender may declare the entire unpaid principal balance on this Note and all accrued unpaid interest immediately due, without notice, and then Borrower will pay that amount. Upon default, including failure to pay upon final maturity, Lender, at its option, may also, if permitted under applicable law, do one or both of the following: (a) increase the interest rate on this Note 5.000 percentage points, and (b) add any unpaid accrued interest to principal and such sum will bear interest therefrom until paid at the rate provided in this Note (including any increased rate). The interest rate will not exceed the maximum rate permitted by applicable law. Lender may hire or pay someone else to help collect this Note if Borrower does not pay. Borrower also will pay Lender that amount. This includes, subject to any limits under applicable law, Lender's attorneys' fees and Lender's legal expenses whether or not there is a lawsuit, including attorneys' fees and legal expenses for bankruptcy proceedings (including efforts to modify or vacate any automatic stay or injunction), appeals, and any anticipated post-judgment collection services. If not prohibited by applicable law, Borrower also will pay any court costs, in addition to all other sums provided by law. This Note has been delivered to Lender and accepted by Lender in the State of New Jersey. If there is a lawsuit, Borrower agrees upon Lender's request to submit to the jurisdiction of the courts of ESSEX County, the State of New Jersey. Lender and Borrower hereby waive the right to any jury trial in any action, proceeding, or counterclaim brought by either Lender or Borrower against the other. (Initial Here ________) This Note shall be governed by and construed in accordance with the laws of the State of New Jersey.

X

DISHONORED ITEM FEE. Borrower will pay a fee to Lender of $20.00 if Borrower makes a payment on Borrower's loan and the check or preauthorized charge with which Borrower pays is later dishonored.

RIGHT OF SETOFF. Borrower grants to Lender a contractual security interest in, and hereby assigns, conveys, delivers, pledges, and transfers to Lender all Borrower's right, title and interest in and to, Borrower's accounts with Lender (whether checking, savings, or some other account), including without limitation all accounts held jointly with someone else and all accounts Borrower may open in the future, excluding however all IRA and Keogh accounts, and all trust accounts for which the grant of a security interest would be prohibited by law. Borrower authorizes Lender, to the extent permitted by applicable law, to charge or setoff all sums owing on this Note against any and all such accounts.

GENERAL PROVISIONS. Lender may delay or forgo enforcing any of its rights or remedies under this Note without losing them. Borrower and any other person who signs, guarantees or endorses this Note, to the extent allowed by law, waive presentment, demand for payment, protest and notice of dishonor. Upon any change in the terms of this Note, and unless otherwise expressly stated in writing, no party who signs this Note, whether as maker, guarantor, accommodation maker or endorser, shall be released from liability. All such parties agree that Lender may renew or extend (repeatedly and for any length of time) this loan, or release any party or guarantor or collateral; or impair, fail to realize upon or perfect Lender's security interest in the collateral; and take any other action deemed necessary by Lender without the consent of or notice to anyone. All such parties also agree that Lender may modify this loan without the consent of or notice to anyone other than the party with whom the modification is made.

CORPORATE RESOLUTION TO BORROW

[redacted]

References in the shaded area are for Lender's use only and do not limit the applicability of this document to any particular loan or item.

Borrower: Prudential Insurance Company of America, Political Action Committee (TIN: 2261900618)
751 Broad Street
Newark, NJ 07102

Lender: CITY NATIONAL BANK OF NJ
900 BROAD STREET
NEWARK, NJ 07102

I, the undersigned Secretary or Assistant Secretary of Prudential Insurance Company of America, Political Action Committee (the "Corporation"), HEREBY CERTIFY that the Corporation is organized and existing under and by virtue of the laws of the State of New Jersey as a non-profit corporation, with its principal office at 751 Broad Street, Newark, NJ 07102, and is duly authorized to transact business in the State of New Jersey.

I FURTHER CERTIFY that at a meeting of the Directors of the Corporation, duly called and held on October 23, 1998, at which a quorum was present and voting, or by other duly authorized corporate action in lieu of a meeting, the following resolutions were adopted:

BE IT RESOLVED, that any one (1) of the following named officers, employees, or agents of this Corporation, whose actual signatures are shown below:

NAME	POSITION	ACTUAL SIGNATURE
Peter Sayre	Treasurer	X [redacted]

acting for and on behalf of the Corporation and as its act and deed be, and he or she hereby is, authorized and empowered:

Borrow Money. To borrow from time to time from CITY NATIONAL BANK OF NJ ("Lender"), on such terms as may be agreed upon between the Corporation and Lender, such sum or sums of money as in his or her judgment should be borrowed; however, not exceeding at any one time the amount of Fifty Thousand & 00/100 Dollars ($50,000.00), in addition to such sum or sums of money as may be currently borrowed by the Corporation from Lender.

