

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Massachusetts Mutual Life Insurance Company Political Action Committee

ADDRESS (number and street) 1295 State Street
Check if different than previously reported. (ACC) Springfield MA 01111-0001

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00118943 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 03 / 01 / 2018 through 03 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
C., Bruce, , Mr., Frisbie
Type or Print Name of Treasurer

Signature of Treasurer C., Bruce, , Mr., Frisbie [Electronically Filed] Date 08 / 16 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Massachusetts Mutual Life Insurance Company Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		98617.43
(b) Cash on Hand at Beginning of Reporting Period.....	88601.06	
(c) Total Receipts (from Line 19)	175161.55	305901.92
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	263762.61	404519.35
7. Total Disbursements (from Line 31).....	150921.01	291677.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	112841.60	112841.60
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)	0.00	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Massachusetts Mutual Life Insurance Company Political Action Committee

Report Covering the Period: From: 03 / 01 / 2018 To: 03 / 31 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	146970.66	212390.81
(ii) Unitemized	22342.46	87384.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	169313.12	299775.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	169313.12	299775.64
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	815.01	1005.31
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	33.42	120.97
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	175161.55	305901.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	175161.55	305901.92

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	815.01	1021.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	815.01	1021.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	150000.00	290500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	50.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	50.00
29. Other Disbursements (Including Non-Federal Donations).....	106.00	106.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	150921.01	291677.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	150921.01	291677.75

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	169313.12	299775.64
34. Total Contribution Refunds (from Line 28(d))	0.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	169313.12	299725.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	815.01	1021.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	815.01	1005.31
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	16.44

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

Form/Schedule: F3XA
Transaction ID :

Amending to correctly reflect beginning balances

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Hoopis, Peter, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 740 DEROO LOOP
 City HIGHWOOD State IL Zip Code 60040-2015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2018
Transaction ID : 77351126
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Fakhimi, Robert, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4140 ARBOLADO DR
 City WALNUT CREEK State CA Zip Code 94598-4674
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2018
Transaction ID : 77360930
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Roberts, Brian, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 COALTER RIDGE CT
 City DARDENNE PR State MO Zip Code 63368-7587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2018
Transaction ID : 77361568
 Amount of Each Receipt this Period
 1250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	11250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Somma, Brad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 360 FOREST AVE
 City RYE State NY Zip Code 10580-3611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 03 / 05 / 2018
Transaction ID : 77362030
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. Lee, Brian, Kam Hung, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5728 NEWFIELDS LN
 City DUBLIN State CA Zip Code 94568-8797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 03 / 05 / 2018
Transaction ID : 77362148
 Amount of Each Receipt this Period
 1250.00
 Memo Item

C. Pedigo, Michelle, C, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 Laurel St Apt 1607
 City Nashville State TN Zip Code 37203-4424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Vice President National Sales
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 03 / 05 / 2018
Transaction ID : 77362333
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Porter, David, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 COMMONWEALTH AVE #1
 City BOSTON State MA Zip Code 02116-2520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 06 / 2018
Transaction ID : 77362643
 Amount of Each Receipt this Period 1250.00
 Memo Item

B. Fay, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 ADAMS AVE
 City STATEN ISLAND State NY Zip Code 10306-3403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 06 / 2018
Transaction ID : 77362728
 Amount of Each Receipt this Period 1250.00
 Memo Item

C. Moore, Andrew, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 GONDOLIERS BLF
 City NEWPORT BEACH State CA Zip Code 92657-2128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 06 / 2018
Transaction ID : 77364557
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Corless, Jerry, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9995 BENTWOOD TREE CV
 City COLLIERVILLE State TN Zip Code 38017-9013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2018
Transaction ID : 77366130
 Amount of Each Receipt this Period
 1250.00
 Memo Item

B. Naughton, Brendan, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 GLENMOR DR
 City NEWTOWN State CT Zip Code 06470-1452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2018
Transaction ID : 77366488
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C. Spindt, Eric, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 FEDERAL ST
 City BOSTON State MA Zip Code 02110-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2018
Transaction ID : 77369922
 Amount of Each Receipt this Period
 1250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Straub, Jeremy, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 138 NURMI DR
 City FORT LAUDERDALE State FL Zip Code 33301-1405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 08 / 2018
Transaction ID : 77370623
 Amount of Each Receipt this Period 1250.00
 Memo Item

B. Kahan, Jacob, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1603 50TH ST
 City BROOKLYN State NY Zip Code 11204-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 07 / 2018
Transaction ID : 77400742
 Amount of Each Receipt this Period 1250.00
 Memo Item

C. Fox, Paul, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20138 ENNIS DR
 City STRONGSVILLE State OH Zip Code 44149-0992
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 19 / 2018
Transaction ID : 77423853
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Lingelbach, James, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1640 JERRILYNN PL
 City ENCINITAS State CA Zip Code 92024-4757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2018
Transaction ID : 77424306
 Amount of Each Receipt this Period
 600.00
 Memo Item

B. Bancroft, Lea, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 81 MAIN ST
 City MOUNT MORRIS State NY Zip Code 14510-1235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2018
Transaction ID : 77424391
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. O'Brien, David, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4082 LILLY VUE CT
 City MARS State PA Zip Code 16046-3057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2018
Transaction ID : 77424408
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Gray, Charles, H, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27 Marci Ave

City East Longmeadow	State MA	Zip Code 01028-2683
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Occupation (for Individual) AVP Product Management
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	20	/	2018

Transaction ID : 77435631

Amount of Each Receipt this Period
250.00

Memo Item

B. Holt, Todd, Eugene, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8901 MOUNTBATTEN CIR

City AUSTIN	State TX	Zip Code 78730-3021
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2018

Transaction ID : 77665486

Amount of Each Receipt this Period
2500.00

Memo Item

C. Stillman, Scott, Alan, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5156 S KENTON WAY

City GREENWOOD VLG	State CO	Zip Code 80111-3831
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2018

Transaction ID : 77665487

Amount of Each Receipt this Period
1250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Dileo, Joseph, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 60 GALILEO
 City WILLIAMSVILLE State NY Zip Code 14221-2777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2018
Transaction ID : 7766543
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. Vandersteeg, Russ, Wayne, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7725 CHAPEL RIDGE
 City CORDOVA State TN Zip Code 38016-7897
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2018
Transaction ID : 7766544
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Jimenez, Bellaria, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 ROCKY BROOK RD
 City EAST WINDSOR State NJ Zip Code 08512-3032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2018
Transaction ID : 77670618
 Amount of Each Receipt this Period
 600.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Priede, Michael, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 614 VISTA VIEW TRAIL
 City SPICEWOOD State TX Zip Code 78669-8435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 03 / 16 / 2018
Transaction ID : 77670619
 Amount of Each Receipt this Period
 1250.00
 Memo Item

B. Connole, Michael, Shane, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31865 MILLSIDE LN
 City AVON LAKE State OH Zip Code 44012-2761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 03 / 16 / 2018
Transaction ID : 77670620
 Amount of Each Receipt this Period
 1250.00
 Memo Item

C. Novak, Peter, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ARDSLEY RD
 City LONGMEADOW State MA Zip Code 01106-2504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 03 / 16 / 2018
Transaction ID : 77670621
 Amount of Each Receipt this Period
 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Blum, Gregory, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 FOX MEADOW CT
 City WOODBURY State NY Zip Code 11797-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 16 / 2018
Transaction ID : 77670622
 Amount of Each Receipt this Period 1250.00
 Memo Item

B. Fishman, Harris, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 935 PINE VALLEY CIR
 City RYDAL State PA Zip Code 19046-2556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 29 / 2018
Transaction ID : 77670880
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Book, Michael, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 CRAWFORD RD
 City WESTPORT State CT Zip Code 06880-1824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 28 / 2018
Transaction ID : 77858176
 Amount of Each Receipt this Period 2500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	8750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Scanlon, Sue, J, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 23 Judith Dr

City Manchester	State CT	Zip Code 06040-6517
--------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President - Compliance
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.23

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1120474959017

Amount of Each Receipt this Period
77.78

Memo Item

P/R Deduction (\$38.89 Bi-Weekly)

B. TODD, Andrew, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9997 DELL RD

City EDEN PRAIRIE	State MN	Zip Code 55347-3524
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1135598759017

Amount of Each Receipt this Period
208.34

Memo Item

P/R Deduction (\$104.17 Semi-Monthly)

C. Carmon, Timothy, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 61 Rainbow Trl

City South Windsor	State CT	Zip Code 06074-2953
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President - Risk Management
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
269.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1233812059017

Amount of Each Receipt this Period
76.94

Memo Item

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	363.06
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. SCIACCA, ANTHONY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5619 CHALLISFORD LN

City CHARLOTTE	State NC	Zip Code 28226-2627
-------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
942.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1264218159017

