

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 OR AMENDED
[X] (N) [] (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 05 / 01 / 2016 through 05 / 31 / 2016

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

Signature of Treasurer Mr. Bruce C. Frisbie [Electronically Filed] Date 06 / 20 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

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="2016"/>		137248.25
(b) Cash on Hand at Beginning of Reporting Period.....	195893.89	
(c) Total Receipts (from Line 19)	54413.51	412638.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	250307.40	549886.40
7. Total Disbursements (from Line 31).....	94589.83	394168.83
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	155717.57	155717.57
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Massachusetts Mutual Life Insurance Company Political Action Committee

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	37918.63	271639.65
(ii) Unitemized	16435.22	136824.98
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	54353.85	408464.63
(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)	54353.85	408464.63
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	927.89
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	59.66	245.63
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))..... ▶	54413.51	412638.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	54413.51	412638.15

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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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	52.33	1722.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	52.33	1722.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	94500.00	388500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	37.50	3772.15
(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)).....	37.50	3772.15
29. Other Disbursements	0.00	174.19
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	94589.83	394168.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	94589.83	394168.83

DETAILED SUMMARY PAGE
of Disbursements

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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)	54353.85	408464.63
34. Total Contribution Refunds (from Line 28(d))	37.50	3772.15
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54316.35	404692.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	52.33	1722.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	927.89
38. Net Operating Expenditures (subtract Line 37 from Line 36)	52.33	794.60

**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 6 OF 130
	<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. CALE P. Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 1956 LONGWOOD DR
 City State Zip Code
 BATON ROUGE LA 70808-1247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF GENERAL INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1615.50

Date of Receipt
 05 / 31 / 2016
Transaction ID : 15009466
 Amount of Each Receipt this Period
 384.60
 Memo Item

B. DANIEL J. Shanahan
 Full Name (Last, First, Middle Initial)
 Mailing Address 8412 NORMAN ESTATES WAY
 City State Zip Code
 RALEIGH NC 27613-5963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF GENERAL INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 413.02

Date of Receipt
 05 / 31 / 2016
Transaction ID : 20239307
 Amount of Each Receipt this Period
 106.10
 Memo Item

C. DAVID N. Jacowitz
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 S PITTSFORD HILL
 City State Zip Code
 PITTSFORD NY 14534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF GENERAL INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 05 / 31 / 2016
Transaction ID : 22749919
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	690.70
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 7 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. JOHN ROGAN
Full Name (Last, First, Middle Initial)
Mailing Address 5 AUBURN RD
City FRANKLIN State MA Zip Code 02038-3456
FEC ID number of contributing federal political committee. **C**
Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP AGENCY FOCUS TEAM
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 05 / 26 / 2016
Transaction ID : 71435391
Amount of Each Receipt this Period 400.00
 Memo Item

B. MR. JEFFREY M DUBE
Full Name (Last, First, Middle Initial)
Mailing Address 41 RED HILL DR
City GLASTONBURY State CT Zip Code 06033-3128
FEC ID number of contributing federal political committee. **C**
Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & ACTUARY
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 05 / 26 / 2016
Transaction ID : 71444847
Amount of Each Receipt this Period 1500.00
 Memo Item

C. MS. ALISON B WEISS
Full Name (Last, First, Middle Initial)
Mailing Address 1209 GATEWOOD DR
City ALEXANDRIA State VA Zip Code 22307-2031
FEC ID number of contributing federal political committee. **C**
Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - FEDERAL GOV RELATIO
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 05 / 26 / 2016
Transaction ID : 71543010
Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3400.00
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: PAGE 8 OF 130
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. MR. DARRELL L OLIVEIRA
 Full Name (Last, First, Middle Initial)
 Mailing Address 202 ELLINGTON RD
 City State Zip Code
 LONGMEADOW MA 01106-1510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. VICE PRESIDENT DEFINED BENEFITS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2016
Transaction ID : 71544172
 Amount of Each Receipt this Period
 400.00
 Memo Item

B. MR. KEITH M MCDONAGH
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 CONSERVATION RD
 City State Zip Code
 SUFFIELD CT 06078-2443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. SENIOR VICE PRESIDENT - RS FINANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2016
Transaction ID : 71544659
 Amount of Each Receipt this Period
 2000.00
 Memo Item

C. MR. JEFFREY C GRAVES
 Full Name (Last, First, Middle Initial)
 Mailing Address 5909 DALECROSS CT
 City State Zip Code
 GLEN ALLEN VA 23059-6963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. AGENCY FOCUS TEAM CONSULTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : 71545172
 Amount of Each Receipt this Period
 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BERNARD T. GARRAH
 Full Name (Last, First, Middle Initial)
 Mailing Address 32651 GREYSTONE CIR
 City AVON LAKE State OH Zip Code 44012-3330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **05 / 05 / 2016**
Transaction ID : 71776117
 Amount of Each Receipt this Period **125.00**
 Memo Item

B. WILLIAM SCHINDLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 205 WEISER PL
 City TRAPPE State PA Zip Code 19426-2230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt **05 / 05 / 2016**
Transaction ID : 71776119
 Amount of Each Receipt this Period **100.00**
 Memo Item

C. PATRICK F. Thuecks
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 MONICA DR
 City ALLEN State TX Zip Code 75013-3351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation GENERAL INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1250.00**

Date of Receipt **05 / 04 / 2016**
Transaction ID : 71776146
 Amount of Each Receipt this Period **1250.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **1475.00**
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DOUGLAS W. VAN ORDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1524 WOODGROVE WAY
 City ROSEVILLE State CA Zip Code 95661-4024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.40

Date of Receipt 05 / 05 / 2016
Transaction ID : 71776154
 Amount of Each Receipt this Period 83.35
 Memo Item

B. SYLVIA C. Young
 Full Name (Last, First, Middle Initial)
 Mailing Address 9211 63RD PL W
 City MUKILTEO State WA Zip Code 98275-3531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 266.68

Date of Receipt 05 / 05 / 2016
Transaction ID : 71776155
 Amount of Each Receipt this Period 66.67
 Memo Item

C. DALE J. CATHCART, DALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9036 WIND WARRIOR AVE
 City LAS VEGAS State NV Zip Code 89143-5415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 62.50

Date of Receipt 05 / 31 / 2016
Transaction ID : 71777436
 Amount of Each Receipt this Period 0.00
 Memo Item
 Refund(s) on Schedule B Totalling \$37.50 This changes the YTD Total to \$62.50

SUBTOTAL of Receipts This Page (optional).....▶ 150.02
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 11 OF 130
	<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	<input type="checkbox"/> 17

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

A. DAVID L. Austin
Full Name (Last, First, Middle Initial)

Mailing Address 10505 NW 75TH PL

City GRIMES State IA Zip Code 50111-1064

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

Name of Employer SELF Occupation GENERAL INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 397.95

Date of Receipt 05 / 31 / 2016
Transaction ID : 7916176

Amount of Each Receipt this Period 113.70

Memo Item

B. MICHAEL J. Maletteri
Full Name (Last, First, Middle Initial)

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 SELF Occupation GENERAL INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 31 / 2016
Transaction ID : 7935677

Amount of Each Receipt this Period 200.00

Memo Item

C. GREGORY L. Kaltenbach
Full Name (Last, First, Middle Initial)

Mailing Address 1 RAND CT

City COTO DE CAZA State CA Zip Code 92679-5148

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

Name of Employer SELF Occupation GENERAL INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 357.18

Date of Receipt 05 / 31 / 2016
Transaction ID : 7937315

Amount of Each Receipt this Period 119.06

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 432.76

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 12 OF 130
	<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	<input type="checkbox"/> 17

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

A. RICARDO M. ALFONSO
Full Name (Last, First, Middle Initial)

Mailing Address 11 KENSINGTON DR

City NORTH BARRINGTON State IL Zip Code 60010-6960

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

Name of Employer SELF Occupation GENERAL INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 792.80

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1120127747621

Amount of Each Receipt this Period 243.90

Memo Item

P/R Deduction (\$243.90 Monthly)

B. MR. ERIC H WIETSMA
Full Name (Last, First, Middle Initial)

Mailing Address 3 VALLEY VIEW DR

City WILBRAHAM State MA Zip Code 01095-2363

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP - RS SALES & PARTICIPANT DEVELOPI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1120474547621

Amount of Each Receipt this Period 53.84

Memo Item

P/R Deduction (\$26.92 Bi-Weekly)

C. MS. SUSAN J SCANLON
Full Name (Last, First, Middle Initial)

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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - COMPLIANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 427.79

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1120474947621

Amount of Each Receipt this Period 77.78

Memo Item

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

SUBTOTAL of Receipts This Page (optional).....▶ 375.52

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 13 OF 130
	<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	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. MR. MARK ROELLIG

Mailing Address 11 COBTAIL WAY

City SIMSBURY State CT Zip Code 06070-2530

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP & GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2115.30**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR1120475447621

Amount of Each Receipt this Period **384.60**

Memo Item

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

Full Name (Last, First, Middle Initial)
B. ANDREW W. TODD, ANDREW W

Mailing Address 8374 LABONT WAY

City EDEN PRAIRIE State MN Zip Code 55344-4305

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **891.70**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR1135598747621

Amount of Each Receipt this Period **208.34**

Memo Item

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

Full Name (Last, First, Middle Initial)
C. MS. DEBRA PALERMINO

Mailing Address 16 RIDGE RD

City BRISTOL State CT Zip Code 06010-7362

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP - HUMAN RESOURCES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **961.50**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR1156272847621

Amount of Each Receipt this Period **96.15**

Memo Item

P/R Deduction (\$0.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	689.09
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. MR. TIMOTHY CARMON
Full Name (Last, First, Middle Initial)

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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - RISK MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.17

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1233812047621

Amount of Each Receipt this Period 76.94

Memo Item

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

B. SEAN GOODEN
Full Name (Last, First, Middle Initial)

Mailing Address 10151 WOODROSE LN

City HIGHLANDS RANCH State CO Zip Code 80129-5404

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 831.87

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1233883047621

Amount of Each Receipt this Period 166.30

Memo Item

P/R Deduction (\$166.30 Monthly)

C. MR. ANTHONY SCIACCA
Full Name (Last, First, Middle Initial)

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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1793.34

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1264218147621

Amount of Each Receipt this Period 269.24

Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 512.48

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 15 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MR. KENNETH MI GACEVICH
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **621.50**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1264219247621
 Amount of Each Receipt this Period **113.00**
 Memo Item
 P/R Deduction (\$56.50 Bi-Weekly)

B. MS. AMANDA H WALLACE
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 CARRIAGE DR
 City TOLLAND State CT Zip Code 06084-2910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - OPERATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1285750047621
 Amount of Each Receipt this Period **50.00**
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. MS. ALETHEA O'DONNELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 172 SNELL ST
 City AMHERST State MA Zip Code 01002-2556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP COMPLIANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **296.45**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1285752347621
 Amount of Each Receipt this Period **53.90**
 Memo Item
 P/R Deduction (\$26.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	216.90
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 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MR. BRADLEY LUCIDO
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP CHIEF COMPLIANCE OFF & DEP GEN C
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1057.65

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1285753947621
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

B. MR. JOHN PHILLIPS
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 MENDON RD
 City SUTTON State MA Zip Code 01590-1135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1285754147621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

C. MR. JEFFREY T PRINCE
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1334223447621
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	323.06
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 17 OF 130
	<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	<input type="checkbox"/> 17

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

A. MR. PHILIP S WELLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 N BEACON ST
 City HARTFORD State CT Zip Code 06105-2247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP & CHIEF COMP OFFICER INST. FUNDS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **296.12**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1342766147621
 Amount of Each Receipt this Period **53.84**
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. GREGORY E DEAVENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 HENLEY COMMONS
 City FARMINGTON State CT Zip Code 06032-1553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT & CONTROLLER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **846.45**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1342771947621
 Amount of Each Receipt this Period **153.90**
 Memo Item
 P/R Deduction (\$76.95 Bi-Weekly)

C. MR. JOHN W CHANDLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 118 COLONY RD
 City LONGMEADOW State MA Zip Code 01106-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **846.45**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1355574347621
 Amount of Each Receipt this Period **153.90**
 Memo Item
 P/R Deduction (\$76.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	361.64
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. MICHAEL R FANNING
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP - MASSMUTUAL U.S.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1360837747621
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. VICTOR B. Goldman
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation GENERAL INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 933.78

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1368736147621
 Amount of Each Receipt this Period 192.30
 Memo Item
 P/R Deduction (\$156.25 Bi-Weekly)