Execute Notes. To execute and deliver to Lender the promissory note or notes, or other evidence of credit accomodations of the Corporation, on Lender's forms, at such rates of interest and on such terms as may be agreed upon, evidencing the sums of money so borrowed or any indebtedness of the Corporation to Lender, and also to execute and deliver to Lender one or more renewals, extensions, modifications, refinancings, consolidations, or substitutions for one or more of the notes, any portion of the notes, or any other evidence of credit accomodations.

Grant Security. To mortgage, pledge, transfer, endorse, hypothecate, or otherwise encumber and deliver to Lender, as security for the payment of any loans or credit accomodations so obtained, any promissory notes so executed (including any amendments to or modifications, renewals, and extensions of such promissory notes), or any other or further indebtedness of the Corporation to Lender at any time owing, however the same may be evidenced, any property now or hereafter belonging to the Corporation or in which the Corporation now or hereafter may have an interest, including without limitation all real property and all personal property (tangible or intangible) of the Corporation. Such property may be mortgaged, pledged, transferred, endorsed, hypothecated, or encumbered at the time such loans are obtained or such indebtedness is incurred, or at any other time or times, and may be either in addition to or in lieu of any property theretofore mortgaged, pledged, transferred, endorsed, hypothecated, or encumbered.

Execute Security Documents. To execute and deliver to Lender the forms of mortgage, deed of trust, pledge agreement, hypothecation agreement, and other security agreements and financing statements which may be submitted by Lender, and which shall evidence the terms and conditions under and pursuant to which such liens and encumbrances, or any of them, are given; and also to execute and deliver to Lender any other written instruments, any chattel paper, or any other collateral, of any kind or nature, which he or she may in his or her discretion deem reasonably necessary or proper in connection with or pertaining to the giving of the liens and encumbrances.

Negotiate Items. To draw, endorse, and discount with Lender all drafts, trade acceptances, promissory notes, or other evidences of indebtedness payable to or belonging to the Corporation in which the Corporation may have an interest, and either to receive cash for the same or to cause such proceeds to be credited to the account of the Corporation with Lender, or to cause such other disposition of the proceeds derived therefrom as they may deem advisable.

Levels of Authority. Notwithstanding any other provision of these Resolutions, the following provisions shall apply with respect to levels of authority: 1.

Further Acts. In the case of lines of credit, to designate additional or alternate individuals as being authorized to request advances thereunder, and in all cases, to do and perform such other acts and things, to pay any and all fees and costs, and to execute and deliver such other documents and agreements, including agreements waiving the right to a trial by jury, as he or she may in his or her discretion deem reasonably necessary or proper in order to carry into effect the provisions of these Resolutions.

BE IT FURTHER RESOLVED, that any and all acts authorized pursuant to these Resolutions and performed prior to the passage of these Resolutions are hereby ratified and approved, that these Resolutions shall remain in full force and effect and Lender may rely on these Resolutions until written notice of his or her revocation shall have been delivered to and received by Lender. Any such notice shall not affect any of the Corporation's agreements or commitments in effect at the time notice is given.

BE IT FURTHER RESOLVED, that the Corporation will notify Lender in writing at Lender's address shown above (or such other addresses as Lender may designate from time to time) prior to any (a) change in the name of the Corporation, (b) change in the assumed business name(s) of the Corporation, (c) change in the management of the Corporation, (d) change in the authorized signer(s), (e) conversion of the Corporation to a new or different type of business entity, or (f) change in any other aspect of the Corporation that directly or indirectly relates to any agreements between the Corporation and Lender. No change in the name of the Corporation will take effect until after Lender has been notified.

(CORPORATION AS USED ON THIS FORM IS DEEMED TO REFER TO THE PRUDENTIAL PAC. Prudential PAC is not a corporation, but has the authority to borrow funds as per agreement with the Federal Election Commission.

I FURTHER CERTIFY that the officer, employee, or agent named above is duly elected, appointed, or employed by or for the Corporation, as the case may be, and occupies the position set opposite the name; that the foregoing Resolutions now stand of record on the books of the Corporation; and that the Resolutions are in full force and effect and have not been modified or revoked in any manner whatsoever. The Corporation has no corporate seal, and therefore, no seal is affixed to this certificate.

