FEC FORM 3X		AND	DISBU	F REC		ee		Office Use Onl	у	
1. NAME OF COMMITTEE (in f			Mailing La Or Print 🍟		ample:If typing er the lines	, type				
New York Life Inst	Irance Com	pany Politi	cal Action Cor	mmittee						
ADDRESS (number and	street)	51 Mad	ison Ave.							
Check if diffe		Room 1	109							
than previous reported. (AC		New Yo	rk 					10010		
2. FEC IDENTIFICA		BER 🎙		CITY 🛋		S	STATE	ZIPC	ode 🔺	
C00158881				3. IS THIS REPORT		NEW N) OR		MENDED A)		
 4. TYPE OF REPO (Choose One) (a) Quarterly Reported 	-		ponthly eport ue On:	Feb 20 (M2 Mar 20 (M3		May 20 (M5) Jun 20 (M6)		g 20 (M8) p 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)	
July 15 Quarterl October Quarterl	y Report(Q3	(c)	12-Day PRE -Electi Report for t) . Primary (12P Convention (General Special		Jan 31 (YE) Runoff (12R)	
A Quarterly July 31 I Report(N Year On	y Report(YE ⁄lid-Year lon-election		30-Day Post -Elec Report for t		General (300	a) [Runoff	State	Special (30S)	
5. Covering Period	07	0 1	200	5	through	12	31	2005]	
-	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 Helen Stagias									
Signature of Treasurer	Signature of Treasurer Electronically Filed by Helen Stagias Date 07 26 2007									
NOTE : Submission of	NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.									
Office Use Only								FEC FO (Rev. 02/2		

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

F	Report Covering the Period: From:	D D Y W Y 01 2005	To:
	-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1		284752.02
	(b) Cash on Hand at Begining of Reporting Period	256902.64]
	(c) Total Receipts (from Line 19)	356982.86	667419.48
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	613885.50	952171.50
7.	Total Disbursements (from Line 31)	261367.72	599653.72
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	352517.78	352517.78
).	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00]
0.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00]

X 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

	FEC Form 3X (Rev. 02/2003)		Page 3
W	rite or Type Committee Name New York Life Insurance Company Political	Action Committee	
R	eport Covering the Period: From:	01 Y Y W Y 2005 T	$\begin{array}{c} \begin{array}{c} M & M \\ 1 & 2 \end{array} \end{array} \begin{array}{c} D & D \\ 3 & 1 \end{array} \begin{array}{c} Y & Y & Y \\ 2 & 0 & 0 \end{array} $
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	236100.94	375382.26
	(ii) Unitemized	120881.92	292037.22
	(iii) TOTAL (add Lines 11(a)(i) and (ii) 🅨	356982.86	667419.48
	(b) Political Party Committees	0.00	0.00
	 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	356982.86	667419.48
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
J.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
6.	Refunds of Contributions Made to Federal candidates and Other		
_	Political Committees	0.00	0.00
ί.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
3.	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 Transfer (add 18(a) and 18(b)).	0.00	0.00
Э.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	356982.86	667419.48
).	Total Federal Receipts (subtract Line 18(c) from Line 19)	356982.86	667419.48

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4			
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
. Operating Expenditures: -					
(a) Shared 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	0.00	0.00			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) >	0.00	0.00			
. Transfers to Affiliated/Other Party Committees	0.00	0.00			
Contributions to Federal Candidates/Committees and Other Political Committees	201850.00	525350.00			
. Independent Expenditure					
(use Schedule E)	0.00	0.00			
 Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) 	0.00	0.00			
6. Loan Repayments Made	0.00	0.00			
7. Loans Made	0.00	0.00			
. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	42017.72	42803.72			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees (such as PACs)	0.00	0.00			
(d) Total Contribution Refunds	42017.72				
(add Lines 28(a), (b), and (c)) 🕨	42017.72	42803.72			
. Other Disbursements	17500.00	31500.00			
. Federal Election Activity (2 U.S.C 431(20))					
(a) Shared 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	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00				
. Total Disbursements (add Lines 21(c), 22,	261367.72	E006E0 70			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	201307.72	599653.72			
 Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) 					
from Line 31)	261367.72	599653.72			