C. MR. HUGH BARRETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 PONDVIEW DR
 City SPRINGFIELD State MA Zip Code 01118-1145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1386532047621
 Amount of Each Receipt this Period 38.50
 Memo Item
 P/R Deduction (\$19.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	615.40
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:	PAGE 19 OF 130
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. VINCENTE DIPIETRO, VINCENTE
Full Name (Last, First, Middle Initial)
Mailing Address 3180 WOODS EDGE DR
City GARNET VALLEY State PA Zip Code 19060-6859
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INSURANCE AGENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **208.30**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1391523647621
Amount of Each Receipt this Period **41.66**
 Memo Item
P/R Deduction (\$20.83 Semi-Monthly)

B. MS. PAULA T RYAN
Full Name (Last, First, Middle Initial)
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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **423.06**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1391580647621
Amount of Each Receipt this Period **76.92**
 Memo Item
P/R Deduction (\$38.46 Bi-Weekly)

C. DAVID GRODIN, DAVID
Full Name (Last, First, Middle Initial)
Mailing Address 1391 VIEW DR
City SAN LEANDRO State CA Zip Code 94577-5336
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INSURANCE AGENT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1417170847621
Amount of Each Receipt this Period **50.00**
 Memo Item
P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... **168.58**
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. JOHN VACCARO
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 ANNA MARIE LN
 City State Zip Code
 E LONGMEADOW MA 01028-3018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. SENIOR VP - SALES & DISTRIBUTION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 846.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR1434639347621
 Amount of Each Receipt this Period
 153.90
 Memo Item
 P/R Deduction (\$76.95 Bi-Weekly)

B. MR. DAVID J COUTU
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 MELLISSA CIR
 City State Zip Code
 GREENVILLE RI 02828-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR1479403847621
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. MR. ROGER PUTNAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 THE GLADE
 City State Zip Code
 SIMSBURY CT 06070-1041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. SENIOR VICE PRESIDENT - OPERATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1057.65

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR1479403947621
 Amount of Each Receipt this Period
 192.30
 Memo Item
 P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	423.12
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 21 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. WILLIAM D OBERG
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.17

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1479405047621
 Amount of Each Receipt this Period 76.94
 Memo Item
 P/R Deduction (\$38.47 Bi-Weekly)

B. MR. MICHAEL MCKENZIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 WESTCHESTER DR
 City CANTON State MA Zip Code 02021-2449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - RS OPERATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1491588247621
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. MR. DOUGLAS RUSSELL
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP - STRATEGY AND CORP DEVELOPMEN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2194.26

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1500908547621
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	538.54
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 22 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. JOHN M YOUNG
Full Name (Last, First, Middle Initial)

Mailing Address 7 LAMPERCOCK LN

City LINCOLN State RI Zip Code 02865-4201

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

Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1541043547621

Amount of Each Receipt this Period 53.84

Memo Item

P/R Deduction (\$26.92 Bi-Weekly)

B. MR. THOMAS WALL
Full Name (Last, First, Middle Initial)

Mailing Address 4540 DEEP GLEN WAY

City DOYLESTOWN State PA Zip Code 18902-8801

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EXTERNAL WHOLESALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1541046447621

Amount of Each Receipt this Period 40.00

Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

C. MR. MARK VIVIANO
Full Name (Last, First, Middle Initial)

Mailing Address 105 NORTHFIELD RD

City LONGMEADOW State MA Zip Code 01106-2143

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP INVESTMENT OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1541058547621

Amount of Each Receipt this Period 38.50

Memo Item

P/R Deduction (\$19.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	132.34
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 23 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CARLOS HERNANDEZ, CARLOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 8600 SW 84TH AVE
 City MIAMI State FL Zip Code 33143-6912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1541766147621
 Amount of Each Receipt this Period 66.70
 Memo Item
 P/R Deduction (\$33.35 Semi-Monthly)

B. MS. TARYN LEONARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 MAGAZINE ST
 City CAMBRIDGE State MA Zip Code 02139-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.45

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1560527847621
 Amount of Each Receipt this Period 53.90
 Memo Item
 P/R Deduction (\$26.95 Bi-Weekly)

C. MS. RACHEL JAEGGI
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1564484347621
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	197.60
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 24 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. MR. KEVIN RASCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 48 FOX DEN RD
 City WEST SIMSBURY State CT Zip Code 06092-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP & ASSISTANT GENERAL COUNSEL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **634.70**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1569232347621
 Amount of Each Receipt this Period **115.40**
 Memo Item
 P/R Deduction (\$57.70 Bi-Weekly)

B. MS. ANNE-MARIE SZMYT
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 GLENN DR
 City WILBRAHAM State MA Zip Code 01095-1439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - IT PROFESSIONAL SER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **211.75**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1581875047621
 Amount of Each Receipt this Period **38.50**
 Memo Item
 P/R Deduction (\$19.25 Bi-Weekly)

C. MR. WILLIAM DEBLOIS
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **481.25**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1581879947621
 Amount of Each Receipt this Period **87.50**
 Memo Item
 P/R Deduction (\$43.75 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	241.40
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 25 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. DAMON BATES
Full Name (Last, First, Middle Initial)
Mailing Address 5 INGRAHAM RD

City WELLESLEY	State MA	Zip Code 02482-6905
-------------------	-------------	------------------------

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation VICE PRESIDENT - MARKETING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
296.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR1581880047621

Amount of Each Receipt this Period
53.84

Memo Item

P/R Deduction (\$26.92 Bi-Weekly)

B. MR. GARETH ROSS
Full Name (Last, First, Middle Initial)
Mailing Address 82 COTTAGE ST

City AMHERST	State MA	Zip Code 01002-2125
-----------------	-------------	------------------------

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SVP - CHIEF CUSTOMER OFFICER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR1596854847621

Amount of Each Receipt this Period
76.92

Memo Item

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

C. MS. LORIE VALLE-YANEZ
Full Name (Last, First, Middle Initial)
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 MASSACHUSETTS MUTUAL LIFE INS.	Occupation VICE PRESIDENT - DIVERSITY & INCLUSION
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
423.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2016

Transaction ID : PR1606911947621

Amount of Each Receipt this Period
76.92

Memo Item

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

SUBTOTAL of Receipts This Page (optional).....	207.68
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 26 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. HERBERT WI WHITAKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 INDIAN FIELD RD
 City HEBRON State CT Zip Code 06248-1337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP CHANGE LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1606915947621
 Amount of Each Receipt this Period 38.50
 Memo Item
 P/R Deduction (\$19.25 Bi-Weekly)

B. MR. KEVIN P SHERIDAN
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VP WORKSITE PRODUCT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.17

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1606916147621
 Amount of Each Receipt this Period 76.94
 Memo Item
 P/R Deduction (\$38.47 Bi-Weekly)

C. GEORGE BENOIT JR, GEORGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 69 JILLIAN WAY
 City WESTPORT State MA Zip Code 02790-4231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1619196047621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	157.10
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. VAN M. HESS, VAN M
 Full Name (Last, First, Middle Initial)
 Mailing Address 555 35TH ST
 City MANHATTAN BEACH State CA Zip Code 90266-3407
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1637459647621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. MR. MICHAEL ELDREDGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 COPPER VALLEY CT
 City CHESHIRE State CT Zip Code 06410-1761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 427.79

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1645209247621
 Amount of Each Receipt this Period 77.78
 Memo Item
 P/R Deduction (\$38.89 Bi-Weekly)

C. MR. SRINIVAS DRONAMRAJU
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 ALLEN RIDGE DR
 City ELLINGTON State CT Zip Code 06029-3666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP - ENTERPRISE INFORMATION RISK MC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 634.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1645210247621
 Amount of Each Receipt this Period 115.40
 Memo Item
 P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	243.18
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. RYAN C. HICKS, RYAN C
 Full Name (Last, First, Middle Initial)
 Mailing Address 1350 ROYAL PARK BLVD
 City SOUTH PARK State PA Zip Code 15129-8929
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1645235147621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

B. MATTHEW A. GRIFFITH, MATTHEW A
 Full Name (Last, First, Middle Initial)
 Mailing Address 517 NW 156TH CIR
 City EDMOND State OK Zip Code 73013-2087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1645265347621
 Amount of Each Receipt this Period 66.70
 Memo Item
 P/R Deduction (\$33.35 Semi-Monthly)

C. MS. AMY LY FERRERO
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 STONEHILL RD
 City E LONGMEADOW State MA Zip Code 01028-1367
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - CAPABILITY DELIVERY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1663791247621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 162.20
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MS. HEATHER SMILEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 KENDALL HILL RD
 City STERLING State MA Zip Code 01564-1515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP - RS MARKETING & COMMUNICATIONS
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date 634.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1663792547621
 Amount of Each Receipt this Period 115.40
 P/R Deduction (\$57.70 Bi-Weekly)

B. ABIGAIL S. SPAULDING
 Full Name (Last, First, Middle Initial)
 Mailing Address 144 KENNER AVE
 City NASHVILLE State TN Zip Code 37205-2219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date 208.15

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1663810147621
 Amount of Each Receipt this Period 41.63
 P/R Deduction (\$41.63 Monthly)

C. MICHAEL J. Sacher
 Full Name (Last, First, Middle Initial)
 Mailing Address 1861 LINDSEY LN
 City CINCINNATI State OH Zip Code 45230-2198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation GENERAL INSURANCE AGENT
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date 511.16

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1672298147621
 Amount of Each Receipt this Period 111.12
 P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional).....	268.15
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. SCOTT BUFFINGTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 16671 PISTOIA WAY
 City NAPLES State FL Zip Code 34110-3239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - RS NATIONAL SALES
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 423.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1688809847621
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

B. JOHN S. HETTIGER, JOHN S
 Full Name (Last, First, Middle Initial)
 Mailing Address 12484 BURKE DR
 City CARMEL State IN Zip Code 46032-7284
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1692497547621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

C. BRYCE L. MILLER, BRYCE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6017 BLACK HEATH DR
 City FORT MILL State SC Zip Code 29707-2534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1702297347621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... 168.66
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 130
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 58 MIDLAND RD

City ROSLYN HEIGHTS State NY Zip Code 11577-1415

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1709973047621

Amount of Each Receipt this Period 41.66

Memo Item

P/R Deduction (\$20.83 Semi-Monthly)

B. GREGORY T. FREEMAN, GREGORY
Full Name (Last, First, Middle Initial)

Mailing Address 5901 N MERIDIAN ST

City INDIANAPOLIS State IN Zip Code 46208-1532

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1710289847621

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$25.00 Semi-Monthly)

C. MS. JENNIFER ORZELL
Full Name (Last, First, Middle Initial)

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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & ACTUARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1717732347621

Amount of Each Receipt this Period 76.92

Memo Item

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

SUBTOTAL of Receipts This Page (optional).....▶ 168.58

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 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MICHAEL F. MORAN, MICHAEL F
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 NORTHERN AVE
 City BOSTON State MA Zip Code 02210-2052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1717744847621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

B. TIMOTHY D. STARK, TIMOTHY D
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.03

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1728061447621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. BRIAN KAPLAN, BRIAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 E 71ST ST APT 16K
 City NEW YORK State NY Zip Code 10021-5242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1728066547621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 33 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MS. WENDY BENSON
Full Name (Last, First, Middle Initial)

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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - SALES OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1728095747621

Amount of Each Receipt this Period 76.92

Memo Item

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

B. CHRISTOPHE J. JACKSON
Full Name (Last, First, Middle Initial)

Mailing Address 7426 COBBLESTONE WEST DR

City INDIANAPOLIS State IN Zip Code 46236-9742

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.15

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1759838847621

Amount of Each Receipt this Period 66.70

Memo Item

P/R Deduction (\$33.35 Semi-Monthly)

C. BAVY U. LOPEZ, BAVY U
Full Name (Last, First, Middle Initial)

Mailing Address 2060 ELIZA GLYNNE LN

City KNOXVILLE State TN Zip Code 37931-3681

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1762108047621

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 193.62

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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. DONALD GRIFFITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 PINEWOOD DR
 City State Zip Code
 LONGMEADOW MA 01106-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. VICE PRESIDENT - COMPLIANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR1779022347621
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. MS. KELLY J RUTHERFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 FIELD DR
 City State Zip Code
 SIMSBURY CT 06070-1207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. AVP BUSINESS OPERATIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR1824106347621
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. MR. CHRISTOPHER COBURN
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 BAYBERRY DR
 City State Zip Code
 EASTHAMPTON MA 01027-2735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. AVP MARKETING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR1841433147621
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	176.92
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 35 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. CHARLES DA TATRO
Full Name (Last, First, Middle Initial)
Mailing Address 49 GEORGE ST
City MENDON State MA Zip Code 01756-1139
FEC ID number of contributing federal political committee. **C**
Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP & ACTUARY - PRODUCT DEVEL
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **423.17**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1853990047621
Amount of Each Receipt this Period **76.94**
 Memo Item
P/R Deduction (\$38.47 Bi-Weekly)