BUSINESS LOAN AGREEMENT

Principal	Loan Date	Maturity	Loan No	Call	Collateral	Account	Officer	Initials
$50,000,000	10-29-1998	10-29-1999	700660001				MW	

References in the shaded area are for Lender's use only and do not limit the applicability of this document to any particular loan or item.

Borrower: Prudential Insurance Company of America, Political Action Committee (TIN: 226190061a)
751 Broad Street
Newark, NJ 07102

Lender: CITY NATIONAL BANK OF NJ
900 BROAD STREET
NEWARK, NJ 07102

THIS BUSINESS LOAN AGREEMENT between **Prudential Insurance Company of America, Political Action Committee** ("Borrower") and CITY NATIONAL BANK OF NJ ("Lender") is made and executed on the following terms and conditions. Borrower has received prior commercial loans from Lender or has applied to Lender for a commercial loan or loans and other financial accommodations, including those which may be described on any exhibit or schedule attached to this Agreement. All such loans and financial accommodations, together with all future loans and financial accommodations from Lender to Borrower, are referred to in this Agreement individually as the "Loan" and collectively as the "Loans." Borrower understands and agrees that: (a) in granting, renewing, or extending any Loan, Lender is relying upon Borrower's representations, warranties, and agreements, as set forth in this Agreement; (b) the granting, renewing, or extending of any Loan by Lender at all times shall be subject to Lender's sole judgment and discretion; and (c) all such Loans shall be and shall remain subject to the following terms and conditions of this Agreement.

TERM. This Agreement shall be effective as of October 29, 1998, and shall continue thereafter until all Indebtedness of Borrower to Lender has been performed in full and the parties terminate this Agreement in writing.

DEFINITIONS. The following words shall have the following meanings when used in this Agreement. Terms not otherwise defined in this Agreement shall have the meanings attributed to such terms in the Uniform Commercial Code. All references to dollar amounts shall mean amounts in lawful money of the United States of America.

Agreement. The word "Agreement" means this Business Loan Agreement, as this Business Loan Agreement may be amended or modified from time to time, together with all exhibits and schedules attached to this Business Loan Agreement from time to time.

Borrower. The word "Borrower" means Prudential Insurance Company of America, Political Action Committee. The word "Borrower" also includes, as applicable, all subsidiaries and affiliates of Borrower as provided below in the paragraph titled "Subsidiaries and Affiliates."

CERCLA. The word "CERCLA" means the Comprehensive Environmental Response, Compensation, and Liability Act of 1980, as amended.

Collateral. The word "Collateral" means and includes without limitation all property and assets granted as collateral security for a Loan, whether real or personal property, whether granted directly or indirectly, whether granted now or in the future, and whether granted in the form of a security interest, mortgage, deed of trust, assignment, pledge, chattel mortgage, chattel trust, factor's lien, equipment trust, conditional sale, trust receipt, lien, charge, lien or title retention contract, lease or consignment intended as a security device, or any other security or lien interest whatsoever, whether created by law, contract, or otherwise.

ERISA. The word "ERISA" means the Employee Retirement Income Security Act of 1974, as amended.

Event of Default. The words "Event of Default" mean and include without limitation any of the Events of Default set forth below in the section titled "EVENTS OF DEFAULT."

Grantor. The word "Grantor" means and includes without limitation each and all of the persons or entities granting a Security Interest in any Collateral for the Indebtedness, including without limitation all Borrowers granting such a Security Interest.

Guarantor. The word "Guarantor" means and includes without limitation each and all of the guarantors, sureties, and accommodation parties in connection with any Indebtedness.

Indebtedness. The word "Indebtedness" means and includes without limitation all Loans, together with all other obligations, debts and liabilities of Borrower to Lender, or any one or more of them, as well as all claims by Lender against Borrower, or any one or more of them; whether now or hereafter existing, voluntary or involuntary, due or not due, absolute or contingent, liquidated or unliquidated; whether Borrower may be liable individually or jointly with others; whether Borrower may be obligated as a guarantor, surety, or otherwise; whether recovery upon such Indebtedness may be or hereafter may become barred by any statute of limitations; and whether such Indebtedness may be or hereafter may become otherwise unenforceable.

Lender. The word "Lender" means CITY NATIONAL BANK OF NJ, its successors and assigns.

Loan. The word "Loan" or "Loans" means and includes without limitation any and all commercial loans and financial accommodations from Lender to Borrower, whether now or hereafter existing, and however evidenced, including without limitation those loans and financial accommodations described herein or described on any exhibit or schedule attached to this Agreement from time to time.