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)		Page 5
	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	356982.86	667419.48
34.	Total Contribution Refunds (from Line 28(d))	42017.72	42803.72
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	314965.14	624615.76
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	-	FOR LINE NUMBER: PAGE 6 / 395 (check only one)								
11	EMIZED RECEIPTS		Detailed Summary Page	X	-	\square	11b		11c		12		
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	r not be sold or used by any pers Iress of any political committee to	on for o solici	13 the pur t contri	pose butio	14 of so ns fro	licitin m su	15 lg co lch c	ntribu omm	16 utions ittee.		17
\sum	NAME OF COMMITTEE (In Full)												
\angle	New York Life Insurance Company Polit	ical Action	Committee										
Α.	Full Name (Last, First, Middle Initial) Mr. Jeffrey R. Donoho				Date o	f Rec	ceipt						
	Mailing Address 2901 Caroline PO Box 487				M M / D D / Y Y Y Y 09 01 2005								
	City	State	Zip Code	_	Transa	ictio	n ID:	317	787				
	Mount Vernon		62864-0010		Amount of Each Receipt this Period								_
	FEC ID number of contributing federal political committee.	C			300.00								
	Name of Employer New York Life Insurance	Occupation Agent											
	Company Receipt For:	, v	Year-to-Date V	_									
	Primary General		300.00										
	Other (specify) ▼	0 0	300.00										
в.	Full Name (Last, First, Middle Initial) Mr. William F. Johnson				Date o	f Rec	ceipt						
	Mailing Address 4 Primrose Circle			0 9	/		D / 1	Y	ү 2	0 °	У 5		
	City	State	Zip Code		Transaction ID: 317788								
	<u>Signal Mountain</u>	TN	37377-2514	_	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C							1	25.0	0		
	Name of Employer New York Life Insurance	Occupation											
	Company	Agent	Veer te Dete										
	Receipt For: Primary General	Aggregale	Year-to-Date ▼	- 1									
	Other (specify)	0 0	250.00										
с.	Full Name (Last, First, Middle Initial) Ms. Jenny Kho				Date o	f Rec	ceipt						
	Mailing Address 77 Cumberland Drive				м м 0 9	/	D 0	D / 1	Y		0 0		
	City	State	Zip Code		Transa	ctio	n ID:	317	789				
	Yonkers	NY	10704-3525	_	Amour	nt of I	Each	Rece	eipt th	nis P	eriod		_
	FEC ID number of contributing federal political committee.	C					1			3	800.0	0	
	Name of Employer New York Life Insurance	Occupation	ו										
	Company	Agent	Year-to-Date V										
	Receipt For: Primary General	Ayyreyale		- 1									
	Other (specify)	0 0	300.00										
s	UBTOTAL of Receipts This Page (optional)			•				,		7	25.0	0]
т	OTAL This Period (last page this line number or	ıly)		► ►									

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 7 / 395 (check only one) X X 11a 11b 11c 12				
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and Sta for commercial purposes, other than using the n							
\sum	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee	_				
Α.	Full Name (Last, First, Middle Initial) Ms. Christie S. Mueller			Date of Receipt				
	Mailing Address 6841 Ripley Lane N			09 01 Y Y Y Y 09 01 2005				
	City	State	Zip Code	Transaction ID: 317790				
	Renton	WA	98056-1529	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		600.00				
	Name of Employer New York Life Insurance	Occupation	n	-				
	Company Receipt For:	Agent	e Year-to-Date V	_				
	Primary General	7.99.09u.0		1				
	Other (specify)	0 0	600.00					
в.	Full Name (Last, First, Middle Initial) Mr. William F. Murphy			Date of Receipt				
	Mailing Address 233 Linkside Circle			M M / D D / Y Y Y Y				
	City	State	Zip Code	09 01 2005				
	Ponte Vedra	FL	32082-2034	Transaction ID: 317792 Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		390.00				
	Name of Employer New York Life Insurance	Occupation						
	Company Receipt For:	Senior Pa	artner e Year-to-Date V	_				
	Primary General	Aggregate		1				
	Other (specify)	0 0	585.00					
с.	Full Name (Last, First, Middle Initial) Mr. Sharif S. Ali			Date of Receipt				
	Mailing Address 13710 Hidden Dell Court	t		M M / D D / Y Y Y Y 12 09 2005				
	City	State	Zip Code	Transaction ID: 3227744				
	Houston	TX	77059-3510	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		0.00				
	Name of Employer New York Life Insurance	Occupation	n					
	Company Receipt For:	Agent	e Year-to-Date V					
	Primary General	riggrogate		[MEMO ITEM] Befund(s) on Schedule B				
	Other (specify)	0 0	-570.00	Refund(s) on Schedule B Totaling \$660.00 This cha- nges the YTD Total to \$-5- 70.00				
s	UBTOTAL of Receipts This Page (optional)			990.00				
F								
T	OTAL This Period (last page this line number or	ıly)						