B. MR. JOHN FR KENNEDY
Full Name (Last, First, Middle Initial)
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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - DISTRIBUTION STRATEK
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **423.06**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1913873347621
Amount of Each Receipt this Period **76.92**
 Memo Item
P/R Deduction (\$38.46 Bi-Weekly)

C. MR. MELVIN TI CORBETT
Full Name (Last, First, Middle Initial)
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 MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP & CHIEF INVESTMENT OFFICER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2115.30**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1929995847621
Amount of Each Receipt this Period **384.60**
 Memo Item
P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **538.46**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MS. CHRISTINE FREDERICK
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - COMPLIANCE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **317.35**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1934313147621
 Amount of Each Receipt this Period **57.70**
 Memo Item
 P/R Deduction (\$28.85 Bi-Weekly)

B. DANIEL GOLDSMITH, DANIEL
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **573.16**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1934322547621
 Amount of Each Receipt this Period **125.00**
 Memo Item
 P/R Deduction (\$62.50 Semi-Monthly)

C. ROBERT J. SMITH JR, ROBERT J
 Full Name (Last, First, Middle Initial)
 Mailing Address 491 PASEO SOLEADO
 City PALM SPRINGS State CA Zip Code 92264-8477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **266.80**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR1934331947621
 Amount of Each Receipt this Period **66.70**
 Memo Item
 P/R Deduction (\$33.35 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	249.40
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 37 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. CARL PA STEINHILBER
 Full Name (Last, First, Middle Initial)
 Mailing Address 158 CHARLES ST
 City TOLLAND State CT Zip Code 06084-2258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SALES MANAGER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 244.53

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1947062447621
 Amount of Each Receipt this Period 44.46
 Memo Item
 P/R Deduction (\$22.23 Bi-Weekly)

B. MR. DOMINIC BLUE
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 EASTHAM LANE
 City LONGMEADOW State MA Zip Code 01106-2342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP & DEPUTY GEN COUNS - CORPORATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1947062947621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

C. JEREMY LINDQUIST, JEREMY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 ELIJAH HILL LN
 City LONDONDERRY State NH Zip Code 03053-3958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 207.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1950887147621
 Amount of Each Receipt this Period 52.20
 Memo Item
 P/R Deduction (\$26.10 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... 150.50
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. MICHAEL BOUYEA
Full Name (Last, First, Middle Initial)

Mailing Address 2 TIGGER LANE

City SOUTH HADLEY State MA Zip Code 01075-3315

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP MASSMUTUAL WAY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.53

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR1961247247621

Amount of Each Receipt this Period
 44.46

Memo Item

P/R Deduction (\$22.23 Bi-Weekly)

B. BERKELY ARRANTS, BERKELY
Full Name (Last, First, Middle Initial)

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 SELF Occupation INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR1961263947621

Amount of Each Receipt this Period
 25.00

Memo Item

P/R Deduction (\$25.00 Semi-Monthly)

C. STEVEN E. CHICK, STEVEN E
Full Name (Last, First, Middle Initial)

Mailing Address 124 ELM ST

City WILLIAMSTOWN State MA Zip Code 01267-2576

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR1965200747621

Amount of Each Receipt this Period
 38.66

Memo Item

P/R Deduction (\$13.66 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	108.12
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 39 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. CHRISTOPHE ROBINETTE
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 HERBERT CT
 City BRENWOOD State TN Zip Code 37027-7653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1980140947621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

B. JOSEPH C. GODSEY III, JOSEPH C
 Full Name (Last, First, Middle Initial)
 Mailing Address 730 LACHMAN LN
 City PACIFIC PLSDS State CA Zip Code 90272-2803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR1980161047621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

C. MR. IAN M FOWLER
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2006647547621
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	168.66
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. RYAN J. BOTNER, RYAN
Full Name (Last, First, Middle Initial)

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 SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2006660047621

Amount of Each Receipt this Period 83.34

Memo Item

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

B. JOSHUA BACH, JOSHUA
Full Name (Last, First, Middle Initial)

Mailing Address 101 28TH AVE NE

City FARGO State ND Zip Code 58102-1704

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2006660447621

Amount of Each Receipt this Period 41.66

Memo Item

P/R Deduction (\$20.83 Semi-Monthly)

C. WILLIAM S. ROBERTSON, WILLIAM S
Full Name (Last, First, Middle Initial)

Mailing Address 5100 FM 126

City NOLAN State TX Zip Code 79537-1702

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2016623347621

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 175.00

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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. RICHARD MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 67 SEWALL WOODS RD

City MELROSE State MA Zip Code 02176-1709

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2020232347621

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

B. MR. LUIS O CONCEPCION
Full Name (Last, First, Middle Initial)

Mailing Address 12 HAWKS RIDGE

City AVON State CT Zip Code 06001-4417

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP & COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2030723147621

Amount of Each Receipt this Period 38.50

Memo Item

P/R Deduction (\$19.25 Bi-Weekly)

C. MR. RUSSELL AR NORRIS
Full Name (Last, First, Middle Initial)

Mailing Address 21 GREAVES RD W

City STAFFORD SPRINGS State CT Zip Code 06076-3018

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP GROUP BUSINESS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 203.53

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2030740247621

Amount of Each Receipt this Period 30.76

Memo Item

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 119.26

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MR. WILLIAM T. ABRAMOWICZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 723 TAFT ROAD
 City HINSDALE State IL Zip Code 60521-4834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation REGIONAL SALES MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2030743247621
 Amount of Each Receipt this Period 38.50
 Memo Item
 P/R Deduction (\$19.25 Bi-Weekly)

B. MR. DENNIS E. GLYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 37 DANIEL RIDGE
 City WESTFIELD State MA Zip Code 01085-4151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation PRODUCT MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.53

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2030750547621
 Amount of Each Receipt this Period 44.46
 Memo Item
 P/R Deduction (\$22.23 Bi-Weekly)

C. MR. TROY K. ENGLERTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 7253 W MELINDA LANE
 City GLENDALE State AZ Zip Code 85308-9538
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP GROUP BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.58

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2030750747621
 Amount of Each Receipt this Period 55.56
 Memo Item
 P/R Deduction (\$27.78 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	138.52
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 43 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BRET A. HARTUNG, BRET A
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2038720447621
 Amount of Each Receipt this Period 125.00
 Memo Item
 P/R Deduction (\$62.50 Semi-Monthly)

B. JUSTIN HAYWARD, JUSTIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 WESTON RD
 City WELLESLEY State MA Zip Code 02482-6313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2041714647621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

C. MR. DANIEL J MCGEE
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 916.85

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2045466547621
 Amount of Each Receipt this Period 166.70
 Memo Item
 P/R Deduction (\$83.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	333.36
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 44 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MS. RACHEL AY PARENT
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation MANAGING DIRECTOR - PROJECT MGT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **611.16**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2052377647621
 Amount of Each Receipt this Period **111.12**
 Memo Item
 P/R Deduction (\$55.56 Bi-Weekly)

B. MR. MICHAEL E HENDERLONG
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **423.50**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2052379347621
 Amount of Each Receipt this Period **77.00**
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. MS. SUSAN JE GARRETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 SOMERSET LN
 City SIMSBURY State CT Zip Code 06070-1716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - HR CONSULTIN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **916.85**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2076523947621
 Amount of Each Receipt this Period **166.70**
 Memo Item
 P/R Deduction (\$83.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	354.82
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 45 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MS. LISA MA TODD
Full Name (Last, First, Middle Initial)
Mailing Address 945 E BROADWAY
City BOSTON State MA Zip Code 02127-2324
FEC ID number of contributing federal political committee. **C**
Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP SALES
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **289.52**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2106069747621
Amount of Each Receipt this Period **52.64**
 Memo Item
P/R Deduction (\$26.32 Bi-Weekly)

B. MR. DANIEL L FLYNN
Full Name (Last, First, Middle Initial)
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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **611.16**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2106071647621
Amount of Each Receipt this Period **111.12**
 Memo Item
P/R Deduction (\$55.56 Bi-Weekly)

C. MR. ERIC P PIRONE
Full Name (Last, First, Middle Initial)
Mailing Address 536 SAN RAFAEL AVE
City BELVEDERE TIBURON State CA Zip Code 94920-2338
FEC ID number of contributing federal political committee. **C**
Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **687.50**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR2154001147621
Amount of Each Receipt this Period **125.00**
 Memo Item
P/R Deduction (\$62.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **288.76**
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 46 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 328 GREYBULL DR

City BEAR State DE Zip Code 19701-2174

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

Name of Employer Occupation
INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2154019347621

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. KEVIN E. STOKESBARY, KEVIN E
Full Name (Last, First, Middle Initial)

Mailing Address 7133 SAINT ANDREWS LN SE

City SNOQUALMIE State WA Zip Code 98065-9092

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

Name of Employer Occupation
SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2159450547621

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$25.00 Semi-Monthly)

C. MUHAMMAD PETRUS
Full Name (Last, First, Middle Initial)

Mailing Address 1523 DOROTHY LN

City FULLERTON State CA Zip Code 92831-2900

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

Name of Employer Occupation
SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR2159461747621

Amount of Each Receipt this Period
60.00

Memo Item

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 160.00

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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ADAM CHERNEY
Full Name (Last, First, Middle Initial)

Mailing Address 1099 DELMAR AVE

City FRANKLIN SQ State NY Zip Code 11010-2740

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 331.90

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2159503147621

Amount of Each Receipt this Period 66.30

Memo Item

P/R Deduction (\$66.30 Monthly)

B. MR. SCOTT DA BROWN
Full Name (Last, First, Middle Initial)

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 CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1527.79

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2166460247621

Amount of Each Receipt this Period 277.78

Memo Item

P/R Deduction (\$138.89 Bi-Weekly)

C. MARK Keating
Full Name (Last, First, Middle Initial)

Mailing Address 3711 OAKMONT ST SE

City GRAND RAPIDS State MI Zip Code 49546-9216

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

Name of Employer SELF Occupation GENERAL INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2192477047621

Amount of Each Receipt this Period 100.00

Memo Item

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	444.08
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 48 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. GREGORY W. BRENNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2219 OAKLEAF DR
 City FRANKLIN State TN Zip Code 37064-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2192491447621
 Amount of Each Receipt this Period 66.70
 Memo Item
 P/R Deduction (\$33.35 Semi-Monthly)

B. MR. DAVID J SPRINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1170 ADAMS LN
 City SOUTHLAKE State TX Zip Code 76092-8501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 289.52

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2202061247621
 Amount of Each Receipt this Period 52.64
 Memo Item
 P/R Deduction (\$26.32 Bi-Weekly)

C. MR. DAVID ACSELROD
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - NEW BUSINESS & UNDE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2202068947621
 Amount of Each Receipt this Period 70.00
 Memo Item
 P/R Deduction (\$35.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	189.34
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 49 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CHARLES DOWNS
Full Name (Last, First, Middle Initial)
Mailing Address 155 OCEAN LANE DR
City KEY BISCAWAYNE State FL Zip Code 33149-1436
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation GENERAL INSURANCE AGENT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2244953647621
Amount of Each Receipt this Period 100.00
 Memo Item
P/R Deduction (\$50.00 Bi-Weekly)

B. CHRISTOPHE M. DERHAM
Full Name (Last, First, Middle Initial)
Mailing Address 26 CURRIER PL
City CHESHIRE State CT Zip Code 06410-1460
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INSURANCE AGENT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2274978647621
Amount of Each Receipt this Period 41.66
 Memo Item
P/R Deduction (\$20.83 Semi-Monthly)

C. MS. JENNIFER RI RUTLEY
Full Name (Last, First, Middle Initial)
Mailing Address 21 LOIS LN
City NEEDHAM State MA Zip Code 02492-4421
FEC ID number of contributing federal political committee. **C**
Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP - TECHNOLOGY CREATIVE DESIGN
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 770.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR2345426547621
Amount of Each Receipt this Period 140.00
 Memo Item
P/R Deduction (\$70.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... 281.66
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 50 OF 130
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. ALAN L. MELTZER, ALAN L
 Full Name (Last, First, Middle Initial)
 Mailing Address 2000 S OCEAN BLVD
 City BOCA RATON State FL Zip Code 33432-8068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1875.15

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789845147621
 Amount of Each Receipt this Period 416.70
 Memo Item
 P/R Deduction (\$208.35 Semi-Monthly)

B. BRUCE T. RIDDLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3702 E 63RD ST
 City TULSA State OK Zip Code 74136-1523
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789860747621
 Amount of Each Receipt this Period 62.50
 Memo Item
 P/R Deduction (\$62.50 Monthly)