Amount of Each Receipt this Period
269.24

Memo Item

P/R Deduction (\$134.62 Bi-Weekly)

B. GACEVICH, KENNETH, MI, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6515 GREENWAY BEND DR

City CHARLOTTE	State NC	Zip Code 28226-5561
-------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
395.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1264219259017

Amount of Each Receipt this Period
113.00

Memo Item

P/R Deduction (\$56.50 Bi-Weekly)

C. Lucido, Bradley, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65 Rosewood Dr

City Suffield	State CT	Zip Code 06078-2014
------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) SVP Chief Compliance Off & Dep Gen C
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
673.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1285753959017

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	574.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. PRINCE, JEFFREY, T, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 HILLSIDE RD

City NORTHAMPTON	State MA	Zip Code 01060-2119
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1334223459017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. Fanning, Mike, R, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 Colonial Ave

City North Andover	State MA	Zip Code 01845-6349
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) EVP - MassMutual U.S.
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1346.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1360837759017

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. Goldman, Victor, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12030 N 62ND ST

City SCOTTSDALE	State AZ	Zip Code 85254-4953
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
673.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1368736159017

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	653.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. RYAN, PAULA, T, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 RIDGE RD

City SIMSBURY	State CT	Zip Code 06070-2134
------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1391580659017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. Vaccaro, John, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 Anna Marie Ln

City E Longmeadow	State MA	Zip Code 01028-3018
----------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) SVP - MassMutual Financial Network
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
538.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1434639359017

Amount of Each Receipt this Period
153.90

Memo Item

P/R Deduction (\$76.95 Bi-Weekly)

C. COUTU, DAVID, J, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MELLISSA CIR

City GREENVILLE	State RI	Zip Code 02828-1025
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1479403859017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	307.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Putnam, Roger, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 The Glade

City Simsbury	State CT	Zip Code 06070-1041
------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) SVP - Insurance Operations
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
673.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1479403959017

Amount of Each Receipt this Period
192.30

Memo Item

P/R Deduction (\$96.15 Bi-Weekly)

B. OBERG, WILLIAM, D, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 99 POKANOKET LN

City MARSHFIELD	State MA	Zip Code 02050-8238
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1479405059017

Amount of Each Receipt this Period
38.47

Memo Item

P/R Deduction (\$38.47 Bi-Weekly)

C. Russell, Douglas, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 Craigie St

City Cambridge	State MA	Zip Code 02138-3470
-------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Managing Director, Head of MassMutua
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1346.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1500908559017

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	615.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Smith, Cale, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1956 LONGWOOD DR
 City BATON ROUGE State LA Zip Code 70808-1247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1346.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR1500946659017
 Amount of Each Receipt this Period
 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. Jaeggi, Rachel, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29 Hoffmann Rd
 City Canton State CT Zip Code 06019-2151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Vice President - Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR1564484359017
 Amount of Each Receipt this Period
 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. Rasch, Kevin, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 890 Mount Eustis Road
 City Littleton State NH Zip Code 03561-3722
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) VP & Assistant General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 403.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR1569232359017
 Amount of Each Receipt this Period
 115.40
 Memo Item
 P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	577.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. DEBLOIS, WILLIAM, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 JAMESON DR
 City REHOBOTH State MA Zip Code 02769-2039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARINGS LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.50

Date of Receipt 03 / 31 / 2018
Transaction ID : PR1581879959017
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

B. Valle-Yanez, Lorie, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 575 Mountain Rd
 City West Hartford State CT Zip Code 06117-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Vice President - Diversity & Inclusion
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.22

Date of Receipt 03 / 31 / 2018
Transaction ID : PR1606911959017
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. Grossman, Stephen, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 183 MIDLAND AVE
 City MONTCLAIR State NJ Zip Code 07042-3035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR1619191259017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 1403.92
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Orzell, Jennifer, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 44 Westwoods Dr
 City Canton State CT Zip Code 06019-4500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Vice President & Actuary
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 269.22

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR1717732359017
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. SHEAN, Michael, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 427 BONNIE BRAE RD
 City HINSDALE State IL Zip Code 60521-2815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR1727302659017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. STARK, Timothy, Darren, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4402 POMONA RD
 City DALLAS State TX Zip Code 75209-2824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR1728061459017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	243.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Benson, Wendy, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 270 Allerton Commons Ln

City Braintree	State MA	Zip Code 02184-8248
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Occupation (for Individual) Vice President - Wealth Management
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1728095759017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. Griffith, Donald, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 46 Pinewood Dr

City Longmeadow	State MA	Zip Code 01106-1638
--------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President - Compliance
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1779022359017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. Hales, Paul, Reed, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2213 N CORSEY WAY

City EAGLE	State ID	Zip Code 83616-3371
---------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1857134859017

Amount of Each Receipt this Period
1250.00

Memo Item

P/R Deduction (\$1250.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	1403.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Mallee, Joseph, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 414 FALLOWFIELD LN

City HARLEYSVILLE	State PA	Zip Code 19438-1274
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1857135059017

Amount of Each Receipt this Period
1250.00

Memo Item

P/R Deduction (\$1250.00 Semi-Monthly)

B. Kennedy, John, F, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 Andrew Dr

City Canton	State CT	Zip Code 06019-5001
----------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President - Distribution Strategy
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1913873359017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. Corbett, Tim, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 Mountain Spring Rd

City Farmington	State CT	Zip Code 06032-1612
--------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) EVP & Chief Investment Officer
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1346.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR1929995859017

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1711.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Frederick, Christine, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 Emerson Ln

City Granby	State CT	Zip Code 06035-2713
----------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Senior Vice President - Compliance
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1934313159017

Amount of Each Receipt this Period
57.70

Memo Item

P/R Deduction (\$28.85 Bi-Weekly)

B. GOLDSMITH, Daniel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1667 ARONA ST

City SAINT PAUL	State MN	Zip Code 55108-2351
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1934322559017

Amount of Each Receipt this Period
125.00

Memo Item

P/R Deduction (\$65.26 Semi-Monthly)

C. ARRANTS, Berkely, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6036 POST OAK GREEN LN

City HOUSTON	State TX	Zip Code 77055-5500
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR1961263959017

Amount of Each Receipt this Period
125.00

Memo Item

P/R Deduction (\$62.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	307.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. FOWLER, IAN, M, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 301 CHEROKEE RD
 City LAKE FOREST State IL Zip Code 60045-3062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARINGS LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2006647559017
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

B. BOTNER, Ryan, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 57TH AVE S
 City FARGO State ND Zip Code 58104-7215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2006660059017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. Kinigopoulos, George, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3028 SENECA CHIEF TRAIL
 City ELLICOTT CITY State MD Zip Code 21042-1418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2006681459017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	1410.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Shanahan, Daniel, James, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8412 NORMAN ESTATES WAY
 City RALEIGH State NC Zip Code 27613-5963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR2023930759017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

B. HARTUNG, Bret, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4317 N DAMEN AVE
 City CHICAGO State IL Zip Code 60618-1705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR2038720459017
 Amount of Each Receipt this Period 125.00
 Memo Item
 P/R Deduction (\$62.50 Semi-Monthly)

C. MCGEE, DANIEL, J, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10812 ALEXANDER MILL DR
 City CHARLOTTE State NC Zip Code 28277-2701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARINGS LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 403.90

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR2045466559017
 Amount of Each Receipt this Period 115.40
 Memo Item
 P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1490.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Parent, Rachel, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 Pembroke Dr

City Suffield	State CT	Zip Code 06078-2096
------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) CIO - Corporate
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR2052377659017

Amount of Each Receipt this Period
111.12

Memo Item

P/R Deduction (\$55.56 Bi-Weekly)

B. HENDERLONG, MICHAEL, E, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 41 BEAVER CREEK CT

City FAR HILLS	State NJ	Zip Code 07931-2594
-------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR2052379359017

Amount of Each Receipt this Period
77.00

Memo Item

P/R Deduction (\$38.50 Bi-Weekly)

C. Murray, Brady, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 N MATTERHORN DR

City ALPINE	State UT	Zip Code 84004-1890
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR2052389759017

Amount of Each Receipt this Period
1250.00

Memo Item

P/R Deduction (\$1250.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	1438.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. FLYNN, DANIEL, L, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7917 SKYE LOCHS DR

City WAXHAW	State NC	Zip Code 28173-7493
----------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
388.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2106071659017

Amount of Each Receipt this Period
111.12

Memo Item

P/R Deduction (\$55.56 Bi-Weekly)

B. Greene, Daniel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 439 GREENFIELD LN

City PAINESVILLE	State OH	Zip Code 44077-6150
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) Broker
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2154013159017

Amount of Each Receipt this Period
25.00

Memo Item

P/R Deduction (\$0.00 Semi-Monthly)

C. BROWN, SCOTT, DA, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 479 CHESTNUT ST

City WABAN	State MA	Zip Code 02468-1204
---------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
942.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2166460259017