Note. The word "Note" means and includes without limitation Borrower's promissory note or notes, if any, evidencing Borrower's Loan obligations in favor of Lender, as well as any substitute, replacement or refinancing note or notes therefor.

Permitted Liens. The words "Permitted Liens" mean: (a) liens and security interests securing Indebtedness owed by Borrower to Lender; (b) liens for taxes, assessments, or similar charges either not yet due or being contested in good faith; (c) liens of materialmen, mechanics, warehousemen, or carriers, or other like liens arising in the ordinary course of business and securing obligations which are not yet delinquent; (d) purchase money liens or purchase money security interests upon or in any property acquired or held by Borrower in the ordinary course of business to secure Indebtedness outstanding on the date of this Agreement or permitted to be incurred under the paragraph of this Agreement titled "Indebtedness and Liens"; (e) liens and security interests which, as of the date of this Agreement, have been disclosed to and approved by the Lender in writing; and (f) those liens and security interests which in the aggregate constitute an immaterial and insignificant monetary amount with respect to the net value of Borrower's assets.

Related Documents. The words "Related Documents" mean and include without limitation all promissory notes, credit agreements, loan agreements, environmental agreements, guaranties, security agreements, mortgages, deeds of trust, and all other instruments, agreements and documents, whether now or hereafter existing, executed in connection with the Indebtedness.

Security Agreement. The words "Security Agreement" mean and include without limitation any agreements, promises, covenants, arrangements, understandings or other agreements, whether created by law, contract, or otherwise, evidencing, governing, representing, or creating a Security Interest.

Security Interest. The words "Security Interest" mean and include without limitation any type of collateral security, whether in the form of a lien, [illegible] equipment trust, conditional sale, trust receipt,

permitted the filing or attachment of any Security Interests on or affecting any of the Collateral directly or indirectly securing repayment of Borrower's Loan and Note, that would be prior or that may in any way be superior to Lender's Security Interests and rights in and to such Collateral.

Binding Effect. This Agreement, the Note, all Security Agreements directly or indirectly securing repayment of Borrower's Loan and Note and all of the Related Documents are binding upon Borrower as well as upon Borrower's successors, representatives and assigns, and are legally enforceable in accordance with their respective terms.

Commercial Purposes. Borrower intends to use the Loan proceeds solely for business or commercial related purposes.

Employee Benefit Plans. Each employee benefit plan as to which Borrower may have any liability complies in all material respects with all applicable requirements of law and regulations, and (i) no Reportable Event nor Prohibited Transaction (as defined in ERISA) has occurred with respect to any such plan, (ii) Borrower has not withdrawn from any such plan or initiated steps to do so, (iii) no steps have been taken to terminate any such plan, and (iv) there are no unfunded liabilities other than those previously disclosed to Lender in writing.

Location of Borrower's Offices and Records. Borrower's place of business, or Borrower's Chief executive office, if Borrower has more than one place of business, is located at 751 Broad Street, Newark, NJ 07102. Unless Borrower has designated otherwise in writing this location is also the office or offices where Borrower keeps its records concerning the Collateral.

Information. All information heretofore or contemporaneously herewith furnished by Borrower to Lender for the purposes of or in connection with this Agreement or any transaction contemplated hereby is, and all information hereafter furnished by or on behalf of Borrower to Lender will be, true and accurate in every material respect on the date as of which such information is dated or certified; and none of such information is or will be incomplete by omitting to state any material fact necessary to make such information not misleading.

Survival of Representations and Warranties. Borrower understands and agrees that Lender, without independent investigation, is relying upon the above representations and warranties in making the above referenced Loan to Borrower. Borrower further agrees that the foregoing representations and warranties shall be continuing in nature and shall remain in full force and effect until such time as Borrower's indebtedness shall be paid in full, or until this Agreement shall be terminated in the manner provided above, whichever is the last to occur.

AFFIRMATIVE COVENANTS. Borrower covenants and agrees with Lender that, while this Agreement is in effect, Borrower will:

Litigation. Promptly inform Lender in writing of (a) all material adverse changes in Borrower's financial condition, and (b) all existing and all threatened litigation, claims, investigations, administrative proceedings or similar actions affecting Borrower or any Guarantor which could materially affect the financial condition of Borrower or the financial condition of any Guarantor.

Financial Records. Maintain its books and records in accordance with generally accepted accounting principles, applied on a consistent basis, and permit Lender to examine and audit Borrower's books and records at all reasonable times.