C. BRYAN S. HANNING
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 N SANDPIPER ST
 City WICHITA State KS Zip Code 67230-6626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.95

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789861047621
 Amount of Each Receipt this Period 83.15
 Memo Item
 P/R Deduction (\$83.15 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 562.35
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. CHRISTOPHE L. HEERDEGEN
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789871347621
 Amount of Each Receipt this Period 66.70
 Memo Item
 P/R Deduction (\$33.35 Semi-Monthly)

B. COREY A. SCHNEIDER, COREY A
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 891.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789873247621
 Amount of Each Receipt this Period 208.34
 Memo Item
 P/R Deduction (\$104.17 Semi-Monthly)

C. DAVID L. DAVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4211 83RD AVE SE
 City MERCER ISLAND State WA Zip Code 98040-4015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789882247621
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	375.04
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 52 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. EDWARD J. LEBOLD, EDWARD J
Full Name (Last, First, Middle Initial)

Mailing Address 945 OAK TER

City LAKE OSWEGO State OR Zip Code 97034-4664

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789897747621

Amount of Each Receipt this Period 58.34

Memo Item

P/R Deduction (\$29.17 Semi-Monthly)

B. GENE S. TYRRELL
Full Name (Last, First, Middle Initial)

Mailing Address 1657 SOUTHPORT DR

City RIVERSIDE State CA Zip Code 92506-5450

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789913347621

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

C. GEORGE P. BECKNELL III
Full Name (Last, First, Middle Initial)

Mailing Address 201 CRESCENT ST

City SAN ANTONIO State TX Zip Code 78209-4406

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789915647621

Amount of Each Receipt this Period 83.35

Memo Item

P/R Deduction (\$83.35 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 191.69

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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GEORGE V. CAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 2460 RIVERMONT AVE

City LYNCHBURG State VA Zip Code 24503-1546

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789915847621

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. GREGORY F. CARROLL
Full Name (Last, First, Middle Initial)

Mailing Address 6016 CAIRN TER

City BETHESDA State MD Zip Code 20817-5406

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

Name of Employer SELF Occupation INSURANCE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789921447621

Amount of Each Receipt this Period 100.00

Memo Item

P/R Deduction (\$100.00 Monthly)

C. HOWARD N. BIENENFELD
Full Name (Last, First, Middle Initial)

Mailing Address 5921 SW 33RD LN

City FT LAUDERDALE State FL Zip Code 33312-6364

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789932747621

Amount of Each Receipt this Period 83.35

Memo Item

P/R Deduction (\$83.35 Monthly)

SUBTOTAL of Receipts This Page (optional).....	233.35
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 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. IVAN C. HINRICHS, IVAN C
 Full Name (Last, First, Middle Initial)
 Mailing Address 2418 LA MAISON DR
 City CHARLOTTE State NC Zip Code 28226-6200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **208.30**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR789935247621
 Amount of Each Receipt this Period **41.66**
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

B. JAMES M. JENSEN, JAMES M
 Full Name (Last, First, Middle Initial)
 Mailing Address 7903 COPELAND RD
 City ODESSA State FL Zip Code 33556-3261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR789937147621
 Amount of Each Receipt this Period **50.00**
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

C. JAMES L. BUSH, JAMES L
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 COTTAGE ST
 City HINGHAM State MA Zip Code 02043-2202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **208.36**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR789948047621
 Amount of Each Receipt this Period **41.70**
 Memo Item
 P/R Deduction (\$20.85 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	133.36
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 55 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JEFFREY H. DUNCAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 39 DEACON PL
 City CRESSKILL State NJ Zip Code 07626-1140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789959347621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

B. JOHN C. SKOOG, JOHN C
 Full Name (Last, First, Middle Initial)
 Mailing Address 4945 PINE LN
 City EAGAN State MN Zip Code 55123-4911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789968747621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

C. JOHN R. DEGEN, JOHN R
 Full Name (Last, First, Middle Initial)
 Mailing Address 1231 W 66TH ST
 City KANSAS CITY State MO Zip Code 64113-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789976847621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	141.66
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. JOHN W. WILSON, JOHN W
 Full Name (Last, First, Middle Initial)
 Mailing Address 1321 VASSAR ST
 City HOUSTON State TX Zip Code 77006-6029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789980047621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. JOSEPH F. EPPY, JOSEPH F
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 N FEDERAL HWY
 City FORT LAUDERDALE State FL Zip Code 33301-1129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 837.53

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789983147621
 Amount of Each Receipt this Period 208.34
 Memo Item
 P/R Deduction (\$104.17 Semi-Monthly)

C. KARL J. FEITELBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 175 DERBY ST UNIT 33
 City HINGHAM State MA Zip Code 02043-4007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789989147621
 Amount of Each Receipt this Period 55.00
 Memo Item
 P/R Deduction (\$55.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	313.34
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 57 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. KATHLEEN L. DEGEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1231 W 66TH ST
 City KANSAS CITY State MO Zip Code 64113-1805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR789989247621
 Amount of Each Receipt this Period 42.00
 Memo Item
 P/R Deduction (\$42.00 Monthly)

B. LAWRENCE M. TOMCZAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 5938 SWAN CREEK DR
 City TOLEDO State OH Zip Code 43614-1021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790001747621
 Amount of Each Receipt this Period 41.67
 Memo Item
 P/R Deduction (\$41.67 Monthly)

C. LAWRENCE N. HOLDEN III
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 ARBOR RD
 City WINSTON SALEM State NC Zip Code 27104-2331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790001847621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	133.67
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. LOUIS F. GRAMMES
Full Name (Last, First, Middle Initial)

Mailing Address 990 GRANDON WAY

City MECHANICSBURG State PA Zip Code 17050-9190

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790009047621

Amount of Each Receipt this Period 90.00

Memo Item

P/R Deduction (\$90.00 Monthly)

B. MICHAEL O. BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 6512 NE 113TH ST

City EDMOND State OK Zip Code 73013-8351

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790030547621

Amount of Each Receipt this Period 70.00

Memo Item

P/R Deduction (\$70.00 Monthly)

C. MITCHELL B. STARR, MITCHELL B
Full Name (Last, First, Middle Initial)

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 SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 891.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790035447621

Amount of Each Receipt this Period 208.34

Memo Item

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

SUBTOTAL of Receipts This Page (optional).....	368.34
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 59 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. PATRICK J. DOLAN, PATRICK J
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 BERKELEY PL
 City GLEN ROCK State NJ Zip Code 07452-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.16

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790043747621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

B. PAUL H. HERZOG, PAUL H
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 HIGHLAND CT
 City GERMANTOWN HILLS State IL Zip Code 61548-9056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790046247621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

C. ROBERT R. CUSHING
 Full Name (Last, First, Middle Initial)
 Mailing Address 696 COMMERCIAL ST
 City WEYMOUTH State MA Zip Code 02189-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790056347621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	141.66
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. RALEIGH H. LANG
Full Name (Last, First, Middle Initial)
Mailing Address 6727 RAINBOW AVE
City MISSION HILLS State KS Zip Code 66208-2265
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INSURANCE AGENT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790056947621
Amount of Each Receipt this Period 42.00
 Memo Item
P/R Deduction (\$42.00 Monthly)

B. RICHARD I. KARCHEFSKY
Full Name (Last, First, Middle Initial)
Mailing Address 9839 PALMA VISTA WAY
City BOCA RATON State FL Zip Code 33428-3528
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INSURANCE AGENT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790066947621
Amount of Each Receipt this Period 41.66
 Memo Item
P/R Deduction (\$20.83 Semi-Monthly)

C. RICHARD P. VANBENSCHOTEN
Full Name (Last, First, Middle Initial)
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 SELF Occupation INSURANCE AGENT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790069047621
Amount of Each Receipt this Period 83.34
 Memo Item
P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... 167.00
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 61 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ROBERT L. HOMER
Full Name (Last, First, Middle Initial)

Mailing Address 10751 WILSHIRE AVE NE

City ALBUQUERQUE State NM Zip Code 87122-3138

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.56

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790081647621

Amount of Each Receipt this Period 51.56

Memo Item

P/R Deduction (\$26.56 Semi-Monthly)

B. ROBERT T. SINKS
Full Name (Last, First, Middle Initial)

Mailing Address 3428 HAMPTON AVE

City NASHVILLE State TN Zip Code 37215-1408

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

Name of Employer SELF Occupation GENERAL INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1041.15

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790086647621

Amount of Each Receipt this Period 208.15

Memo Item

P/R Deduction (\$208.15 Monthly)

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

Mailing Address 9 TRIUMPH CT

City FLANDERS State NJ Zip Code 07836-4404

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 415.95

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790102947621

Amount of Each Receipt this Period 83.15

Memo Item

P/R Deduction (\$83.15 Monthly)

SUBTOTAL of Receipts This Page (optional).....	342.86
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 62 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. STEPHEN D. ESTLER, STEPHEN D
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 733.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790109447621
 Amount of Each Receipt this Period 166.70
 Memo Item
 P/R Deduction (\$83.35 Semi-Monthly)

B. TODD J. MCDONALD, TODD J
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790131847621
 Amount of Each Receipt this Period 125.00
 Memo Item
 P/R Deduction (\$62.50 Semi-Monthly)

C. MR. ALAN L BLAIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 SHADY DELL LN
 City SOMERS State CT Zip Code 06071-2136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790151847621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	345.54
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 63 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. ANDREW C DICKEY
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation MANAGING DIRECTOR - STRATEGIC INVES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 846.45

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790159347621
 Amount of Each Receipt this Period 153.90
 Memo Item
 P/R Deduction (\$76.95 Bi-Weekly)

B. MR. CLIFFORD M NOREEN
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1057.76

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790184147621
 Amount of Each Receipt this Period 192.32
 Memo Item
 P/R Deduction (\$96.16 Bi-Weekly)

C. MR. CRAIG WADDINGTON
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & ACTUARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790184547621
 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 64 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. DAVID J ECHEVERRIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 36 FARMINGTON AVE
 City State Zip Code
 LONGMEADOW MA 01106-1433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. MANAGING DIR - INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790188647621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. DAVID D WHARMBY
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 VERPLANK AVE
 City State Zip Code
 STAMFORD CT 06902-8216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORNERSTONE RE ADVISERS LLC MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790192647621
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. MR. DONALD J PHELAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 HAMMERSMITH
 City State Zip Code
 AVON CT 06001-2915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORNERSTONE RE ADVISERS LLC VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790207847621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	184.60
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 65 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MS. ELIZABETH CANAVAN

Full Name (Last, First, Middle Initial)
Mailing Address 5 HAVENHURST RD

City WEST SPRINGFIELD State MA Zip Code 01089-2160

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP STRATEGIC DEVELOPMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **211.75**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR790211647621

Amount of Each Receipt this Period **38.50**

Memo Item

P/R Deduction (\$19.25 Bi-Weekly)

B. MR. HARVEY BR HOFFMAN

Full Name (Last, First, Middle Initial)
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 MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP - OPERATIONAL AND STRATEGIC RISK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1057.76**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR790231447621

Amount of Each Receipt this Period **192.32**

Memo Item

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

C. MS. JOANNE M DENVER

Full Name (Last, First, Middle Initial)
Mailing Address 48 VAIL ST

City SPRINGFIELD State MA Zip Code 01118-2161

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

Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **423.06**

Date of Receipt **05 / 31 / 2016**

Transaction ID : PR790244947621

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 66 OF 130
	<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. MR. JOHN E DEITELBAUM
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP & DEPUTY GEN COUNS USIG LAW
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1480.82**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR790248247621
 Amount of Each Receipt this Period **269.24**
 Memo Item
 P/R Deduction (\$134.62 Bi-Weekly)

B. MR. JOHN R TAILLIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 151 MCKENZIE DR
 City SOUTHLINGTON State CT Zip Code 06489-4117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR790252047621
 Amount of Each Receipt this Period **50.00**
 Memo Item
 P/R Deduction (\$25.00 Bi-Weekly)

C. MR. JOSEPH A CALABRESE
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 CANTERBURY LN
 City FEEDING HILLS State MA Zip Code 01030-1718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP SYSTEMS
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **296.12**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR790253247621
 Amount of Each Receipt this Period **53.84**
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	373.08
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: PAGE 67 OF 130
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. MR. JOSEPH R ROKOWSKI
 Full Name (Last, First, Middle Initial)
 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 MASSMUTUAL TRUST COMPANY Occupation VICE PRESIDENT - TRUST COMPANY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790254547621
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$75.00 Bi-Weekly)

B. MR. JAMES J NASCIMENTO
 Full Name (Last, First, Middle Initial)
 Mailing Address 432 LYON ST
 City LUDLOW State MA Zip Code 01056-1133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790260247621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