Amount of Each Receipt this Period
269.24

Memo Item

P/R Deduction (\$134.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	405.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Keating, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5458 EGYPT CREEK BLVD
 City ADA State MI Zip Code 49301-9278
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR2192477059017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

B. Acselrod, David, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Burr School Rd
 City Westport State CT Zip Code 06880-3816
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Head of PCG Integration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR2202068959017
 Amount of Each Receipt this Period 70.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. Kochen, Neil, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 Sunny Reach Dr
 City West Hartford State CT Zip Code 06117-1531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSMUTUAL TRUST COMPANY Occupation (for Individual) Vice President, Trust Co. Investments
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 466.90

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR2244918859017
 Amount of Each Receipt this Period 133.40
 Memo Item
 P/R Deduction (\$66.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1453.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Rutley, Jennifer, R, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 Thornton Rd

City Needham	State MA	Zip Code 02492-4330
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Head of MMFA Strategic Research & D
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2345426559017

Amount of Each Receipt this Period
77.00

Memo Item

P/R Deduction (\$38.50 Bi-Weekly)

B. Trask, JEFFREY, AN, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 WELLAND RD

City INDIAN ORCH	State MA	Zip Code 01151-1012
---------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) ENTERPRISE CONTINUITY PLANNIN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2345712959017

Amount of Each Receipt this Period
33.35

Memo Item

P/R Deduction (\$33.35 Bi-Weekly)

C. Huntley, David, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 Hawthorn Rd

City Amherst	State MA	Zip Code 01002-9710
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President - Financial Risk Mgmt
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2345715759017

Amount of Each Receipt this Period
214.30

Memo Item

P/R Deduction (\$107.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	324.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Brigowatz, Greg, Allan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3847 CEDAR CREEK RD
 City SLINGER State WI Zip Code 53086-9797
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2476332759017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

B. Lengyel, Daniel, Scott, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5109 ABBEY GLEN
 City FLOWER MOUND State TX Zip Code 75028-1623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.75

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2476377459017
 Amount of Each Receipt this Period 166.70
 Memo Item
 P/R Deduction (\$0.00 Bi-Weekly)

C. Soltis, Keith, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6 SUMMER DR
 City FREEHOLD State NJ Zip Code 07728-8644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2476445159017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	2666.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Chan, Derek, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 72 HILLCREST AVE
 City ROSLYN State NY Zip Code 11576-2144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2476456159017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

B. Dixon, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2322 HONEYSTONE WAY
 City BROOKEVILLE State MD Zip Code 20833-3215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2476555659017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

C. Naselli, Francis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 BEECH TREE DR
 City GLEN MILLS State PA Zip Code 19342-1790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2476620959017
 Amount of Each Receipt this Period 5000.00
 Memo Item
 P/R Deduction (\$5000.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. THOMPSON, Shannon, A.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 STILLMERE CT
 City WINSTON SALEM State NC Zip Code 27101-2311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 274.42

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2476627959017
 Amount of Each Receipt this Period 25.00
 Memo Item
 P/R Deduction (\$19.15 Semi-Monthly)

B. Kaltenbach, Geoffrey, Lane, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 CALLE MATTIS
 City SAN CLEMENTE State CA Zip Code 92673-7050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 583.45

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2476690259017
 Amount of Each Receipt this Period 166.70
 Memo Item
 P/R Deduction (\$83.35 Bi-Weekly)

C. CUNNINGHAM, Charles, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4211 GROVE AVE
 City WESTERN SPRINGS State IL Zip Code 60558-1347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2476821459017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	275.04
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. DONALDSON, Natalia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 159 OAKESDALE DR
 City BLUFFTON State SC Zip Code 29909-7819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2477740559017
 Amount of Each Receipt this Period 12.50
 Memo Item
 P/R Deduction (\$12.50 Semi-Monthly)

B. Scalese, Frank, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 SAGAMORE DR
 City PLAINVIEW State NY Zip Code 11803-1516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2478087359017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

C. Kurtz, Jeffrey, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33 S 9TH ST
 City COPLAY State PA Zip Code 18037-1313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2478100059017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	2512.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Justin, Paul, R.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13742 PASEO VALLE ALTO
 City POWAY State CA Zip Code 92064-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2478122959017
 Amount of Each Receipt this Period
 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

B. Sherman, Renee, S, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Daria Dr
 City Bolton State CT Zip Code 06043-7800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Vice President - Wealth Mgt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2478172359017
 Amount of Each Receipt this Period
 73.70
 Memo Item
 P/R Deduction (\$36.85 Bi-Weekly)

C. Terrazzino, Samuel, L.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4995 OAKWOOD DR
 City NORTH TONAWANDA State NY Zip Code 14120-9616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2478172759017
 Amount of Each Receipt this Period
 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	2573.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Bulvin, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3401 STILLHOUSE RD
 City ATLANTA State GA Zip Code 30339-3758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2478172959017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

B. Yoken, Michael, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 PATTON LANE
 City NORTH ANDOVER State MA Zip Code 01845-4925
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2478186759017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

C. Bargery, Brett, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3541 N JASPER MTN CIR
 City MESA State AZ Zip Code 85207-9130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 583.45

Date of Receipt 03 / 31 / 2018
Transaction ID : PR2478194759017
 Amount of Each Receipt this Period 166.70
 Memo Item
 P/R Deduction (\$83.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	2666.70
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Starnes, James, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4411 CHATEAU CRK WAY

City SPRING	State TX	Zip Code 77386-3509
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2478220359017

Amount of Each Receipt this Period
1250.00

Memo Item

P/R Deduction (\$1250.00 Semi-Monthly)

B. Bucsek, John, F., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 120 JANE CHAPMAN DR W

City NEWTOWN	State PA	Zip Code 18940-3123
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2478277259017

Amount of Each Receipt this Period
2500.00

Memo Item

P/R Deduction (\$2500.00 Semi-Monthly)

C. Malitsky, Felix, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 ARTHUR'S CT

City NEWTOWN	State CT	Zip Code 06470-2476
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2478277559017

Amount of Each Receipt this Period
1250.00

Memo Item

P/R Deduction (\$1250.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Desgroseilliers, Jennifer, A., ,		Date of Receipt MM / DD / YYYY 03 / 31 / 2018
Mailing Address 318 ROLLWIND RD		Transaction ID : PR2478278159017
City GLENVIEW	State IL	Zip Code 60025-5141
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	P/R Deduction (\$1250.00 Semi-Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Schega, Richard, A., ,		Date of Receipt MM / DD / YYYY 03 / 31 / 2018
Mailing Address 440 BELLE POINTE DR		Transaction ID : PR2478278459017
City MADISONVILLE	State LA	Zip Code 70447-3161
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	P/R Deduction (\$1250.00 Semi-Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Nicolas, Gaetan, , MR.,		Date of Receipt MM / DD / YYYY 03 / 31 / 2018
Mailing Address 77 Raffaele Dr		Transaction ID : PR2484673959017
City Waltham	State MA	Zip Code 02452-0313
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President Sales Support	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 875.00	P/R Deduction (\$125.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. GILL, Robert, Emmett, , SR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 WESLEY CT

City EATONTOWN	State NJ	Zip Code 07724-1423
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) Broker
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2490277659017

Amount of Each Receipt this Period
83.34

Memo Item

P/R Deduction (\$41.67 Semi-Monthly)

B. Hagenberg, Robert, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 ROSE TREE DR

City GLEN MILLS	State PA	Zip Code 19342-1788
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2493429359017

Amount of Each Receipt this Period
2500.00

Memo Item

P/R Deduction (\$2500.00 Semi-Monthly)

C. LaPiana, Paul, A, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6615 Green Knoll Drive

City Dallas	State TX	Zip Code 75230-2809
----------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) SVP - Sales and Distribution
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1166.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR2505805859017

Amount of Each Receipt this Period
333.40

Memo Item

P/R Deduction (\$166.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	2916.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. CHANG, David, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 FERNCROFT CT
 City DANVILLE State CA Zip Code 94526-5517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR2507035059017
 Amount of Each Receipt this Period
 83.34
 Memo Item
 P/R Deduction (\$44.15 Semi-Monthly)

B. MELTZER, Alan, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 S OCEAN BLVD APT 3K
 City BOCA RATON State FL Zip Code 33432-8085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1249.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR789845159017
 Amount of Each Receipt this Period
 416.66
 Memo Item
 P/R Deduction (\$208.33 Semi-Monthly)

C. HEERDEGEN, Christopher, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6862 SECTION RD
 City OTTAWA LAKE State MI Zip Code 49267-9551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR789871359017
 Amount of Each Receipt this Period
 83.34
 Memo Item
 P/R Deduction (\$58.35 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	583.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. SCHNEIDER, Corey, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 STRATTON RD
 City SCARSDALE State NY Zip Code 10583-7555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1249.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR789873259017
 Amount of Each Receipt this Period
 416.66
 Memo Item
 P/R Deduction (\$208.33 Semi-Monthly)