Additional Information. Furnish such additional information and statements, lists of assets and liabilities, agings of receivables and payables, inventory schedules, budgets, forecasts, tax returns, and other reports with respect to Borrower's financial condition and business operations as Lender may request from time to time.

Insurance. Maintain fire and other risk insurance, public liability insurance, and such other insurance as Lender may require with respect to Borrower's properties and operations, in form, amounts, coverages and with insurance companies reasonably acceptable to Lender. Borrower, upon request of Lender, will deliver to Lender from time to time the policies or certificates of insurance in form satisfactory to Lender, including stipulations that coverages will not be cancelled or diminished without at least ten (10) days' prior written notice to Lender. Each insurance policy also shall include an endorsement providing that coverage in favor of Lender will not be impaired in any way by any act, omission or default of Borrower or any other person. In connection with all policies covering assets in which Lender holds or is offered a security interest for the Loans, Borrower will provide Lender with such loss payable or other endorsements as Lender may require.

Insurance Reports. Furnish to Lender, upon request of Lender, reports on each existing insurance policy showing such information as Lender may reasonably request, including without limitation the following: (a) the name of the insurer; (b) the risks insured; (c) the amount of the policy; (d) the properties insured; (e) the then current property values on the basis of which insurance has been obtained, and the manner of determining those values; and (f) the expiration date of the policy. In addition, upon request of Lender (however not more often than annually), Borrower will have an independent appraiser satisfactory to Lender determine, as applicable, the actual cash value or replacement cost of any Collateral. The cost of such appraisal shall be paid by Borrower.

Other Agreements. Comply with all terms and conditions of all other agreements, whether now or hereafter existing, between Borrower and any other party and notify Lender immediately in writing of any default in connection with any other such agreements.

Loan Proceeds. Use all Loan proceeds solely for Borrower's business operations, unless specifically consented to the contrary by Lender in writing.

Taxes, Charges and Liens. Pay and discharge when due all of its indebtedness and obligations, including without limitation all assessments, taxes, governmental charges, levies and liens, of every kind and nature, imposed upon Borrower or its properties, income, or profits, prior to the date on which penalties would attach, and all lawful claims that, if unpaid, might become a lien or charge upon any of Borrower's properties, income, or profits. Provided however, Borrower will not be required to pay and discharge any such assessment, tax, charge, levy, lien or claim so long as (a) the legality of the same shall be contested in good faith by appropriate proceedings, and (b) Borrower shall have established on its books adequate reserves with respect to such contested assessment, tax, charge, levy, lien, or claim in accordance with generally accepted accounting practices. Borrower, upon demand of Lender, will furnish to Lender evidence of payment of the assessments, taxes, charges, levies, liens and claims and will authorize the appropriate governmental official to deliver to Lender at any time a written statement of any assessments, taxes, charges, levies, liens and claims against Borrower's properties, income, or profits.

Performance. Perform and comply with all terms, conditions, and provisions set forth in this Agreement and in the Related Documents in a timely manner, and promptly notify Lender if Borrower learns of the occurrence of any event which constitutes an Event of Default under this Agreement or under any of the Related Documents.

Operations. Maintain executive and management personnel with substantially the same qualifications and experience as the present executive and management personnel; provide written notice to Lender of any change in executive and management personnel; conduct its business affairs in a reasonable and prudent manner and in compliance with all applicable federal, state and municipal laws, ordinances, rules and regulations respecting its properties, charters, businesses and operations, including without limitation, compliance with the Americans With Disabilities Act and with all minimum funding standards and other requirements of ERISA and other laws applicable to Borrower's employee benefit plans.

Inspection. Permit employees or agents of Lender at any reasonable time to inspect any and all Collateral for the Loan or Loans and Borrower's other properties and to examine or audit Borrower's books, accounts, and records and to make copies and memoranda of Borrower's books, accounts, and records. If Borrower now or at any time hereafter maintains any records (including without limitation computer generated records

shall not be required to, permit the Guarantor's estate to assume unconditionally the obligations arising under the guaranty in a manner satisfactory to Lender, and, in doing so, cure the Event of Default.

Change in Ownership. Any change in ownership of twenty-five percent (25%) or more of the common stock of Borrower.

Adverse Change. A material adverse change occurs in Borrower's financial condition, or Lender believes the prospect of payment or performance of the Indebtedness is impaired.

Insecurity. Lender, in good faith, deems itself insecure.