C. MR. JAMES P PUHALA III
 Full Name (Last, First, Middle Initial)
 Mailing Address 68 HOLCOMB ST
 City EAST GRANBY State CT Zip Code 06026-9531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - COMPLIANCE & REGUL/
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790260447621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 257.68
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 68 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. JEFFREY T ROBINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 DONAMOR LN
 City State Zip Code
 E LONGMEADOW MA 01028-2220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSMUTUAL INTERNATIONAL MANAGING DIRECTOR - MMI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790261647621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

B. MS. KATHY S REEVE
 Full Name (Last, First, Middle Initial)
 Mailing Address EDGEMERE HILLS BLDG 14
 85 N MAIN ST UNIT 14A
 City State Zip Code
 EAST HAMPTON CT 06424-1448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 211.53

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790272747621
 Amount of Each Receipt this Period
 38.46
 Memo Item
 P/R Deduction (\$19.23 Bi-Weekly)

C. MS. KATHLEEN LYNCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 136 MONTCLAIR DR
 City State Zip Code
 WEST HARTFORD CT 06107-1255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 338.47

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790277647621
 Amount of Each Receipt this Period
 61.54
 Memo Item
 P/R Deduction (\$30.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	153.84
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 69 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. KENNETH M RICKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 CYPRESS LN
 City WILBRAHAM State MA Zip Code 01095-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - SALES RISK MANAGEME
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790278547621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. MARK ACKERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 385 GREEN HILL RD
 City LONGMEADOW State MA Zip Code 01106-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.45

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790296047621
 Amount of Each Receipt this Period 53.90
 Memo Item
 P/R Deduction (\$26.95 Bi-Weekly)

C. MR. MATTHEW P NATCHARIAN
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1454.42

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790301447621
 Amount of Each Receipt this Period 264.44
 Memo Item
 P/R Deduction (\$132.22 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	372.18
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 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. MR. MICHAEL H GATELY
 Full Name (Last, First, Middle Initial)
 Mailing Address 134 FAIRVIEW TER
 City State Zip Code
 S GLASTONBURY CT 06073-3304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORNERSTONE RE ADVISERS LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790304947621
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. MR. MICHAEL L KLOFAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 64 WINDHAM DR
 City State Zip Code
 E LONGMEADOW MA 01028-2668
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790314047621
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. MS. PAMELA J DELANEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 72 HILLCREST RD
 City State Zip Code
 WINDSOR CT 06095-3301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. VICE PRESIDENT - RISK & ANALYTICS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790320647621
 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 71 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. MR. ROBERT CASALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 THISTLE LN
 City BRISTOL State CT Zip Code 06010-8057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP & CHIEF INFORMATION OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2115.30**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR790342247621
 Amount of Each Receipt this Period **384.60**
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

B. MS. RHA E A KENNEDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 322 OLD FARM RD
 City SPRINGFIELD State MA Zip Code 01119-2825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation MANAGING DIRECTOR - INVESTMENT ANAI
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **423.06**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR790351847621
 Amount of Each Receipt this Period **76.92**
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. MR. RICHARD P BARNHART
 Full Name (Last, First, Middle Initial)
 Mailing Address 344 WESTCHESTER RD
 City COLCHESTER State CT Zip Code 06415-2426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP, ACCTG STANDARDS & IND RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **296.45**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR790352047621
 Amount of Each Receipt this Period **53.90**
 Memo Item
 P/R Deduction (\$26.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	515.42
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 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MR. RICHARD D BOURGEOIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 ECHO HILL RD
 City State Zip Code
 WILBRAHAM MA 01095-2663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. SENIOR VICE PRESIDENT - TAX
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 846.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790352247621
 Amount of Each Receipt this Period
 153.90
 Memo Item
 P/R Deduction (\$76.95 Bi-Weekly)

B. MR. RICHARD F BUCKLEY Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 CEDAR RDG
 City State Zip Code
 SOUTH HADLEY MA 01075-1795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790352347621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

C. MR. ROBERT J BRODERICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 ACADEMY DR
 City State Zip Code
 LONGMEADOW MA 01106-2154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORNERSTONE RE ADVISERS LLC VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790353147621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	261.58
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 73 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. ROBERT G LABUN
Full Name (Last, First, Middle Initial)

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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT, INVESTMENT ACCOUNTI

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790354547621

Amount of Each Receipt this Period 76.92

Memo Item

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

B. MR. ROBERT S ROSENTHAL
Full Name (Last, First, Middle Initial)

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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VP & ASSISTANT GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 634.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790355447621

Amount of Each Receipt this Period 115.40

Memo Item

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

C. MR. ROGER W CRANDALL
Full Name (Last, First, Middle Initial)

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 MASSACHUSETTS MUTUAL LIFE INS. Occupation CHAIRMAN PRESIDENT & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2115.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790355947621

Amount of Each Receipt this Period 384.60

Memo Item

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

SUBTOTAL of Receipts This Page (optional).....	576.92
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 74 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MS. SUSAN A MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 BROOKS RD
 City State Zip Code
 LONGMEADOW MA 01106-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1480.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790370147621
 Amount of Each Receipt this Period
 269.24
 Memo Item
 P/R Deduction (\$134.62 Bi-Weekly)

B. TIMOTHY C. FLANAGAN Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 608 BELLE MEADE CT
 City State Zip Code
 WAXHAW NC 28173-7159
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF GENERAL INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1041.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790380347621
 Amount of Each Receipt this Period
 208.15
 Memo Item
 P/R Deduction (\$208.15 Monthly)

C. MR. VICTOR WOOLRIDGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 146 LONGHILL ST
 City State Zip Code
 SPRINGFIELD MA 01108-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORNERSTONE RE ADVISERS LLC VICE PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790387647621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	531.23
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 75 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JEFFREY C. DOLLARHIDE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9646 E LAUREL LN
 City SCOTTSDALE State AZ Zip Code 85260-5956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation GENERAL INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2083.19

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790394947621
 Amount of Each Receipt this Period 416.63
 Memo Item
 P/R Deduction (\$416.63 Monthly)

B. KEN C. KOWALSKI, KEN C
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790397447621
 Amount of Each Receipt this Period 100.00
 Memo Item
 P/R Deduction (\$50.00 Semi-Monthly)

C. BRIAN W. MARTIN, BRIAN W
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790404147621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	599.97
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 76 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BRIAN W. OSULLIVAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 SCHOOL ST
 City MARSHFIELD State MA Zip Code 02050-2046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 206.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790416147621
 Amount of Each Receipt this Period 41.30
 Memo Item
 P/R Deduction (\$41.30 Monthly)

B. BENJAMIN M. MUIRHEAD
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 POST OAK RD
 City GORDON State TX Zip Code 76453-3894
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790420747621
 Amount of Each Receipt this Period 55.00
 Memo Item
 P/R Deduction (\$55.00 Monthly)

C. STEPHEN G. DEBACKER
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 226
 City PREEMPTION State IL Zip Code 61276-0226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 332.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790425347621
 Amount of Each Receipt this Period 83.15
 Memo Item
 P/R Deduction (\$83.15 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	179.45
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 77 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. SCOTT M. SUNDET, SCOTT M
 Full Name (Last, First, Middle Initial)
 Mailing Address 14316 CLEARVIEW LN
 City URBANDALE State IA Zip Code 50323-2083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790425447621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. BRIAN R. LOGAN, BRIAN R
 Full Name (Last, First, Middle Initial)
 Mailing Address 1787 WINTERHAVEN DR
 City MECHANICSBURG State PA Zip Code 17055-5192
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790437047621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

C. JONATHAN S. DAVIS, JONATHAN S
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790448747621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	183.34
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 78 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. STEFAN E. GREENBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 BAILIWICK RD
 City GREENWICH State CT Zip Code 06831-3609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790448847621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. ROBERT J. SEGALL, ROBERT J
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790450347621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. BRETT M. GARBUT, BRETT M
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 FARMINGTON LN
 City MELVILLE State NY Zip Code 11747-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790451347621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
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 79 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. STEVEN R. SEROTTE, STEVEN R
 Full Name (Last, First, Middle Initial)
 Mailing Address 1041 ERICA RD
 City MILL VALLEY State CA Zip Code 94941-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790451647621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. T J SHAUGHNESSY, T J
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790463047621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. ROBERT M. CORNETT, ROBERT M
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 STEELMAN RD
 City PURVIS State MS Zip Code 39475-3325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.15

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790467747621
 Amount of Each Receipt this Period 33.35
 Memo Item
 P/R Deduction (\$33.35 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	200.03
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 80 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. JERRY D. VESSELL, JERRY D
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790470147621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. WALTER W. WOLAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 525 ANGELO DR
 City BETHLEHEM State PA Zip Code 18017-3735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation GENERAL INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 983.80

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790525747621
 Amount of Each Receipt this Period 216.60
 Memo Item
 P/R Deduction (\$216.60 Monthly)

C. ROBERT L. BELVEDERE
 Full Name (Last, First, Middle Initial)
 Mailing Address 74 WINDHAM RD
 City ROCKVILLE CENTRE State NY Zip Code 11570-1232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790530247621
 Amount of Each Receipt this Period 125.00
 Memo Item
 P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	424.94
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 81 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. THOMAS D. O GRADY
 Full Name (Last, First, Middle Initial)
 Mailing Address 11301 SILVERSTONE DR
 City State Zip Code
 MECHANICSVILLE VA 23116-5877
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF INSURANCE AGENT
 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
 05 / 31 / 2016
Transaction ID : PR790544247621
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. MR. THOMAS G DUDECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 WINTERBERRY RD
 City State Zip Code
 DEEP RIVER CT 06417-2126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORNERSTONE RE ADVISERS LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 634.59

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790544547621
 Amount of Each Receipt this Period
 115.38
 Memo Item
 P/R Deduction (\$57.69 Bi-Weekly)

C. MR. JEFFREY R HUG
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 WHITCOMB DR
 City State Zip Code
 SIMSBURY CT 06070-1119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. VP - EXECUTIVE BENEFITS RESEARCH/SUF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790545147621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	219.22
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 82 OF 130
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. MR. JONATHAN R GRAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 152 MORNINGSDR
 City State Zip Code
 LONGMEADOW MA 01106-2316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. AVP BUSINESS OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.39

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790545447621
 Amount of Each Receipt this Period
 50.98
 Memo Item
 P/R Deduction (\$25.49 Bi-Weekly)

B. MR. DEAN DULCHINOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 ABBEY LN
 City State Zip Code
 E LONGMEADOW MA 01028-3206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORNERSTONE RE ADVISERS LLC VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790568547621
 Amount of Each Receipt this Period
 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. MR. KEVIN VI DEGRAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 BROOK PASTURE LN
 City State Zip Code
 GRANBY CT 06035-1027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. AVP AGENCY FOCUS TEAM
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 488.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790577847621
 Amount of Each Receipt this Period
 88.90
 Memo Item
 P/R Deduction (\$44.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	216.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. MS. KATHLEEN L KRAEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 ASHFORD RD
 City State Zip Code
 LONGMEADOW MA 01106-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790579447621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. DOUGLAS M TREVALLION II
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 COVENTRY LN
 City State Zip Code
 AGAWAM MA 01001-3569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790590347621
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. MR. ROGER M ROBERGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 ROCKINGHAM CIR
 City State Zip Code
 EAST LONGMEADOW MA 01028-3197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR790594547621
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	207.68
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 84 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. ROBERT M SHETTLE
Full Name (Last, First, Middle Initial)

Mailing Address 65 KELSEY LN

City GLASTONBURY State CT Zip Code 06033-5040

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

Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.53

Date of Receipt
05 / 31 / 2016
Transaction ID : PR790597147621

Amount of Each Receipt this Period
38.46

Memo Item

P/R Deduction (\$19.23 Bi-Weekly)

B. MR. JAMES O LACEY
Full Name (Last, First, Middle Initial)

Mailing Address 106 MAGNOLIA TER

City SPRINGFIELD State MA Zip Code 01108-2533

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - PUBLIC RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 296.12

Date of Receipt
05 / 31 / 2016
Transaction ID : PR790616247621

Amount of Each Receipt this Period
53.84

Memo Item

P/R Deduction (\$26.92 Bi-Weekly)

C. GREG A. HARVEY
Full Name (Last, First, Middle Initial)

Mailing Address 15521 KESSLER ST

City OVERLAND PARK State KS Zip Code 66221-9333

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
05 / 31 / 2016
Transaction ID : PR790632947621

Amount of Each Receipt this Period
50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 142.30

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 85 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. ROLAND P FAWTHROP
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 HORSESHOE LN
 City SOMERS State CT Zip Code 06071-2235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SECOND VP & ACTUARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790658247621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