B. EPPY, Joseph, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 LAS OLAS WAY APT 4103
 City FORT LAUDERDALE State FL Zip Code 33301-2394
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR789983159017
 Amount of Each Receipt this Period
 208.34
 Memo Item
 P/R Deduction (\$104.17 Semi-Monthly)

C. Book, Michael, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 CRAWFORD RD
 City WESTPORT State CT Zip Code 06880-1824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR790024859017
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 P/R Deduction (\$2500.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	3125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Vesuvio, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 607 EMERALD TRL
 City MARTINSVILLE State NJ Zip Code 08836-2350
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790033659017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

B. STARR, Mitchell, Bradley, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9800 SW 4TH ST
 City PLANTATION State FL Zip Code 33324-2826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790035459017
 Amount of Each Receipt this Period 208.34
 Memo Item
 P/R Deduction (\$104.17 Semi-Monthly)

C. DECOURSEY, Paul, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1467 MORNINGCREST CT
 City INDIANAPOLIS State IN Zip Code 46280-2862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790044859017
 Amount of Each Receipt this Period 125.00
 Memo Item
 P/R Deduction (\$62.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	1583.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. VANBENSCHOTEN, Richard, Pierce, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 875 5TH AVE APT 3A
 City NEW YORK State NY Zip Code 10065-4952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR790069059017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. ESTLER, Stephen, David, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2177 NE 63RD ST
 City FT LAUDERDALE State FL Zip Code 33308-1330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR790109459017
 Amount of Each Receipt this Period 166.66
 Memo Item
 P/R Deduction (\$83.33 Semi-Monthly)

C. MCDONALD, Todd, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 EAGLE RIDGE DR
 City TROY State NY Zip Code 12180-7167
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR790131859017
 Amount of Each Receipt this Period 125.00
 Memo Item
 P/R Deduction (\$62.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Dickey, Andrew, C, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2934 E Crestview St

City Springfield	State MO	Zip Code 65804-3420
---------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Managing Director - Strategic Investme
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
538.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790159359017

Amount of Each Receipt this Period
153.90

Memo Item

P/R Deduction (\$76.95 Bi-Weekly)

B. Noreen, Cliff, M, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 95 Bent Tree Dr

City E Longmeadow	State MA	Zip Code 01028-1365
----------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Managing Director - Strategic Investme
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
673.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790184159017

Amount of Each Receipt this Period
192.32

Memo Item

P/R Deduction (\$96.16 Bi-Weekly)

C. Waddington, Craig, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 Spring Meadow Dr

City Granby	State CT	Zip Code 06035-1327
----------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President & Actuary
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790184559017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	423.14
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 48 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. WHARMBY, DAVID, D, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 VERPLANK AVE

City STAMFORD	State CT	Zip Code 06902-8216
------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790192659017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. Pellerin, Diane, , MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 Pittroff Ave

City South Hadley	State MA	Zip Code 01075-2203
----------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) AVP-Reg Advisory Services
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790198559017

Amount of Each Receipt this Period
62.50

Memo Item

P/R Deduction (\$23.10 Bi-Weekly)

C. Hoffman, Harvey, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Devonshire Ter

City E Longmeadow	State MA	Zip Code 01028-3139
----------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) SVP - Operational and Strategic Risk
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
673.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790231459017

Amount of Each Receipt this Period
192.32

Memo Item

P/R Deduction (\$151.71 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	331.74
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Deitelbaum, John, E, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 Monticello Cir

City Ellington	State CT	Zip Code 06029-8300
-------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) SVP & Deputy Gen Couns USIG Law
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
942.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR790248259017

Amount of Each Receipt this Period
269.24

Memo Item

P/R Deduction (\$134.62 Bi-Weekly)

B. Rokowski, Joseph, R, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 124 Maximilian Dr

City Granby	State MA	Zip Code 01033-9469
----------------	-------------	------------------------

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

Name of Employer (for Individual) MASSMUTUAL TRUST COMPANY	Occupation (for Individual) Vice President - Trust Company
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR790254559017

Amount of Each Receipt this Period
150.00

Memo Item

P/R Deduction (\$75.00 Bi-Weekly)

C. NATCHARIAN, MATTHEW, P, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3 RIDGEBURY RD

City AVON	State CT	Zip Code 06001-3825
--------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
942.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR790301459017

Amount of Each Receipt this Period
269.24

Memo Item

P/R Deduction (\$134.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	688.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 50 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. GATELY, MICHAEL, H, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 134 FAIRVIEW TER

City S GLASTONBURY	State CT	Zip Code 06073-3304
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790304959017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. Delaney, Pamela, J, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 Winterset Ln

City Simsbury	State CT	Zip Code 06070-1720
------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President - Procurement
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790320659017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. Kinsey, Patricia, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 Sunnyside Ter

City Wilbraham	State MA	Zip Code 01095-1304
-------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) VP - Strategic Initiatives & Data Inte
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
326.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790322559017

Amount of Each Receipt this Period
93.40

Memo Item

P/R Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	247.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 51 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Kennedy, Rhae, A, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Briar Cliff Dr
 City Wilbraham State MA Zip Code 01095-1576
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Managing Director - Investment Analysis
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 269.22

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790351859017
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. Bourgeois, Richard, D, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Echo Hill Rd
 City Wilbraham State MA Zip Code 01095-2663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Senior Vice President - Tax
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 538.65

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790352259017
 Amount of Each Receipt this Period 153.90
 Memo Item
 P/R Deduction (\$76.95 Bi-Weekly)

C. Labun, Robert, G, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 84 Wildflower Cir
 City Westfield State MA Zip Code 01085-4590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Vice President, Investment Accounting
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 269.22

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790354559017
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	307.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Rosenthal, Bob, S, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 Sherwood Ln

City Avon	State CT	Zip Code 06001-3215
--------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) VP & Assistant General Counsel
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
403.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790355459017

Amount of Each Receipt this Period
115.40

Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

B. Crandall, Roger, W, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 165 Converse St Apt 13

City Longmeadow	State MA	Zip Code 01106-1755
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Occupation (for Individual) Chairman President & CEO
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1346.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790355959017

Amount of Each Receipt this Period
384.60

Memo Item

P/R Deduction (\$192.30 Bi-Weekly)

C. MOORE, SUSAN, A, MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 BROOKS RD

City LONGMEADOW	State MA	Zip Code 01106-2129
--------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
942.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790370159017

Amount of Each Receipt this Period
269.24

Memo Item

P/R Deduction (\$134.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	769.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. KOWALSKI, Ken, Croydon, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3620 WILLOW LAWN DR
 City LYNCHBURG State VA Zip Code 24503-3022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Broker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790397459017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. MARTIN, Brian, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12217 CLEGHORN RD
 City COCKEYSVILLE State MD Zip Code 21030-2218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790404159017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. DAVIS, Jonathan, Scott, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 OVERLOOK RD
 City WESTPORT State CT Zip Code 06880-2327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790448759017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	250.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. SEGALL, Robert, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 FAITH LN
 City ARDSLEY State NY Zip Code 10502-2510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR790450359017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. SEROTTE, Steven, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 910 VERNAL WAY
 City MILL VALLEY State CA Zip Code 94941-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR790451659017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. SHAUGHNESSY, T J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 RIVERWALK WAY
 City MANCHESTER State NH Zip Code 03101-2642
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR790463059017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$44.12 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	250.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. VESSELL, Jerry, Donald, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 911 CALLOWAY DR
 City BRENTWOOD State TN Zip Code 37027-6539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790470159017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. Hernandez, Luis, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 ALHAMBRA CIR
 City CORAL GABLES State FL Zip Code 33134-3532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790522359017
 Amount of Each Receipt this Period 5000.00
 Memo Item
 P/R Deduction (\$5000.00 Semi-Monthly)

C. Koroghlian, George, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 SHEPPARD DR
 City MONTVALE State NJ Zip Code 07645-1223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790528759017
 Amount of Each Receipt this Period 2500.00
 Memo Item
 P/R Deduction (\$2500.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	7583.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. DUDECK, THOMAS, G, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 WINTERBERRY RD
 City DEEP RIVER State CT Zip Code 06417-2126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARINGS LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 403.83

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR790544559017
 Amount of Each Receipt this Period 115.38
 Memo Item
 P/R Deduction (\$57.69 Bi-Weekly)

B. DULCHINOS, DEAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 ABBEY LN
 City E LONGMEADOW State MA Zip Code 01028-3206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARINGS LLC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.50

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR790568559017
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. TREVALLION, DOUGLAS, M, MR., II
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 COVENTRY LN
 City AGAWAM State MA Zip Code 01001-3569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARINGS LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 269.22

