

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

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

FOR LINE NUMBER: PAGE 183 OF 218

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**MetLife Inc. Employees' Political Participation Fund A**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Smith, Thomas, , ,**

Mailing Address One MetLife Way

City  
Whippany

State  
NJ

Zip Code  
07981

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MetLife Inc.

Occupation (for Individual)  
VP Emerging Markets

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1416.61

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 15 / 2017

**Transaction ID : A2017-2146803**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Smith, Thomas, , ,**

Mailing Address One MetLife Way

City  
Whippany

State  
NJ

Zip Code  
07981

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MetLife Inc.

Occupation (for Individual)  
VP Emerging Markets

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1499.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2017

**Transaction ID : A2017-2205254**

Amount of Each Receipt this Period

83.33

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Snider, Gregory, T, ,**

Mailing Address 18210 Crane Nest Dr

City  
Tampa

State  
FL

Zip Code  
33647

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MetLife Inc.

Occupation (for Individual)  
VP Audit Actuarial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

449.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 15 / 2017

**Transaction ID : A2017-2146956**

Amount of Each Receipt this Period

26.67

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

193.33