B. MS. MICHELE M WHITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 11691 E CAVEDALE DR
 City SCOTTSDALE State AZ Zip Code 85262-8006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - POLICYHOLDER SERVIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790665647621
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. MR. TODD M GISH
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - GIC OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790677147621
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	207.76
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 86 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. JOHN N. BYERS, JOHN N
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790684847621
 Amount of Each Receipt this Period 125.00
 Memo Item
 P/R Deduction (\$62.50 Semi-Monthly)

B. DAVID S. FEHRS, DAVID S
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 891.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790708647621
 Amount of Each Receipt this Period 208.34
 Memo Item
 P/R Deduction (\$104.17 Semi-Monthly)

C. ALLEN W. CARR JR, ALLEN W
 Full Name (Last, First, Middle Initial)
 Mailing Address 427 RHODA DR
 City LANCASTER State PA Zip Code 17601-3669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790708847621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	383.34
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 87 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. EDWARD I. WIGHT JR, EDWARD I
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790710947621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. MICHAEL T. WAHL, MICHAEL T
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 333.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790723347621
 Amount of Each Receipt this Period 66.70
 Memo Item
 P/R Deduction (\$33.35 Semi-Monthly)

C. KENNETH C. THOMALLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 FOREST EDGE CT
 City PALOS PARK State IL Zip Code 60464-1933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 891.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790731147621
 Amount of Each Receipt this Period 208.34
 Memo Item
 P/R Deduction (\$104.17 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	358.38
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 88 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. LILBURN H. OWENS JR, LILBURN H
 Full Name (Last, First, Middle Initial)
 Mailing Address 734 HIGHLAND CIR
 City TUPELO State MS Zip Code 38804-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790766347621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

B. MS. SYLENA G ECHEVARRIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 166 WOODBROOK TER
 City WEST SPRINGFIELD State MA Zip Code 01089-4444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790779947621
 Amount of Each Receipt this Period 38.50
 Memo Item
 P/R Deduction (\$19.25 Bi-Weekly)

C. MS. VANESSA B MORIN
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP STRATEGIC DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.47

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790790347621
 Amount of Each Receipt this Period 61.54
 Memo Item
 P/R Deduction (\$30.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	141.70
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: PAGE 89 OF 130
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. MR. DONALD G CARTEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 MOUNTAIN RD
 City CHESHIRE State CT Zip Code 06410-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - IT SERVICE MANAGEME
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790808247621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. DAVID S ALLEN
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP - DGC DISPUTE RESOLUTION & LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 634.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790809747621
 Amount of Each Receipt this Period 115.40
 Memo Item
 P/R Deduction (\$57.70 Bi-Weekly)

C. MR. SCOTT PICCONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 TROTWOOD DR
 City WEST HARTFORD State CT Zip Code 06117-1644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 31 / 2016
Transaction ID : PR790815847621
 Amount of Each Receipt this Period 38.46
 Memo Item
 P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 207.70
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 90 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MARY J. SCHROEDER, MARY J
 Full Name (Last, First, Middle Initial)
 Mailing Address 1518 OLIVE LN
 City LA CANADA FLT State CA Zip Code 91011-2105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791115947621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. MR. JAMES J O'SHAUGHNESSY
 Full Name (Last, First, Middle Initial)
 Mailing Address 591 MAIN ST
 City CONCORD State MA Zip Code 01742-3303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791165947621
 Amount of Each Receipt this Period 38.46
 Memo Item
 P/R Deduction (\$19.23 Bi-Weekly)

C. THOMAS E. SHAUGHNESSY
 Full Name (Last, First, Middle Initial)
 Mailing Address 355 LINDSTROM LN
 City MANCHESTER State NH Zip Code 03104-4795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791185147621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	171.80
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 91 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. STEPHEN K. COLLINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 236 STANFORD DR
 City SAN ANTONIO State TX Zip Code 78212-2010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation GENERAL INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.95

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791191547621
 Amount of Each Receipt this Period 208.15
 Memo Item
 P/R Deduction (\$208.15 Monthly)

B. MR. DOUGLAS W TAYLOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 ERSKINE DR
 City LONGMEADOW State MA Zip Code 01106-1614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & APPOINTED ACTUARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791193747621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

C. ADAM GOETZ, ADAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 604 QUINCY LN
 City WEXFORD State PA Zip Code 15090-6836
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.81

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791213147621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	311.99
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 92 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. BRUCE A. DEBOER, BRUCE A
 Full Name (Last, First, Middle Initial)
 Mailing Address 6839 RIDGEWOOD TRL
 City TOLEDO State OH Zip Code 43617-1181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 233.45

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791215847621
 Amount of Each Receipt this Period 33.35
 Memo Item
 P/R Deduction (\$33.35 Semi-Monthly)

B. DARREN J. WRIGHT, DARREN J
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 406.64

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791221247621
 Amount of Each Receipt this Period 73.28
 Memo Item
 P/R Deduction (\$31.61 Semi-Monthly)

C. MR. MICHAEL J STCLAIR
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 E RED BRIDGE LN
 City SOUTH HADLEY State MA Zip Code 01075-2287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - SALES & DISTRIBUTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791235447621
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	183.63
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 93 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. JULIA L. BIRD, JULIA L
 Full Name (Last, First, Middle Initial)
 Mailing Address 2273 E CONTINENTAL BLVD
 City SOUTHLAKE State TX Zip Code 76092-9796
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791255847621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. MR. PAUL BACON
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 RAVINE CIR
 City WESTFIELD State MA Zip Code 01085-5005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & CHIEF UNDERWRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 384.60

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791276847621
 Amount of Each Receipt this Period 38.46
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. MR. CHRISTOPHER P DOWD
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 SUNSET TER
 City WEST HARTFORD State CT Zip Code 06107-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.53

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791281147621
 Amount of Each Receipt this Period 38.46
 Memo Item
 P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	126.92
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 94 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GREG P. WOOD, GREG P
Full Name (Last, First, Middle Initial)

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 SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791295747621

Amount of Each Receipt this Period 83.34

Memo Item

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

B. MR. DINO A PUJA
Full Name (Last, First, Middle Initial)

Mailing Address 39 MAGNOLIA DR

City SUFFIELD State CT Zip Code 06078-1551

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 458.37

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791324647621

Amount of Each Receipt this Period 83.34

Memo Item

P/R Deduction (\$41.67 Bi-Weekly)

C. MR. KEVIN LACOMB
Full Name (Last, First, Middle Initial)

Mailing Address 39 CHRISTIAN HILL RD

City HIGGANUM State CT Zip Code 06441-4031

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP, TAX PLANNING AND STRATEGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.58

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791326647621

Amount of Each Receipt this Period 55.56

Memo Item

P/R Deduction (\$27.78 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	222.24
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 95 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MS. AUDREY MEYERLAMPERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 LOOMIS ST
 City NORTH GRANBY State CT Zip Code 06060-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791334847621
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. JOHN H. HASLAM III, JOHN H
 Full Name (Last, First, Middle Initial)
 Mailing Address 125 GOETTE TRL
 City SAVANNAH State GA Zip Code 31410-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791343047621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

C. MS. ELIZABETH W CHICARES
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP - CHIEF ENT RISK OFF & CHIEF ACTUA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1057.76

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791351747621
 Amount of Each Receipt this Period 192.32
 Memo Item
 P/R Deduction (\$96.16 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	310.90
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 96 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. MR. CHRISTOPHER DEFRANCIS
 Full Name (Last, First, Middle Initial)
 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 BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **924.77**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR791365047621
 Amount of Each Receipt this Period **168.14**
 Memo Item
 P/R Deduction (\$84.07 Bi-Weekly)

B. MR. MICHAEL T ROLLINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 DURHAM RD
 City LONGMEADOW State MA Zip Code 01106-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP & CHIEF FINANCIAL OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2115.30**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR791365847621
 Amount of Each Receipt this Period **384.60**
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. MATTHEW D. HUTCHESON
 Full Name (Last, First, Middle Initial)
 Mailing Address 903 WILSON BLVD
 City NASHVILLE State TN Zip Code 37215-1041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 31 / 2016**
Transaction ID : PR791374747621
 Amount of Each Receipt this Period **50.00**
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **602.74**
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 97 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. WILLIAM F. BALINT, WILLIAM F
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 ELMCREST DR
 City CHICOPEE State MA Zip Code 01013-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791395247621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. RYAN M. HILL, RYAN M
 Full Name (Last, First, Middle Initial)
 Mailing Address 1426 AUTUMNMIST DR
 City ALLEN State TX Zip Code 75002-4956
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791411647621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

C. HOLLY B. CARROCCIO, HOLLY B
 Full Name (Last, First, Middle Initial)
 Mailing Address 2101 MAPLE LEAF DR
 City PLANO State TX Zip Code 75075-3112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791411747621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	141.66
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 98 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JAMES M. WEHR, JAMES M
 Full Name (Last, First, Middle Initial)
 Mailing Address 17485 FRANCIS FARM PL
 City HAMILTON State VA Zip Code 20158-3461
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791423747621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. DANIEL G. ROETHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7015 N 23RD PL
 City PHOENIX State AZ Zip Code 85020-5615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791435147621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

C. MR. RUSSELL D MORRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5419 GORHAM DR
 City CHARLOTTE State NC Zip Code 28226-6411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791511147621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	153.84
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 99 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. CHIN-JUNG V YANG
 Full Name (Last, First, Middle Initial)
 Mailing Address 18524 ROLLINGDALE LN
 City State Zip Code
 DAVIDSON NC 28036-7862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR791511547621
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

B. MR. THOMAS M FINKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4920 HARDISON RD
 City State Zip Code
 CHARLOTTE NC 28226-6418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2115.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR791511947621
 Amount of Each Receipt this Period
 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

C. MR. MARK GALLOP
 Full Name (Last, First, Middle Initial)
 Mailing Address 157 FAIRWAY XING
 City State Zip Code
 GLASTONBURY CT 06033-1468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSMUTUAL INTERNATIONAL SENIOR MANAGING DIRECTOR - MMI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 579.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR791513747621
 Amount of Each Receipt this Period
 105.28
 Memo Item
 P/R Deduction (\$52.64 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	566.80
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 100 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. NICHOLAS FYNTRILAKIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 RIDGE RD
 City HAMPDEN State MA Zip Code 01036-9518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - COMMUNITY RESPONSI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791550247621
 Amount of Each Receipt this Period 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. PAUL THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 354 YACHT RD
 City MOORESVILLE State NC Zip Code 28117-6682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 998.25

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791591447621
 Amount of Each Receipt this Period 181.50
 Memo Item
 P/R Deduction (\$90.75 Bi-Weekly)

C. MR. RICHARD GOLDSTEIN
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791591647621
 Amount of Each Receipt this Period 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	312.26
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 130		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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

Full Name (Last, First, Middle Initial) A. PAUL A. BAVARO			Date of Receipt		
Mailing Address 6022 LAS COLINAS CIR			MM / DD / YYYY 05 / 31 / 2016		
City State Zip Code LAKE WORTH FL 33463-6560			Transaction ID : PR791594047621		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 50.00		
Name of Employer SELF		Occupation INSURANCE 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 ▼ 250.00	P/R Deduction (\$50.00 Monthly)		

Full Name (Last, First, Middle Initial) B. MS. CAMILLE V SIMPSON			Date of Receipt		
Mailing Address 621 MCKENZIE AVE UNIT 101			MM / DD / YYYY 05 / 31 / 2016		
City State Zip Code ALEXANDRIA VA 22301-2178			Transaction ID : PR791608147621		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 38.50		
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.		Occupation AVP & COUNSEL	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.75	P/R Deduction (\$19.25 Bi-Weekly)		

Full Name (Last, First, Middle Initial) C. MS. MARY S BLOCK			Date of Receipt		
Mailing Address 67 PERSHING RD			MM / DD / YYYY 05 / 31 / 2016		
City State Zip Code WINDSOR LOCKS CT 06096-2122			Transaction ID : PR791784447621		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 76.92		
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.		Occupation VP & ASSISTANT GENERAL COUNSEL	<input type="checkbox"/> Memo Item		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 423.06	P/R Deduction (\$38.46 Bi-Weekly)		

SUBTOTAL of Receipts This Page (optional).....▶	165.42
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 102 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. ROBERT ERWIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 185 COVENTRY LN
 City State Zip Code
 LONGMEADOW MA 01106-1629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 05 / 31 / 2016
Transaction ID : PR791800247621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. WILLIAM SILVANIC
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 CREAMERY HILL RD
 City State Zip Code
 GRANBY CT 06035-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. SVP WORKSITE INSURANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.06

Date of Receipt
 05 / 31 / 2016
Transaction ID : PR791800447621
 Amount of Each Receipt this Period
 76.92
 Memo Item
 P/R Deduction (\$38.46 Bi-Weekly)