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR790590359017
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	269.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. ROBERGE, ROGER, M, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 ROCKINGHAM CIR

City EAST LONGMEADOW	State MA	Zip Code 01028-3197
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) BARINGS LLC	Occupation (for Individual) MANAGING DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR790594559017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

B. Gish, Todd, M, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 57 Middle Rd

City Ellington	State CT	Zip Code 06029-3615
-------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President - GIC Operations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
269.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR790677159017

Amount of Each Receipt this Period
76.92

Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

C. BYERS, John, N., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3680 JACOBS MILL RD

City LONG LAKE	State MN	Zip Code 55356-9320
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2018

Transaction ID : PR790684859017

Amount of Each Receipt this Period
125.00

Memo Item

P/R Deduction (\$62.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	278.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. McQuaid, William, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 ELIZABETH CV
 City ROSWELL State GA Zip Code 30075-6232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR790703359017
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 P/R Deduction (\$2500.00 Semi-Monthly)

B. FEHRS, David, Scott, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 191 BUCKTHORN DR
 City BADEN State PA Zip Code 15005-2561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR790708659017
 Amount of Each Receipt this Period
 208.34
 Memo Item
 P/R Deduction (\$104.17 Semi-Monthly)

C. WIGHT, Edward, Ira, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 804 KATESFORD RD
 City COCKEYSVILLE State MD Zip Code 21030-2246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR790710959017
 Amount of Each Receipt this Period
 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	2791.68
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. WAHL, Michael, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 TODMORDEN LN
 City ROSE VALLEY State PA Zip Code 19086-6729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 212.30

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790723359017
 Amount of Each Receipt this Period 78.98
 Memo Item
 P/R Deduction (\$43.65 Semi-Monthly)

B. THOMALLA, Kenneth, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 FOREST EDGE DR
 City PALOS PARK State IL Zip Code 60464-1933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790731159017
 Amount of Each Receipt this Period 208.34
 Memo Item
 P/R Deduction (\$104.17 Semi-Monthly)

C. Morin, Vanessa, B, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 131 Canterbury Cir
 City E Longmeadow State MA Zip Code 01028-5710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) AVP Field Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.39

Date of Receipt 03 / 31 / 2018
Transaction ID : PR790790359017
 Amount of Each Receipt this Period 61.54
 Memo Item
 P/R Deduction (\$30.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	348.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Allen, David, S, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 Winhall Ln

City Hartford	State CT	Zip Code 06105-1000
------------------	-------------	------------------------

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

Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) SVP - DGC Dispute Resolution & Legal
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
403.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR790809759017

Amount of Each Receipt this Period
115.40

Memo Item

P/R Deduction (\$57.70 Bi-Weekly)

B. SHAUGHNESSY, Thomas, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4404 S ORANGE AVE # 74011

City BROKEN ARROW	State OK	Zip Code 74011-1191
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR791185159017

Amount of Each Receipt this Period
83.34

Memo Item

P/R Deduction (\$41.67 Semi-Monthly)

C. WRIGHT, Darren, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6020 E CALLE DEL MEDIA

City SCOTTSDALE	State AZ	Zip Code 85251-3018
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : PR791221259017

Amount of Each Receipt this Period
83.34

Memo Item

P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	282.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. WOOD, Greg, Paul, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1249 E 26TH ST
 City TULSA State OK Zip Code 74114-2603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR791295759017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. Chicares, Elizabeth, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 186 Belle Woods Dr
 City Glastonbury State CT Zip Code 06033-1667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) EVP - CFO & Chief Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 673.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR791351759017
 Amount of Each Receipt this Period 192.32
 Memo Item
 P/R Deduction (\$96.16 Bi-Weekly)

C. DEFRANCIS, CHRISTOPHER, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 MAYNARD RD
 City NORTHAMPTON State MA Zip Code 01060-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARINGS LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 403.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR791365059017
 Amount of Each Receipt this Period 115.40
 Memo Item
 P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	391.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Cohn, Gregory, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2499 MERLOT LN
 City LIVERMORE State CA Zip Code 94550-8209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR791427359017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

B. FINKE, THOMAS, M, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4920 HARDISON RD
 City CHARLOTTE State NC Zip Code 28226-6418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARINGS LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1346.10

Date of Receipt 03 / 31 / 2018
Transaction ID : PR791511959017
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. Gallop, Mark, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 Fairway Xing
 City Glastonbury State CT Zip Code 06033-1468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSMUTUAL INTERNATIONAL Occupation (for Individual) Senior Managing Director - MMI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 269.50

Date of Receipt 03 / 31 / 2018
Transaction ID : PR791513759017
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1711.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Bach, Jason, Richard, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2913 CHAPMAN RD
 City PLANO State TX Zip Code 75093-3435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR791544859017
 Amount of Each Receipt this Period 2500.00
 Memo Item
 P/R Deduction (\$2500.00 Semi-Monthly)

B. Mcandrews, James, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13310 INDIAN CREEK RD
 City HOUSTON State TX Zip Code 77079-7139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR791585659017
 Amount of Each Receipt this Period 5000.00
 Memo Item
 P/R Deduction (\$5000.00 Semi-Monthly)

C. THOMPSON, PAUL, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 189 MAYFAIR RD
 City MOORESVILLE State NC Zip Code 28117-6022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BARINGS LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 355.83

Date of Receipt 03 / 31 / 2018
Transaction ID : PR791591459017
 Amount of Each Receipt this Period 115.40
 Memo Item
 P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	7615.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 64 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Goldstein, Rich, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 197 Lynnwood Dr
 City Longmeadow State MA Zip Code 01106-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Vice President - HR Operations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 269.22

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR791591659017
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. Block, Mary, S, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 67 Pershing Rd
 City Windsor Locks State CT Zip Code 06096-2122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) VP & Assistant General Counsel
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 269.22

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR791784459017
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. Silvanic, Bill, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Creamery Hill Rd
 City Granby State CT Zip Code 06035-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) SVP - Product & Marketing
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 269.22

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR791800459017
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	230.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. ABOWD, Eric, Steven, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9900 WILBUR MAY PKWY APT 4504
 City RENO State NV Zip Code 89521-3087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR791913759017
 Amount of Each Receipt this Period
 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. Dias, Amy, , MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Cislak Dr
 City Ludlow State MA Zip Code 01056-1546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Head of HR Consulting & Talent Dev
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR791926959017
 Amount of Each Receipt this Period
 80.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. Sypher, James, Edward, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26638 SE 15TH ST
 City SAMMAMISH State WA Zip Code 98075-7928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR791939459017
 Amount of Each Receipt this Period
 2500.00
 Memo Item
 P/R Deduction (\$2500.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	2663.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 66 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Monroe Jr, Bill, F, MR., Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 General Hobbs Rd
 City Jefferson State MA Zip Code 01522-1565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co Occupation (for Individual) Vice President - MMLISI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.29

Date of Receipt 03 / 31 / 2018
Transaction ID : PR791969159017
 Amount of Each Receipt this Period 76.94
 Memo Item
 P/R Deduction (\$38.47 Bi-Weekly)

B. Matusz, Roman, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 507 SEQUOIA DR
 City PITTSBURGH State PA Zip Code 15236-4460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR791985159017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

C. O'Connor, Michael, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Twin Hill Rd
 City Hubbardston State MA Zip Code 01452-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) General Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1346.10

Date of Receipt 03 / 31 / 2018
Transaction ID : PR792107759017
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	1711.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MILLER, John, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 WHIPPANY AVE
 City WARREN State NJ Zip Code 07059-5774
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR792501459017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. Sussman, Erik, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9214 BROAD ST
 City BOCA RATON State FL Zip Code 33434-5915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR793184359017
 Amount of Each Receipt this Period 2500.00
 Memo Item
 P/R Deduction (\$2500.00 Semi-Monthly)

C. Weinman, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115 REGAL BLVD
 City LIVINGSTON State NJ Zip Code 07039-8242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR793414859017
 Amount of Each Receipt this Period 2500.00
 Memo Item
 P/R Deduction (\$2500.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	5083.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. GOLISH, Glen, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22261 HOLLYHOCK TRL
 City BOCA RATON State FL Zip Code 33433-4865
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR793450559017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. Maletteri, Michael, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1273 WELLS ST
 City LAKE OSWEGO State OR Zip Code 97034-5047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR793567759017
 Amount of Each Receipt this Period 200.00
 Memo Item
 P/R Deduction (\$100.00 Bi-Weekly)

C. GEORGE, Ian, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 CLEMSON DR
 City PITTSBURGH State PA Zip Code 15243-1736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt **03 / 31 / 2018**
Transaction ID : PR793621459017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	366.68
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. Kaltenbach, Gregory, Linn, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 RAND COURT
 City COTO DE CAZA State CA Zip Code 92679-5148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.71