Right to Cure. If any default, other than a Default on Indebtedness, is curable and if Borrower or Grantor, as the case may be, has not been given a notice of a similar default within the preceding twelve (12) months, it may be cured (and no Event of Default will have occurred) if Borrower or Grantor, as the case may be, after receiving written notice from Lender demanding cure of such default: (a) cures the default within fifteen (15) days; or (b) if the cure requires more than fifteen (15) days, immediately initiates steps which Lender deems in Lender's sole discretion to be sufficient to cure the default and thereafter continues and completes all reasonable and necessary steps sufficient to produce compliance as soon as reasonably practical.

EFFECT OF AN EVENT OF DEFAULT. If any Event of Default shall occur, except where otherwise provided in this Agreement or the Related Documents, all commitments and obligations of Lender under this Agreement or the Related Documents or any other agreement immediately will terminate and, at Lender's option, all Indebtedness immediately will become due and payable, all without notice of any kind to Borrower, except that in the case of an Event of Default of the type described in the "Insolvency" subsection above, such acceleration shall be automatic and not optional. In addition, Lender shall have all the rights and remedies provided in the Related Documents or available at law, in equity, or otherwise. Except as may be prohibited by applicable law, all of Lender's rights and remedies shall be cumulative and may be exercised singularly or concurrently. Election by Lender to pursue any remedy shall not exclude pursuit of any other remedy, and an election to make expenditures or to take action to perform an obligation of Borrower or of any Grantor shall not affect Lender's right to declare a default and to exercise its rights and remedies.

MISCELLANEOUS PROVISIONS. The following miscellaneous provisions are a part of this Agreement:

Amendments. This Agreement, together with any Related Documents, constitutes the entire understanding and agreement of the parties as to the matters set forth in this Agreement. No alteration of or amendment to this Agreement shall be effective unless given in writing and signed by the party or parties sought to be charged or bound by the alteration or amendment.

Applicable Law. This Agreement has been delivered to Lender and accepted by Lender in the State of New Jersey. If there is a lawsuit, Borrower agrees upon Lender's request to submit to the jurisdiction of the courts of ESSEX County, the State of New Jersey. Lender and Borrower hereby waive the right to any jury trial in any action, proceeding, or counterclaim brought by either Lender or Borrower against the other. (Initial Here [redacted]) This Agreement shall be governed by and construed in accordance with the laws of the State of New Jersey.

Caption Headings. Caption headings in this Agreement are for convenience purposes only and are not to be used to interpret or define the provisions of this Agreement.

Consent to Loan Participation. Borrower agrees and consents to Lender's sale or transfer, whether now or later, of one or more participation interests in the Loans to one or more purchasers, whether related or unrelated to Lender. Lender may provide, without any limitation whatsoever, to any one or more purchasers, or potential purchasers, any information or knowledge Lender may have about Borrower or about any other matter relating to the Loan, and Borrower hereby waives any rights to privacy it may have with respect to such matters. Borrower additionally waives any and all notices of sale of participation interests, as well as all notices of any repurchase of such participation interests. Borrower also agrees that the purchasers of any such participation interests will be considered as the absolute owners of such interests in the Loans and will have all the rights granted under the participation agreement or agreements governing the sale of such participation interests. Borrower further waives all rights of offset or counterclaim that it may have now or later against Lender or against any purchaser of such a participation interest and unconditionally agrees that either Lender or such purchaser may enforce Borrower's obligation under the Loans irrespective of the failure or insolvency of any holder of any interest in the Loans. Borrower further agrees that the purchaser of any such participation interests may enforce its interests irrespective of any personal claims or defenses that Borrower may have against Lender.

Costs and Expenses. Borrower agrees to pay upon demand all of Lender's expenses, including without limitation attorneys' fees, incurred in connection with the preparation, execution, enforcement, modification and collection of this Agreement or in connection with the Loans made pursuant to this Agreement. Lender may pay someone else to help collect the Loans and to enforce this Agreement, and Borrower will pay that amount. This includes, subject to any limits under applicable law, Lender's attorneys' fees and Lender's legal expenses, whether or not there is a lawsuit, including attorneys' fees for bankruptcy proceedings (including efforts to modify or vacate any automatic stay or injunction), appeals, and any anticipated post-judgment collection services. Borrower also will pay any court costs, in addition to all other sums provided by law.