C. SHANE TENNY
 Full Name (Last, First, Middle Initial)
 Mailing Address 8317 PRINCE GEORGE RD
 City State Zip Code
 CHARLOTTE NC 28210-4229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 05 / 31 / 2016
Transaction ID : PR791822947621
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	180.76
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 103 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. ERIC S. ABOWD, ERIC S
Full Name (Last, First, Middle Initial)

Mailing Address 40 CALLA LILY CT

City RENO State NV Zip Code 89511-6612

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791913747621

Amount of Each Receipt this Period 83.34

Memo Item

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

B. MS. AMY DIAS
Full Name (Last, First, Middle Initial)

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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VP - USIG BUS CONSULTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791926947621

Amount of Each Receipt this Period 80.00

Memo Item

P/R Deduction (\$40.00 Bi-Weekly)

C. MR. DOUGLAS ENDORF
Full Name (Last, First, Middle Initial)

Mailing Address 27 STRAWBERRY FIELDS

City GRANBY State CT Zip Code 06035-2927

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

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & ACTUARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 296.12

Date of Receipt 05 / 31 / 2016
Transaction ID : PR791938647621

Amount of Each Receipt this Period 53.84

Memo Item

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 217.18

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 104 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. WILLIAM F MONROEJR Jr
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 GENERAL HOBBS RD
 City State Zip Code
 JEFFERSON MA 01522-1565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. VICE PRESIDENT - MMLISI
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 423.17

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR791969147621
 Amount of Each Receipt this Period
 76.94
 Memo Item
 P/R Deduction (\$38.47 Bi-Weekly)

B. ROMAN A. MATUSZ, ROMAN A
 Full Name (Last, First, Middle Initial)
 Mailing Address 507 SEQUOIA DR
 City State Zip Code
 PITTSBURGH PA 15236-4460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 333.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR791985147621
 Amount of Each Receipt this Period
 66.70
 Memo Item
 P/R Deduction (\$33.35 Semi-Monthly)

C. MR. IAN HAWKINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 36 PRESCOTT AVE
 City State Zip Code
 GLEN RIDGE NJ 07028-1918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. MANAGING DIR - RESEARCH
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR792000747621
 Amount of Each Receipt this Period
 53.84
 Memo Item
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	197.48
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 105 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MS. LINDA C HOUSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 FOREST RD
 City WEST HARTFORD State CT Zip Code 06119-1625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.45

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792038747621
 Amount of Each Receipt this Period 53.90
 Memo Item
 P/R Deduction (\$26.95 Bi-Weekly)

B. COLIN W. KIMPEL, COLIN W
 Full Name (Last, First, Middle Initial)
 Mailing Address 6201 WALHONDING RD
 City BETHESDA State MD Zip Code 20816-2138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792055847621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

C. JONATHAN HARTMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 14806 MCCORMICK ST
 City SHERMAN OAKS State CA Zip Code 91411-4032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.19

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792074847621
 Amount of Each Receipt this Period 41.63
 Memo Item
 P/R Deduction (\$41.63 Monthly)

SUBTOTAL of Receipts This Page (optional).....	145.53
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 106 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. GEORGE A. SNOOK
 Full Name (Last, First, Middle Initial)
 Mailing Address 502 SARAH CT
 City MECHANICSBURG State PA Zip Code 17050-7231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792083347621
 Amount of Each Receipt this Period 150.00
 Memo Item
 P/R Deduction (\$150.00 Monthly)

B. JONATHAN D. LAU, JONATHAN D
 Full Name (Last, First, Middle Initial)
 Mailing Address 824 BENNAVILLE AVE
 City BIRMINGHAM State MI Zip Code 48009-3665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792101347621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

C. MR. MICHAEL O'CONNOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 BELLECLAIRE AVE
 City LONGMEADOW State MA Zip Code 01106-1415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP - CORPORATE DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2054.85

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792107747621
 Amount of Each Receipt this Period 384.60
 Memo Item
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	584.60
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 107 OF 130
	<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	<input type="checkbox"/> 17

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

A. MS. ELLEN S CONLIN
Full Name (Last, First, Middle Initial)

Mailing Address 20 WELLESLEY DR

City State Zip Code
LONGMEADOW MA 01106-2833

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

Name of Employer Occupation
MASSACHUSETTS MUTUAL LIFE INS. VP & ASSISTANT GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
296.12

Date of Receipt
05 / 31 / 2016
Transaction ID : PR792129547621

Amount of Each Receipt this Period
53.84

Memo Item

P/R Deduction (\$26.92 Bi-Weekly)

B. MS. JAE JUNKUNC
Full Name (Last, First, Middle Initial)

Mailing Address 221 TRUMBULL STREET APT 502

City State Zip Code
HARTFORD CT 06103-1511

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

Name of Employer Occupation
MASSACHUSETTS MUTUAL LIFE INS. VICE PRESIDENT - STRATEGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
634.70

Date of Receipt
05 / 31 / 2016
Transaction ID : PR792144347621

Amount of Each Receipt this Period
115.40

Memo Item

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

C. JOHN J. MILLER, JOHN J
Full Name (Last, First, Middle Initial)

Mailing Address 13 WHIPPANY AVE

City State Zip Code
WARREN NJ 07059-5774

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

Name of Employer Occupation
SELF INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
416.70

Date of Receipt
05 / 31 / 2016
Transaction ID : PR792501447621

Amount of Each Receipt this Period
83.34

Memo Item

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

SUBTOTAL of Receipts This Page (optional).....	252.58
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 108 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. PAUL D. FERRANTE, PAUL D
 Full Name (Last, First, Middle Initial)
 Mailing Address 648 SHORE ACRES DR
 City MAMARONECK State NY Zip Code 10543-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792549047621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. BRENDAN J. KENNY, BRENDAN J
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 E 77TH ST APT 52
 City NEW YORK State NY Zip Code 10162-0025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792549747621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

C. RUSSELL J. ROLNICK, RUSSELL J
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 TALL PINES CT
 City WEST NYACK State NY Zip Code 10994-1341
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792728147621
 Amount of Each Receipt this Period 41.66
 Memo Item
 P/R Deduction (\$20.83 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	141.66
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 109 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BRIAN C. LARGE, BRIAN C
 Full Name (Last, First, Middle Initial)
 Mailing Address 141 WOLFPIT AVE
 City NORWALK State CT Zip Code 06851-3429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792732647621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. PAUL E. KARLITZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 2717 VIA ELEVADO
 City PALOS VERDES ESTATES State CA Zip Code 90274-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR792971847621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$50.00 Monthly)

C. GLEN R. GOLISH, GLEN R
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR793450547621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	183.34
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 110 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. IAN R. GEORGE, IAN R
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR793621447621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. KEVIN W. PAASCH, KEVIN W
 Full Name (Last, First, Middle Initial)
 Mailing Address 103 WINDSOR WAY
 City WILLIAMSBURG State VA Zip Code 23188-1578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR794020447621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. MARK J. DORMAN, MARK J
 Full Name (Last, First, Middle Initial)
 Mailing Address 3980 FAIRWAY DR
 City MEDINA State OH Zip Code 44256-7847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR794449347621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	183.34
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: PAGE 111 OF 130
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CHRISTOPHE A. PERME
 Full Name (Last, First, Middle Initial)
 Mailing Address 8197 GARFIELD DR
 City State Zip Code
 GARRETTSVILLE OH 44231-9122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 416.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR794455147621
 Amount of Each Receipt this Period
 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. JOHN F. OCWIEJA, JOHN F
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 N CANAL ST STE 3
 City State Zip Code
 CHICAGO IL 60606-1312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 416.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR794655547621
 Amount of Each Receipt this Period
 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. TIMOTHY W. POWERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1810 CHADSWORTH DR
 City State Zip Code
 SUN PRAIRIE WI 53590-3554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF GENERAL INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1041.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR794959147621
 Amount of Each Receipt this Period
 208.15
 Memo Item
 P/R Deduction (\$208.15 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 374.83
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 112 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JASON L. PEEPLES
Full Name (Last, First, Middle Initial)

Mailing Address 3526 SHIRLWOOD AVE

City MEMPHIS State TN Zip Code 38122-4568

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR795097447621

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$50.00 Monthly)

B. DAVID R. STEPHENS, DAVID R
Full Name (Last, First, Middle Initial)

Mailing Address 209 79TH ST UNIT B

City VIRGINIA BCH State VA Zip Code 23451-1973

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR795338747621

Amount of Each Receipt this Period 50.00

Memo Item

P/R Deduction (\$25.00 Semi-Monthly)

C. WALTER E. KATZ, WALTER E
Full Name (Last, First, Middle Initial)

Mailing Address 4414 BREAKWOOD DR

City HOUSTON State TX Zip Code 77096-3505

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

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.03

Date of Receipt 05 / 31 / 2016
Transaction ID : PR795359647621

Amount of Each Receipt this Period 83.34

Memo Item

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 183.34

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 113 OF 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. CARLOS HERNANDEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1211 WILDEWOOD CT
 City SUGAR LAND State TX Zip Code 77479-6294
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.95

Date of Receipt 05 / 31 / 2016
Transaction ID : PR795364047621
 Amount of Each Receipt this Period 83.15
 Memo Item
 P/R Deduction (\$83.15 Monthly)

B. MICHAEL S. ROBERTSON, MICHAEL S
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR795374447621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. GREGORY B. THOMAS, GREGORY B
 Full Name (Last, First, Middle Initial)
 Mailing Address 6223 PONDEROSA WAY
 City PARKER State CO Zip Code 80134-5623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR795765547621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	216.49
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 114 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. EDWARD J. WIRTZ, EDWARD J
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 BRANDING IRON LN
 City State Zip Code
 ROLLING HILLS ESTATES CA 90274-2501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 391.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR796003947621
 Amount of Each Receipt this Period
 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. EDGAR F. WHITMORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 25535 CUMBERLAND LN
 City State Zip Code
 CALABASAS CA 91302-3158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF1000 INSURANCE AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 391.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : PR796010147621
 Amount of Each Receipt this Period
 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

C. CRAIG E. STEARNS, CRAIG E
 Full Name (Last, First, Middle Initial)
 Mailing Address 136 HENRY ST
 City State Zip Code
 FAIRFIELD CT 06824-2820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF INSURANCE AGENT
 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
 05 / 31 / 2016
Transaction ID : PR796044647621
 Amount of Each Receipt this Period
 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	216.68
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 115 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MAX A. ADAMS, MAX A
 Full Name (Last, First, Middle Initial)
 Mailing Address 16232 NW 79TH AVE
 City MIAMI LAKES State FL Zip Code 33016-6132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 391.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR796324647621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

B. MS. ELAINE A SARSYNSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 75 BARNDOR HILLS RD
 City SUFFIELD State CT Zip Code 06078-1360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP - MASSMUTUAL INTERNATIONAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1057.76

Date of Receipt 05 / 31 / 2016
Transaction ID : PR796671847621
 Amount of Each Receipt this Period 192.32
 Memo Item
 P/R Deduction (\$96.16 Bi-Weekly)

C. DAVID R. NELSON III, DAVID R
 Full Name (Last, First, Middle Initial)
 Mailing Address 4794 BORDAGES RD
 City BEAUMONT State TX Zip Code 77705-7675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR796717247621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....	325.66
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 116 OF 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. MR. MICHAEL HIRSCHBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 122 PASADENA PL
 City HAWTHORNE State NJ Zip Code 07506-2806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EXTERNAL WHOLESALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.75

Date of Receipt 05 / 31 / 2016
Transaction ID : PR811444947621
 Amount of Each Receipt this Period 38.50
 Memo Item
 P/R Deduction (\$19.25 Bi-Weekly)

B. MR. PAUL JANCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 335 CEDAR LN
 City NEW HARTFORD State CT Zip Code 06057-2911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 273.35

Date of Receipt 05 / 31 / 2016
Transaction ID : PR811451347621
 Amount of Each Receipt this Period 49.70
 Memo Item
 P/R Deduction (\$24.85 Bi-Weekly)

C. JOSHUA R. PLANK, JOSHUA R
 Full Name (Last, First, Middle Initial)
 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 SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 391.70

Date of Receipt 05 / 31 / 2016
Transaction ID : PR811793647621
 Amount of Each Receipt this Period 83.34
 Memo Item
 P/R Deduction (\$41.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 171.54
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 117 OF 130
	<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	<input type="checkbox"/> 17

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

A. SCOTT W. ECKART, SCOTT W
 Full Name (Last, First, Middle Initial)
 Mailing Address 4559 SUNFLOWER CT
 City ZIONSVILLE State IN Zip Code 46077-8118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : PR811820947621
 Amount of Each Receipt this Period 50.00
 Memo Item
 P/R Deduction (\$25.00 Semi-Monthly)