Date of Receipt 03 / 31 / 2018
Transaction ID : PR793731559017
 Amount of Each Receipt this Period 119.06
 Memo Item
 P/R Deduction (\$59.53 Bi-Weekly)

B. Paasch, Kevin, Winthrop, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3301 ULVERSTON QUAY
 City VIRGINIA BCH State VA Zip Code 23452-6261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 31 / 2018
Transaction ID : PR794020459017
 Amount of Each Receipt this Period 1250.00
 Memo Item
 P/R Deduction (\$1250.00 Semi-Monthly)

C. PERME, Christopher, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11676 STATE ROUTE 88
 City GARRETTSVILLE State OH Zip Code 44231-9105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR794455159017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	1452.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 95
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. OCVIEJA, John, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 300 N CANAL ST APT 3603
 City CHICAGO State IL Zip Code 60606-1311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR79465559017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. KATZ, Walter, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1401 RICHMOND AVE STE 200
 City HOUSTON State TX Zip Code 77006-5480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR795359659017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. ROBERTSON, Michael, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 569 SHANES LN
 City WEATHERFORD State TX Zip Code 76087-7133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR795374459017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	250.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. WIRTZ, Edward, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 BRANDING IRON LN
 City ROLLING HILLS ESTATES State CA Zip Code 90274-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR796003959017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. WHITMORE, Edgar, F., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25471 PRADO DE ORO
 City CALABASAS State CA Zip Code 91302-3664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR796010159017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. ADAMS, Max, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 NE 27TH ST APT 1603
 City MIAMI State FL Zip Code 33137-5093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2018
Transaction ID : PR796324659017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	250.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. PLANK, Joshua, Ryan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 TIMBERWOLF LN
 City ZIONSVILLE State IN Zip Code 46077-8322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt 03 / 31 / 2018
Transaction ID : PR811793659017
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. Young, Jeanne, G, MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Pondview Ln
 City Southwick State MA Zip Code 01077-9264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Occupation (for Individual) Vice President - Corp Business Resou
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.50

Date of Receipt 03 / 31 / 2018
Transaction ID : PR904834659017
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. Cocores, Christopher, Charles, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 WOODSTOCK CT
 City MECHANICSBURG State PA Zip Code 17050-8230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2604.17

Date of Receipt 03 / 31 / 2018
Transaction ID : PR934761059017
 Amount of Each Receipt this Period 2500.00
 Memo Item
 P/R Deduction (\$2500.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	2660.34
TOTAL This Period (last page this line number only).....	146970.66

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 73 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MassMutual Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1295 State Street

City Springfield	State MA	Zip Code 01111
---------------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1005.31

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	30	/	2018

Transaction ID : 77670873

Amount of Each Receipt this Period
815.01

Memo Item

Refund - Fed Operating Expenditure (Mar-18)

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	815.01
TOTAL This Period (last page this line number only).....▶	815.01

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 74 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Diane Black For Congress		Date of Receipt
Mailing Address PO Box 1437		<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2018"/>
City Gallatin	State TN	Zip Code 37066
FEC ID number of contributing federal political committee. C C00472878		Transaction ID : 77670881
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	Refund of Sep-17 Candidate Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/>
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item
Occupation (for Individual)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="text"/>
Name of Employer (for Individual)		<input type="checkbox"/> Memo Item
Occupation (for Individual)		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="5000.00"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Chase PaymenTech

Mailing Address P.O. Box 29534

City
Phoenix

State
AZ

Zip Code
85038

Purpose of Disbursement
Feb-Mar-18 Chase PaymenTech Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	1	8

FEC Identification Number

C []

Transaction ID : 77670871

Amount of Each Disbursement this Period

[] 735.17

Memo Item Fees
Feb-Mar-18 Chase PaymenTech Fees

Full Name (Last, First, Middle Initial)

B. American Express Merchant Services

Mailing Address P.O. Box 53852

City
Phoenix

State
AZ

Zip Code
85072

Purpose of Disbursement
Feb-18 AMEX Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	8

FEC Identification Number

C []

Transaction ID : 77670872

Amount of Each Disbursement this Period

[] 79.84

Memo Item
Feb-18 AMEX Processing Fees

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

[] 815.01

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

[] 815.01

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Brian Fitzpatrick For Congress

Mailing Address PO Box 939

City
Langhorne

State
PA

Zip Code
19047

Purpose of Disbursement
Event: March 6, 2018

011

Category/
Type

Candidate Name

Fitzpatrick, Brian, K., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2018

FEC Identification Number

C C00607416

Transaction ID : 77362525

Amount of Each Disbursement this Period

2500.00

Event: March 6, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. The Bluegrass Committee

Mailing Address 400 N. Capitol St., NW., 585

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
BGR Event: March 14, 2018

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

C

Transaction ID : 77366661

Amount of Each Disbursement this Period

5000.00

BGR Event: March 14, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Capuano For Congress Committee

Mailing Address PO Box 440305

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
In-District Event: March 28, 2018

011

Category/
Type

Candidate Name

Capuano, Michael, E., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MA District: 07

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

C C00336388

Transaction ID : 77382285

Amount of Each Disbursement this Period

2500.00

In-District Event: March 28, 2018

Memo Item

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Freedom Fund

Mailing Address 701 8th Street NW, Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement
ACLI Event: March 14, 2018

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

C C00390674

Transaction ID : 77389448

Amount of Each Disbursement this Period

2500.00

ACLI Event: March 14, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Stivers For Congress

Mailing Address 4679 Winterset Dr

City Columbus State OH Zip Code 43220

Purpose of Disbursement
2018 Candidate Support

Candidate Name

Stivers, Steve, , ,

Office Sought: House Senate President
State: OH District: 15

Disbursement For: 2013 Primary General Other (specify)

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

C C00441352

Transaction ID : 77389773

Amount of Each Disbursement this Period

2500.00

2018 Candidate Support

Memo Item

Full Name (Last, First, Middle Initial)

C. Support to Ensure Victory Everywhere (STEVE PAC)

Mailing Address 228 S. Washington Street, Suite 11

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2018 Renewed Support

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

C C00501478

Transaction ID : 77389848

Amount of Each Disbursement this Period

5000.00

2018 Renewed Support

Memo Item

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

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mullin For Congress

Mailing Address PO Box 3681

City
Muskogee

State
OK

Zip Code
74402

Purpose of Disbursement
Event: March 15, 2018

011

Category/
Type

Candidate Name

Mullin, Markwayne, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OK District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			14			2018			

FEC Identification Number

C C00498345

Transaction ID : 77389861

Amount of Each Disbursement this Period

2500.00

Event: March 15, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Capuano For Congress Committee

Mailing Address PO Box 440305

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
In-District Event: March 28, 2018

011

Category/
Type

Candidate Name

Capuano, Michael, E., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify)

State: MA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			14			2018			

FEC Identification Number

C C00336388

Transaction ID : 77389874

Amount of Each Disbursement this Period

5000.00

In-District Event: March 28, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Faso For Congress

Mailing Address PO Box 448

City
Kinderhook

State
NY

Zip Code
12106

Purpose of Disbursement
In-District Event: Marchh 27, 2018

011

Category/
Type

Candidate Name

Faso, John, J., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NY District: 19

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			14			2018			

FEC Identification Number

C C00580415

Transaction ID : 77389875

Amount of Each Disbursement this Period

1500.00

In-District Event: Marchh 27, 2018

Memo Item

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

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

9000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Elise For Congress

Mailing Address PO Box 500

City
Glens Falls

State
NY

Zip Code
12801

Purpose of Disbursement
In-District Event: March 27, 2018

011

Category/
Type

Candidate Name

Stefanik, Elise, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

C C00547893

Transaction ID : 77389876

Amount of Each Disbursement this Period

1500.00

In-District Event: March 27, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Lahood For Congress

Mailing Address P.O. Box 10735

City
Peoria

State
IL

Zip Code
61612

Purpose of Disbursement
Events: Feb 5 & March 14, 2018

011

Category/
Type

Candidate Name

LaHood, Darin, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify)

State: IL District: 18

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

C C00575050

Transaction ID : 77390301

Amount of Each Disbursement this Period

3500.00

Events: Feb 5 & March 14, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. MACPAC

Mailing Address

City

State

Zip Code

Purpose of Disbursement
2018 PAC Support

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2018

FEC Identification Number

C

Transaction ID : 77395160

Amount of Each Disbursement this Period

5000.00

2018 PAC Support

Memo Item

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Schweikert For Congress

Mailing Address 8776 E Shea Blvd, Suite B3a-626

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement
In-District Event: March 28, 2018

011

Category/
Type

Candidate Name
Schweikert, David, , Rep.,

Office Sought: House Senate President
Disbursement For: 2013
 Primary General Other (specify) ▼

State: AZ District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		2	8		2	0	1	8		