Notices. All notices required to be given under this Agreement shall be given in writing, may be sent by telefacsimile (unless otherwise required by law), and shall be effective when actually delivered or when deposited with a nationally recognized overnight courier or deposited in the United States mail, first class, postage prepaid, addressed to the party to whom the notice is to be given at the address shown above. Any party may change its address for notices under this Agreement by giving formal written notice to the other parties, specifying that the purpose of the notice is to change the party's address. To the extent permitted by applicable law, if there is more than one Borrower, notice to any Borrower will constitute notice to all Borrowers. For notice purposes, Borrower will keep Lender informed at all times of Borrower's current address(es).

No Joint Venture or Partnership. The relationship of Borrower and Lender created by this Agreement is strictly that of debtor-creditor, and nothing contained in this Agreement or in any of the Related Documents shall be deemed or construed to create a partnership or joint venture between Borrower and Lender.

Severability. If a court of competent jurisdiction finds any provision of this Agreement to be invalid or unenforceable as to any person or circumstance, such finding shall not render that provision invalid or unenforceable as to any other persons or circumstances. If feasible, any such offending provision shall be deemed to be modified to be within the limits of enforceability or validity; however, if the offending provision cannot be so modified, it shall be stricken and all other provisions of this Agreement in all other respects shall remain valid and enforceable.

Subsidiaries and Affiliates of Borrower. To the extent the context of any provisions of this Agreement makes it appropriate, including without limitation any representation, warranty or covenant, the word "Borrower" as used herein shall include all subsidiaries and affiliates of Borrower. Notwithstanding the foregoing however, under no circumstances shall this Agreement be construed to require Lender to make any Loan or other financial accommodation to any subsidiary or affiliate of Borrower.

Successors and Assigns. All covenants and agreements contained by or on behalf of Borrower shall bind its successors and assigns and shall inure to the benefit of Lender, its successors and assigns. Borrower shall not, however, have the right to assign its rights under this Agreement or any interest therein, without the prior written consent of Lender.

Survival of Representations and Warranties. All representations, and covenants made by Borrower in this Agreement or in any certificate or other instrument delivered by

NOTICE OF FINAL AGREEMENT

Principal	Loan Date	Maturity	Loan No	Call	Collateral	Account	Officer	Initials
$50,000.00	10-23-1996	10-23-1999	7000000				MSW	

References in the shaded area are for Lender's use only and do not limit the applicability of this document to any particular loan or item.

Borrower: Prudential Insurance Company of America, Political Action Committee (TIN: 2261900618)
751 Broad Street
Newark, NJ 07102

Lender: CITY NATIONAL BANK OF NJ
900 BROAD STREET
NEWARK, NJ 07102

BY SIGNING THIS DOCUMENT EACH PARTY REPRESENTS AND AGREES THAT: (A) THE WRITTEN LOAN AGREEMENT REPRESENTS THE FINAL AGREEMENT BETWEEN THE PARTIES, (B) THERE ARE NO UNWRITTEN ORAL AGREEMENTS BETWEEN THE PARTIES, AND (C) THE WRITTEN LOAN AGREEMENT MAY NOT BE CONTRADICTED BY EVIDENCE OF ANY PRIOR, CONTEMPORANEOUS, OR SUBSEQUENT ORAL AGREEMENTS OR UNDERSTANDINGS OF THE PARTIES.

As used in this Notice, the following terms have the following meanings:

Loan. The term "Loan" means the following described loan: a Fixed Rate (8.000%), Nondisclosable Installment Loan to a Corporation for $50,000.00 due on October 23, 1999.

Parties. The term "Parties" means CITY NATIONAL BANK OF NJ and any and all entities or individuals who are obligated to repay the loan or have pledged property as security for the Loan, including without limitation the following:

Borrower: Prudential Insurance Company of America, Political Action Committee

Loan Agreement. The term "Loan Agreement" means one or more promises, promissory notes, agreements, undertakings, security agreements, deeds of trust or other documents, or commitments, or any combination of those actions or documents, relating to the Loan, including without limitation the following:

NECESSARY FORMS

Corporate Resolution to Borrow
Promissory Note / Change in Terms Agr.
Notice of Final Agreement
Loan Agreement / Negative Pledge
Disbursement Request and Authorization

Each Party who signs below, other than CITY NATIONAL BANK OF NJ, acknowledges, represents, and warrants to CITY NATIONAL BANK OF NJ that it has received, read and understood this Notice of Final Agreement. This Notice is dated October 23, 1996.