B. MS. JEANNE G YOUNG
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT-CORPORATE ADMINISTR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.50

Date of Receipt 05 / 31 / 2016
Transaction ID : PR904834647621
 Amount of Each Receipt this Period 77.00
 Memo Item
 P/R Deduction (\$38.50 Bi-Weekly)

C. MS. CINDY BELMORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 CRYSTAL DR
 City SOUTHWICK State MA Zip Code 01077-9613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 296.23

Date of Receipt 05 / 31 / 2016
Transaction ID : PR932682147621
 Amount of Each Receipt this Period 53.86
 Memo Item
 P/R Deduction (\$26.93 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	180.86
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: PAGE 118 OF 130
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. CHRISTOPHE C. COCORES
Full Name (Last, First, Middle Initial)
Mailing Address 9 HUNT PL
City MECHANICSBURG State PA Zip Code 17050-2912
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INSURANCE AGENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.30

Date of Receipt 05 / 31 / 2016
Transaction ID : PR934761047621
Amount of Each Receipt this Period 41.66
 Memo Item
P/R Deduction (\$20.83 Semi-Monthly)

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	41.66
TOTAL This Period (last page this line number only).....▶	37918.63

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

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

FOR LINE NUMBER: PAGE 119 OF 130
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
MassMutual Federal Credit Union

Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 245.63

Date of Receipt
 05 / 31 / 2016
Transaction ID : 71774054

Amount of Each Receipt this Period
 59.66

Memo Item

May-16 Interest - Money Market Account

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	59.66
TOTAL This Period (last page this line number only).....▶	59.66

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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
May-16 PaymenTech Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 71777315

Amount of Each Disbursement this Period

Memo Item
May-16 PaymenTech Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Vargas For Congress

Mailing Address 330 Encinitas Blvd

City Encinitas State CA Zip Code 92024

Purpose of Disbursement
ACLI/NAIFA Event: May 11, 2016

Candidate Name

Rep. Juan C. Vargas

Office Sought: House
 Senate
 President
State: CA District: 51

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 71144448

Amount of Each Disbursement this Period

Memo Item
ACLI/NAIFA Event: May 11, 2016

Full Name (Last, First, Middle Initial)

B. RNC Convention Majority Fund

Mailing Address 310 First Street, SE

City Washginton State DC Zip Code 20003

Purpose of Disbursement
2016 Convention Fund Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 71151332

Amount of Each Disbursement this Period

Memo Item
2016 Convention Fund Contribution

Full Name (Last, First, Middle Initial)

C. David Scott For Congress

Mailing Address P.O. Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement
AALU Event: May 11, 2016

Candidate Name

Rep. David Albert Scott

Office Sought: House
 Senate
 President
State: GA District: 13

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 71151334

Amount of Each Disbursement this Period

Memo Item
AALU Event: May 11, 2016

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tom Rice For Congress

Mailing Address PO Box 70098

City Myrtle Beach State SC Zip Code 29572

Purpose of Disbursement
AALU Event: May 16, 2016

011
Category/
Type

Candidate Name

Rep. Tom Rice

Office Sought: House
 Senate
 President
State: SC District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : 71151336

Amount of Each Disbursement this Period

2500.00

Memo Item
AALU Event: May 16, 2016

Full Name (Last, First, Middle Initial)

B. David Scott For Congress

Mailing Address P.O. Box 960821

City Riverdale State GA Zip Code 30296

Purpose of Disbursement
AALU Event: May 11, 2016

011
Category/
Type

Candidate Name

Rep. David Albert Scott

Office Sought: House
 Senate
 President
State: GA District: 13

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2016

Transaction ID : 71158884

Amount of Each Disbursement this Period

2500.00

Memo Item
AALU Event: May 11, 2016

Full Name (Last, First, Middle Initial)

C. Lead Your Nation Now PAC

Mailing Address PO Box 1872

City Topeka State KS Zip Code 66601

Purpose of Disbursement
PLWG Event: June 14, 2016

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2016

Transaction ID : 71165914

Amount of Each Disbursement this Period

5000.00

Memo Item
PLWG Event: June 14, 2016

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Pelosi for Congress Committee

Mailing Address 430 South Capitol, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Event: May 12, 2016

Category/
Type

Candidate Name

Nancy Pelosi

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 08

Date of Disbursement

/ /

Transaction ID : 71240987

Amount of Each Disbursement this Period

Memo Item
Event: May 12, 2016

Full Name (Last, First, Middle Initial)

B. Friends Of Mia Love

Mailing Address PO Box 255

City Riverton State UT Zip Code 84065

Purpose of Disbursement
Event: May 13, 2016

Category/
Type

Candidate Name

Mia Love

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: UT District: 04

Date of Disbursement

/ /

Transaction ID : 71241538

Amount of Each Disbursement this Period

Memo Item
Event: May 13, 2016

Full Name (Last, First, Middle Initial)

C. Rely on Your Beliefs (RYOB) PAC

Mailing Address 209 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Event: May 16, 2016

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 71242989

Amount of Each Disbursement this Period

Memo Item
Event: May 16, 2016

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Roy Blunt

Mailing Address PO Box 10178

City Columbia State MO Zip Code 65205

Purpose of Disbursement
Event: May 16, 2016

011

Category/
Type

Candidate Name

Sen. Roy Blunt

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2016

Transaction ID : 71243942

Amount of Each Disbursement this Period

1000.00

Memo Item
Event: May 16, 2016

Full Name (Last, First, Middle Initial)

B. Bob Goodlatte For Congress Committee

Mailing Address P.O. Box 292

City Roanoke State VA Zip Code 24002

Purpose of Disbursement
Event: May 12, 2016

011

Category/
Type

Candidate Name

Rep. Bob W. Goodlatte

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: VA District: 06

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2016

Transaction ID : 71244470

Amount of Each Disbursement this Period

1500.00

Memo Item
Event: May 12, 2016

Full Name (Last, First, Middle Initial)

C. Cleaver For Congress

Mailing Address 4801 Main Street, Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement
ACLI Event: May 17, 2016

011

Category/
Type

Candidate Name

Rep. Emanuel Cleaver II

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District: 05

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2016

Transaction ID : 71245608

Amount of Each Disbursement this Period

2000.00

Memo Item
ACLI Event: May 17, 2016

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

4500.00

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cleaver For Congress

Mailing Address 4801 Main Street, Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement
ACLI Event: May 17, 2016

Candidate Name
Rep. Emanuel Cleaver II

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: MO District: 05

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2016

Transaction ID : 71246126

Amount of Each Disbursement this Period

2000.00

Memo Item
ACLI Event: May 17, 2016

Full Name (Last, First, Middle Initial)

B. Alamo PAC

Mailing Address 1919 Congress Avenue, Suite 14
Frost Bank Plaza

City Austin State TX Zip Code 78701

Purpose of Disbursement
Event: May 18, 2016

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
05 / 16 / 2016

Transaction ID : 71247104

Amount of Each Disbursement this Period

3000.00

Memo Item
Event: May 18, 2016

Full Name (Last, First, Middle Initial)

C. JEB Fund

Mailing Address P.O. Box 30844

City Bethesda State MD Zip Code 20824-0844

Purpose of Disbursement
Event: May 18, 2016

Candidate Name

JEB Fund

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
05 / 16 / 2016

Transaction ID : 71247668

Amount of Each Disbursement this Period

3000.00

Memo Item
Event: May 18, 2016

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

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

8000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Making America Prosperous PAC

Mailing Address P.O. Box 2485

City Springfield State VA Zip Code 22152

Purpose of Disbursement
ICI Event: May 19, 2016

011

Candidate Name

Making America Prosperous PAC

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 71248042

Amount of Each Disbursement this Period

2500.00

Memo Item
ICI Event: May 19, 2016

Full Name (Last, First, Middle Initial)

B. Hoosiers First PAC

Mailing Address 1433 R Street, NW #2

City Washington State DC Zip Code 20009

Purpose of Disbursement
ACLI Event: May 19, 2016

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 71249552

Amount of Each Disbursement this Period

5000.00

Memo Item
ACLI Event: May 19, 2016

Full Name (Last, First, Middle Initial)

C. Tiberi For Congress

Mailing Address 2931 E Dublin Granville Road
Suite 190

City Columbus State OH Zip Code 43231

Purpose of Disbursement
ACLI Event: May 24, 2016

011

Candidate Name

Rep. Pat J. Tiberi

Category/
Type

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: OH District: 12

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2016

Transaction ID : 71250589

Amount of Each Disbursement this Period

2500.00

Memo Item
ACLI Event: May 24, 2016

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

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NAME OF COMMITTEE (In Full)

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
Event: May 25, 2016

011

Category/
Type

Candidate Name

Elise Stefanik

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2016

Transaction ID : 71251511

Amount of Each Disbursement this Period

2500.00

Memo Item
Event: May 25, 2016

Full Name (Last, First, Middle Initial)

B. Elise For Congress

Mailing Address PO Box 500

City Glens Falls State NY Zip Code 12801

Purpose of Disbursement
Event: May 25, 2016

011

Category/
Type

Candidate Name

Elise Stefanik

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2016

Transaction ID : 71252440

Amount of Each Disbursement this Period

2500.00

Memo Item
Event: May 25, 2016

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
Event: May 25, 2016

011

Category/
Type

Candidate Name

Rep. Michael E. Capuano

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MA District: 07

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2016

Transaction ID : 71252960

Amount of Each Disbursement this Period

1000.00

Memo Item
Event: May 25, 2016

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

6000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Capuano For Congress Committee

Mailing Address PO Box 440305

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Event: May 25, 2016

011

Candidate Name

Rep. Michael E. Capuano

Category/
Type

Office Sought: House
 Senate
 President
State: MA District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2016

Transaction ID : 71253518

Amount of Each Disbursement this Period

2500.00

Memo Item
Event: May 25, 2016

Full Name (Last, First, Middle Initial)

B. Pascrell For Congress

Mailing Address Pob 100

City Teaneck State NJ Zip Code 07666

Purpose of Disbursement
Event: May 25, 2016

011

Candidate Name

Rep. William J. Pascrell Jr.

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 71254226

Amount of Each Disbursement this Period

2500.00

Memo Item
Event: May 25, 2016

Full Name (Last, First, Middle Initial)

C. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
Event: May 25, 2016

011

Candidate Name

Rep. Mike Thompson

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 71255129

Amount of Each Disbursement this Period

2500.00

Memo Item
Event: May 25, 2016

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. VINE PAC

Mailing Address 700 13th Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Event: May 25, 2016

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : 71255636

Amount of Each Disbursement this Period

2500.00

Memo Item
Event: May 25, 2016

Full Name (Last, First, Middle Initial)

B. Kustoff For Congress

Mailing Address 1661 Aaron Brenner Drive
Suite 300

City Memphis State TN Zip Code 38120

Purpose of Disbursement
2016 Candidate Support

Candidate Name

David Kustoff

Office Sought: House
 Senate
 President
State: TN District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2016

Transaction ID : 71261971

Amount of Each Disbursement this Period

1000.00

Memo Item
2016 Candidate Support

Full Name (Last, First, Middle Initial)

C. RFW PAC

Mailing Address 20 F Street, NW
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement
BGR Event: May 18, 2016

Candidate Name

RFW PAC

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 71318706

Amount of Each Disbursement this Period

5000.00

Memo Item
BGR Event: May 18, 2016

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Todd Young, Inc.

Mailing Address PO Box 1053

City State Zip Code
Bloomington IN 47402

Purpose of Disbursement
BGR Event: May 18, 2016

Candidate Name

Rep. Todd Young

Office Sought: House
 Senate
 President
State: IN District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2016

Transaction ID : 71318719

Amount of Each Disbursement this Period

5000.00

Memo Item
BGR Event: May 18, 2016

Full Name (Last, First, Middle Initial)

B. Friends Of Todd Young, Inc.

Mailing Address PO Box 1053

City State Zip Code
Bloomington IN 47402

Purpose of Disbursement
2016 Primary Debt Retirement

Candidate Name

Rep. Todd Young

Office Sought: House
 Senate
 President
State: IN District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2016

Transaction ID : 71318728

Amount of Each Disbursement this Period

2000.00

Memo Item
2016 Primary Debt Retirement

Full Name (Last, First, Middle Initial)

C. Jason Smith For Congress

Mailing Address PO Box 1324

City State Zip Code
Cape Girardeau MO 63702

Purpose of Disbursement
Event: May 23, 2016

Candidate Name

Rep. Jason T. Smith

Office Sought: House
 Senate
 President
State: MO District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : 71356168

Amount of Each Disbursement this Period

3000.00

Memo Item
Event: May 23, 2016

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

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

10000.00

94500.00