FEC Identification Number

C C00492413

Transaction ID : 77461025

Amount of Each Disbursement this Period

2500.00

In-District Event: March 28, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Brady For Congress

Mailing Address PO Box 8277

City The Woodlands State TX Zip Code 77387

Purpose of Disbursement
In-District Event: March 28, 2018

011

Category/
Type

Candidate Name
Brady, Kevin, Patrick, Rep.,

Office Sought: House Senate President
Disbursement For: 2013
 Primary General Other (specify)

State: TX District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		2	8		2	0	1	8		

FEC Identification Number

C C00311043

Transaction ID : 77461026

Amount of Each Disbursement this Period

2500.00

In-District Event: March 28, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Klobuchar For Minnesota

Mailing Address PO Box 4146

City St Paul State MN Zip Code 55104

Purpose of Disbursement
ACI Event: April 10, 2018

011

Category/
Type

Candidate Name
Klobuchar, Amy, , Sen.,

Office Sought: House Senate President
Disbursement For: 2013
 Primary General Other (specify) ▼

State: MN District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		2	6		2	0	1	8		

FEC Identification Number

C C00431353

Transaction ID : 77462936

Amount of Each Disbursement this Period

5000.00

ACI Event: April 10, 2018

Memo Item

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

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
Event: April 11, 2018

Category/
Type

Candidate Name
Thompson, Mike, , Rep.,

Office Sought: House Senate President
Disbursement For: 2013
 Primary General Other (specify) ▼
State: CA District: 05

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 77462937

Amount of Each Disbursement this Period

Event: April 11, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. VINE PAC

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Event: February 15, 2018

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General Other (specify)
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 77462938

Amount of Each Disbursement this Period

Event: February 15, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Stabenow For Us Senate

Mailing Address P.O. Box 4945

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Event: April 12, 2018

Category/
Type

Candidate Name
Stabenow, Debbie, , Sen.,

Office Sought: House Senate President
Disbursement For: 2013
 Primary General Other (specify) ▼
State: MI District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 77462939

Amount of Each Disbursement this Period

Event: April 12, 2018

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Walorski For Congress Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2018

Mailing Address PO Box 954

FEC Identification Number

C	C00468579
---	-----------

City Mishawaka State IN Zip Code 46546

Transaction ID : 77462950

Purpose of Disbursement
Event: April 11, 2018

011
Category/ Type

Amount of Each Disbursement this Period

2500.00

Candidate Name
Walorski, Jackie, , ,

Office Sought: House
 Senate
 President
State: IN District: 02

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Event: April 11, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Joe Kennedy For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2018

Mailing Address PO Box 590464

FEC Identification Number

C	C00512970
---	-----------

City Newton State MA Zip Code 02459

Transaction ID : 77462951

Purpose of Disbursement
Event: February 15, 2018

011
Category/ Type

Amount of Each Disbursement this Period

2500.00

Candidate Name
Kennedy, Joseph, P., Rep., III

Office Sought: House
 Senate
 President
State: MA District: 04

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Event: February 15, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Duffy For Wisconsin

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2018

Mailing Address PO Box 538

FEC Identification Number

C	C00464339
---	-----------

City Wausau State WI Zip Code 54402

Transaction ID : 77463155

Purpose of Disbursement
ACLI Event: March 13, 2018

011
Category/ Type

Amount of Each Disbursement this Period

2500.00

Candidate Name
Duffy, Sean, , ,

Office Sought: House
 Senate
 President
State: WI District: 07

Disbursement For: 2013
 Primary General
 Other (specify) ▼

ACLI Event: March 13, 2018

Memo Item

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

7500.00

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

--

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Serve America PAC

Mailing Address 415 New Jersey Avenue SE #1

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2018

FEC Identification Number

C []

Transaction ID : 77463161

Amount of Each Disbursement this Period

[] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Great Lakes PAC

Mailing Address 700 13th Street, NW - Suite 600

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Event: February 28, 2018

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2018

FEC Identification Number

C C00375584

Transaction ID : 77466710

Amount of Each Disbursement this Period

[] 2500.00

Event: February 28, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Roskam For Congress Committee

Mailing Address P. O. Box 713

City
Wheaton

State
IL

Zip Code
60187

Purpose of Disbursement
Event: March 5, 2018

011

Category/
Type

Candidate Name

Roskam, Peter, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2013
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2018

FEC Identification Number

C C00410969

Transaction ID : 77466711

Amount of Each Disbursement this Period

[] 2500.00

Event: March 5, 2018

Memo Item

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

[] 7500.00

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Southern Missourian in the House PAC

Mailing Address 213 Ashby Street

City Alexandria State VA Zip Code 22305

Purpose of Disbursement
Event: March 13, 2018

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2018

FEC Identification Number

C C00563726

Transaction ID : 77466714

Amount of Each Disbursement this Period

2500.00

Event: March 13, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Kelly For Congress

Mailing Address PO Box 476

City Lyndora State PA Zip Code 16045

Purpose of Disbursement
Event: March 6, 2018

Candidate Name

Kelly, Mike, , Rep.,

Office Sought: House Senate President
State: PA District: 03

Disbursement For: 2013 Primary General Other (specify)

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2018

FEC Identification Number

C C00474189

Transaction ID : 77466720

Amount of Each Disbursement this Period

2500.00

Event: March 6, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Elise For Congress

Mailing Address PO Box 500

City Glens Falls State NY Zip Code 12801

Purpose of Disbursement
Event: April, 2018

Candidate Name

Stefanik, Elise, ,

Office Sought: House Senate President
State: NY District: 21

Disbursement For: 2018 Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 27 / 2018

FEC Identification Number

C C00547893

Transaction ID : 77466726

Amount of Each Disbursement this Period

3500.00

Event: April, 2018

Memo Item

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

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

8500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Common Values PAC

Mailing Address 901 N WASHINGTON ST, SUITE 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
NYL/MM Event: April 24, 2018

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 77466753

Amount of Each Disbursement this Period

NYL/MM Event: April 24, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Tom Rice For Congress

Mailing Address PO Box 70098

City Myrtle Beach State SC Zip Code 29572

Purpose of Disbursement
Event: March 19, 2018

Category/
Type

Candidate Name

Rice, Tom, , Rep.,

Office Sought: House Senate President
Disbursement For: 2013 Primary General Other (specify) ▼
State: SC District: 07

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 77466760

Amount of Each Disbursement this Period

Event: March 19, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Kind For Congress Committee

Mailing Address 205 5th Avenue S
Room 411

City La Crosse State WI Zip Code 54601

Purpose of Disbursement
Event: March 20, 2018

Category/
Type

Candidate Name

Kind, Ron, , Rep.,

Office Sought: House Senate President
Disbursement For: 2013 Primary General Other (specify) ▼
State: WI District: 03

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 77467029

Amount of Each Disbursement this Period

Event: March 20, 2018

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Roskam PAC

Mailing Address PO Box 1011

City
Wheaton

State
IL

Zip Code
60187

Purpose of Disbursement
Event: June 7, 2018

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District: 03

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : 77467695
Amount of Each Disbursement this Period

Memo Item
Event: June 7, 2018

Full Name (Last, First, Middle Initial)

B. Tom Macarthur For Congress Inc.

Mailing Address PO Box 999

City
Edison

State
NJ

Zip Code
08818

Purpose of Disbursement
Industry Event: March 15, 2018

011
Category/
Type

Candidate Name
MacArthur, Tom, , Rep.,

Office Sought: House
 Senate
 President
State: NJ District: 03

Disbursement For: 2013
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : 77468549
Amount of Each Disbursement this Period

Memo Item
Industry Event: March 15, 2018

Full Name (Last, First, Middle Initial)

C. Keystone America PAC

Mailing Address PO BOX 58746

City
PHILADELPHIA

State
PA

Zip Code
19102

Purpose of Disbursement
ACLI Event: March 20, 2018

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : 77468555
Amount of Each Disbursement this Period

Memo Item
ACLI Event: March 20, 2018

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donovan For Congress

Mailing Address PO Box 60530

City Staten Island State NY Zip Code 10306

Purpose of Disbursement
Event: February 27, 2018

011
Category/
Type

Candidate Name
Donovan, Daniel, M., Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼
State: NY District: 11

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2018

FEC Identification Number

C C00571869

Transaction ID : 77470170

Amount of Each Disbursement this Period

4000.00

Event: February 27, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Brian Fitzpatrick For Congress

Mailing Address PO Box 939

City Langhorne State PA Zip Code 19047

Purpose of Disbursement
Event: March 19, 2018

011
Category/
Type

Candidate Name
Fitzpatrick, Brian, K., Rep.,

Office Sought: House Senate President
Disbursement For: 2013
 Primary General
 Other (specify) ▼
State: PA District: 08

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2018

FEC Identification Number

C C00607416

Transaction ID : 77470175

Amount of Each Disbursement this Period

2500.00

Event: March 19, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Andy Barr For Congress, Inc.