BORROWER:

Prudential Insurance Company of America, Political Action Committee

By: _____
Peter Sayre, Treasurer

LENDER:

CITY NATIONAL BANK OF NJ

By: _____
Authorized Officer

DISBURSEMENT REQUEST AND AUTHORIZATION

Principal	Loan Date	Maturity	Loan No	Call	Collateral	Account	Officer	Initials
$50,000.00	10-23-1998	10-23-1999	7006000021				004	

References in the shaded area are for Lender's use only and do not limit the applicability of this document to any particular loan or item.

Borrower: Prudential Insurance Company of America, Political Action Committee (TIN: 226190061B)
761 Broad Street
Newark, NJ 07102

Lender: CITY NATIONAL BANK OF NJ
900 BROAD STREET
NEWARK, NJ 07102

LOAN TYPE. This is a Fixed Rate (8.000%), Installment Loan to a Corporation for $50,000.00 due on October 23, 1999.

PRIMARY PURPOSE OF LOAN. The primary purpose of this loan is for (please initial):

- ☐ _____ Personal, Family or Household Purposes.
- ☐ _____ Personal Investment.
- ☐ _____ Acquire Equipment for Business or Commercial Purposes.
- ☒ _____ Business, Agricultural and All Other.

SPECIFIC PURPOSE. The specific purpose of this loan is: To cover 1998 campaign expenses.

DISBURSEMENT INSTRUCTIONS. Borrower understands that no loan proceeds will be disbursed until all of Lender's conditions for making the loan have been satisfied. Please disburse the loan proceeds of $50,000.00 as follows:

Amount paid to Borrower directly: $50,000.00 Lender's Check # 001892	$50,000.00
Note Principal:	$50,000.00

FINANCIAL CONDITION. BY SIGNING THIS AUTHORIZATION, BORROWER REPRESENTS AND WARRANTS TO LENDER THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT AND THAT THERE HAS BEEN NO MATERIAL ADVERSE CHANGE IN BORROWER'S FINANCIAL CONDITION AS DISCLOSED IN BORROWER'S MOST RECENT FINANCIAL STATEMENT TO LENDER. THIS AUTHORIZATION IS DATED OCTOBER 23, 1998.

BORROWER:

Prudential Insurance Company of America, Political Action Committee

By: _____ (Seal)
Peter Sayre, Treasurer

ATTEST:

_____ (Corporate Seal)
Secretary or Assistant Secretary Treasurer

NOTICE OF FINAL AGREEMENT

Principal	Loan Date	Maturity	Loan No	Call	Collateral	Account	Officer	Initials
$50,000.00	10-23-1996	10-23-1998	0068000				SMW	

References in the shaded area are for Lender's use only and do not limit the applicability of this document to any particular loan or item.

Borrower: Prudential Insurance Company of America, Political Action Committee (TIN: 226190061B)
751 Broad Street
Newark, NJ 07102

Lender: CITY NATIONAL BANK OF NJ
900 BROAD STREET
NEWARK, NJ 07102

BY SIGNING THIS DOCUMENT EACH PARTY REPRESENTS AND AGREES THAT: (A) THE WRITTEN LOAN AGREEMENT REPRESENTS THE FINAL AGREEMENT BETWEEN THE PARTIES, (B) THERE ARE NO UNWRITTEN ORAL AGREEMENTS BETWEEN THE PARTIES, AND (C) THE WRITTEN LOAN AGREEMENT MAY NOT BE CONTRADICTED BY EVIDENCE OF ANY PRIOR, CONTEMPORANEOUS, OR SUBSEQUENT ORAL AGREEMENTS OR UNDERSTANDINGS OF THE PARTIES.

As used in this Notice, the following terms have the following meanings:

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Borrower: Prudential Insurance Company of America, Political Action Committee

Loan Agreement. The term "Loan Agreement" means one or more promises, promissory notes, agreements, undertakings, security agreements, deeds of trust or other documents, or commitments, or any combination of those actions or documents, relating to the Loan, including without limitation the following:

NECESSARY FORMS

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Promissory Note / Change in Terms Agr.
Notice of Final Agreement
Loan Agreement / Negative Pledge
Disbursement Request and Authorization

Each Party who signs below, other than CITY NATIONAL BANK OF NJ, acknowledges, represents, and warrants to CITY NATIONAL BANK OF NJ that it has received, read and understood this Notice of Final Agreement. This Notice is dated October 23, 1996.

BORROWER:

Prudential Insurance Company of America, Political Action Committee

By: [redacted]
Peter Coyne, Treasurer

LENDER:

CITY NATIONAL BANK OF NJ

By: [signature]
Authorized Officer

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 12/4/98
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	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	

M.A.Q. — PREPARER

12/4/98 — DATE PREPARED

(4/98)