Mailing Address PO Box 2059

City Lexington State KY Zip Code 40588

Purpose of Disbursement
NAIFA Event: February 5, 2018

011
Category/
Type

Candidate Name
Barr, Andy, , Rep.,

Office Sought: House Senate President
Disbursement For: 2013
 Primary General
 Other (specify) ▼
State: KY District: 06

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2018

FEC Identification Number

C C00467571

Transaction ID : 77471373

Amount of Each Disbursement this Period

2500.00

NAIFA Event: February 5, 2018

Memo Item

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

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

9000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Donald Norcross For Congress

Mailing Address PO Box 160

City
Collingswood

State
NJ

Zip Code
08108

Purpose of Disbursement
Event: February 16, 2018

011

Category/
Type

Candidate Name

Norcross, Donald, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NJ District: 01

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2018

FEC Identification Number

C C00558320

Transaction ID : 77471378

Amount of Each Disbursement this Period

2500.00

Event: February 16, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. America Works PAC

Mailing Address 208 I Street, NE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
Events: February 14 & March 6, 2018

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 26 / 2018

FEC Identification Number

C C00331694

Transaction ID : 77471381

Amount of Each Disbursement this Period

5000.00

Events: February 14 & March 6, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. French Hill For Arkansas

Mailing Address PO Box 7841

City
Little Rock

State
AR

Zip Code
72217

Purpose of Disbursement
Event: February 7, 2018

011

Category/
Type

Candidate Name

Hill, French, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: AR District: 02

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2018

FEC Identification Number

C C00551275

Transaction ID : 77471389

Amount of Each Disbursement this Period

2500.00

Event: February 7, 2018

Memo Item

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bill Cassidy For Us Senate

Mailing Address PO Box 80505

City Baton Rouge State LA Zip Code 70898

Purpose of Disbursement
Event: February 14, 2018

Category/
Type

Candidate Name
Cassidy, Bill, , Sen.,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: LA District:

Date of Disbursement
M M / D D / Y Y Y Y Y Y
03 / 14 / 2018

FEC Identification Number
C C00543983
Transaction ID : 77471392
Amount of Each Disbursement this Period
2500.00
Event: February 14, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Trey For Congress

Mailing Address PO Box 421

City Jeffersonville State IN Zip Code 47130

Purpose of Disbursement
Event: Feb 14 & 26, 2018

Category/
Type

Candidate Name
Hollingsworth, Trey, , Rep.,

Office Sought: House Senate President
Disbursement For: 2013 Primary General Other (specify) ▼
State: IN District: 09

Date of Disbursement
M M / D D / Y Y Y Y Y Y
03 / 14 / 2018

FEC Identification Number
C C00590463
Transaction ID : 77471393
Amount of Each Disbursement this Period
2500.00
Event: Feb 14 & 26, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Guthrie For Congress

Mailing Address PO Box 9639

City Bowling Green State KY Zip Code 42102

Purpose of Disbursement
NAIFA Event: February 27, 2018

Category/
Type

Candidate Name
Guthrie, Brett, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: KY District: 02

Date of Disbursement
M M / D D / Y Y Y Y Y Y
03 / 27 / 2018

FEC Identification Number
C C00445023
Transaction ID : 77471411
Amount of Each Disbursement this Period
2500.00
NAIFA Event: February 27, 2018

Memo Item

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

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

7500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Walberg For Congress

Mailing Address PO Box 1362

City
Jackson

State
MI

Zip Code
49204

Purpose of Disbursement
IRI Event: February 27, 2018

011

Category/
Type

Candidate Name

Walberg, Tim, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MI District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	8			2	0	1	8		

FEC Identification Number

C C00390724

Transaction ID : 77471412

Amount of Each Disbursement this Period

2500.00

IRI Event: February 27, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Portman For Senate Committee

Mailing Address 9856 Archer Lane

City
Dublin

State
OH

Zip Code
43017

Purpose of Disbursement
Industry Event: March 1, 2018

011

Category/
Type

Candidate Name

Portman, Rob, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: OH District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	8		

FEC Identification Number

C C00458463

Transaction ID : 77471413

Amount of Each Disbursement this Period

2500.00

Industry Event: March 1, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. 21st Century Majority Fund

Mailing Address 6065 Roswell Road, #2274

City
Atlanta

State
GA

Zip Code
30328

Purpose of Disbursement
Event: March 7, 2018

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	7			2	0	1	8		

FEC Identification Number

C

Transaction ID : 77471414

Amount of Each Disbursement this Period

5000.00

Event: March 7, 2018

Memo Item

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wicker For Senate

Mailing Address PO Box 64

City
Jackson

State
MS

Zip Code
39205

Purpose of Disbursement
NRSC Event: Jan 9, 2018

011

Category/
Type

Candidate Name

Wicker, Roger, , ,

Office Sought:

House
 Senate
 President

Disbursement For: 2013

Primary General
 Other (specify) ▼

State: MS

District:

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2018

FEC Identification Number

C C00443218

Transaction ID : 77471415

Amount of Each Disbursement this Period

2500.00

NRSC Event: Jan 9, 2018

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends for Gregory Meeks

Mailing Address 153-01 Jamaica Avenue

City
Jamaica

State
NY

Zip Code
11432

Purpose of Disbursement
FS Event: March 20, 2018

011

Category/
Type

Candidate Name

Meeks, Gregory, W., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2013

Primary General
 Other (specify)

State: NY

District: 06

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2018

FEC Identification Number

C C00329375

Transaction ID : 77471416

Amount of Each Disbursement this Period

2500.00

FS Event: March 20, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. Yarmuth For Congress

Mailing Address 1815 Brownsboro Road, Suite 101

City
Louisville

State
KY

Zip Code
40206

Purpose of Disbursement
Event: March 21, 2018

011

Category/
Type

Candidate Name

Yarmuth, John, A., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: KY

District: 03

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2018

FEC Identification Number

C C00419630

Transaction ID : 77471417

Amount of Each Disbursement this Period

5000.00

Event: March 21, 2018

Memo Item

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Katherine Clark For Congress

Mailing Address PO Box 159

City
Belmont

State
MA

Zip Code
02478

Purpose of Disbursement
2018 Candidate Contribution

Category/
Type

Candidate Name
Clark, Katherine, M, Rep.,

Office Sought: House
 Senate
 President
State: MA District: 05

Disbursement For: 2013
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 77471816

Amount of Each Disbursement this Period

2018 Candidate Contribution

Memo Item

Full Name (Last, First, Middle Initial)

B. Young For Iowa, Inc.

Mailing Address PO Box 162

City
Van Meter

State
IA

Zip Code
50261

Purpose of Disbursement
ACLI Event: February 27, 2018

Category/
Type

Candidate Name
Young, David, , Rep.,

Office Sought: House
 Senate
 President
State: IA District: 03

Disbursement For: 2018
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 77472647

Amount of Each Disbursement this Period

ACLI Event: February 27, 2018

Memo Item

Full Name (Last, First, Middle Initial)

C. NewDem PAC

Mailing Address 607 14th Street, NW
Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Void - Uncleared Disbursement (dated 2/6/17)

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 77670874

Amount of Each Disbursement this Period

Void - Uncleared Disbursement (dated 2/6/17)

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. The Hawkeye PAC

Mailing Address P.O. Box 7255

City
Des Moines

State
IA

Zip Code
50309

Purpose of Disbursement
Void - Uncleared Disbursement (dated 11/27/17)

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	1	8

FEC Identification Number

C C00379479

Transaction ID : 77670875

Amount of Each Disbursement this Period

- 2500.00

Memo Item (dated 11/27/17)

Full Name (Last, First, Middle Initial)

B. Common Sense Colorado

Mailing Address P.O. Box 1978

City
Denver

State
CO

Zip Code
80201

Purpose of Disbursement
Void - Uncleared Disbursement (dated 11/15/17)

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	8

FEC Identification Number

C C00491936

Transaction ID : 77670877

Amount of Each Disbursement this Period

- 2500.00

Memo Item (dated 11/15/17)

Full Name (Last, First, Middle Initial)

C. Terri PAC

Mailing Address 499 S Capitol Street SW
Suite 404

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
Void - Uncleared Disbursement (dated 9/18/17)

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		9	1		2	0	1	8

FEC Identification Number

C C00525030

Transaction ID : 77670878

Amount of Each Disbursement this Period

- 2500.00

Memo Item (dated 9/18/17)

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

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

- 7500.00

150000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address

City
Austin

State
TX

Zip Code

Purpose of Disbursement
2017 POL Income Tax Payment

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		3	0		2	0	1	8		

FEC Identification Number

C []

Transaction ID : 77670750

Amount of Each Disbursement this Period

[] 106.00

2017 POL Income Tax Payment

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

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

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

[] 106.00

[] 106.00