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)				FOR LINE NUMBER: PAGE 8 / 395 (check only one)							
IT	EMIZED RECEIPTS		or each category Detailed Summa		`_	X 11	a [11b		11c		12 16	□ 47	
	y information copied from such Reports and Sta for commercial purposes, other than using the r					r the p	urpos	se of so		ing co		utions	17	
$\overline{\}$	NAME OF COMMITTEE (In Full)													
\rangle	New York Life Insurance Company Poli	tical Action	Committee											
Α.	Full Name (Last, First, Middle Initial) Mr. Kurt Anderson				Date of Receipt									
	Mailing Address 13038 Village Chase Ci	rcle				[™] 1		/ D 3	^D 3 1	/ Y	Y 2	0 ^Y 0	5	
	City	State	Zip Code		Transaction ID: 3227745									
	Tampa	FL	33618-8359		-	Amo	unt c	f Each	Rec	ceipt t	his P	eriod		
	FEC ID number of contributing federal political committee.	C										0.0	0	
	Name of Employer New York Life Insurance Company	Occupation Sales De												
	Receipt For:		Year-to-Date 🔻	0		IME	10 I	темі						
	Primary General Other (specify) ▼	0 0	0 0 0 0 0	666.68	[MEMO ITEM] Refund(s) on Schedule B Totaling \$333.32 This cha- nges the YTD Total to \$66- 6.68									
в.	Full Name (Last, First, Middle Initial) Mr. Thomas W. Blohm				T		of R	eceipt						
	Mailing Address 2816 Broadview Terrace						2		D 9	/ Y		0 0		
	City		Transaction ID: 3227746											
	Annapolis	MD	21401-7233		_	Amo	unt c	f Each	Rec	ceipt t	his P	eriod		
	FEC ID number of contributing federal political committee.	C						1		1		0.0	0	
	Name of Employer New York Life Insurance Company	Occupation Agent	ו											
	Receipt For:	l v	Year-to-Date 🔻			IME	10 I	TEM]						
	Primary General Other (specify) ▼	U U U		-480.00		- Refu	nd(s) ing { the) on S 540.0 YTD T	che 00 T ota	dule his c l to \$	B ha- S-4-			
<u></u>	Full Name (Last, First, Middle Initial) Mr. Frank A. Boccio				╈	00.00		eceipt						
	Mailing Address 280 Atlantic Avenue Apt. 114					[™] 1	2 ^M	, D	D 9	/ Y		0 0		
	City	State	Zip Code			Tran	sacti	on ID:	322	2774	7			
	East Rockaway	NY	11518-1130		-	Amo	unt c	f Each	Rec	ceipt t	his P	eriod		
	FEC ID number of contributing federal political committee.	C										0.0	0	
	Name of Employer New York Life Insurance Company	Occupation Agent	ı		1									
	Receipt For:	Aggregate	e Year-to-Date 🔻			[MEI	101	TEM]						
	Other (specify) ▼		0 0 0 0 0	-175.03		Refu Total nges 75.03	nd(s) ing { the) on S 237.5 YTD T	che 55 T ota	dule his c l to \$	B ha- S-1-			
s	UBTOTAL of Receipts This Page (optional)				_1_							0.0	0	
	OTAL This Period (last page this line number o													

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)				FOR LINE NUMBER: PAGE 9/395							
	EMIZED RECEIPTS		or each category of the	(`	ck only		<i>,</i>	_		_			
			Detailed Summary Page		Х	11a		11b	Щ	11c	12	<u> </u>		
•	internetion particul from and D in 197		and he california a U		(13		14 	Ц	15	16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
Ν	NAME OF COMMITTEE (In Full)													
\langle	New York Life Insurance Company Polit	ical Action	Committee											
Α.	Full Name (Last, First, Middle Initial) Ms. Delma Bolden				Date of Receipt									
	Mailing Address 4567 Merrill Avenue				M M / D D / Y Y Y Y 12 09 2005									
	City	State	Zip Code		Transaction ID: 3227748									
	Oakland	CA	94619-2737		Α	Amoun	t of E	ach I	Reco	eipt this	s Period	ł		
	FEC ID number of contributing federal political committee.	C									0.	00		
	Name of Employer New York Life Insurance Company	Occupation Agent	1											
	Receipt For:	Aggregate	Year-to-Date 🔻		ГМ	ТЕМО	ITE	M						
	Primary General		-344.01		<u>R</u> €	əfund	(s) 0	n Sc	heq	lule B				
	Other (specify) v	0 0			Refund(s) on Schedule B Totaling \$404.01 This cha- nges the YTD Total to \$-3- 44.01									
в.	Full Name (Last, First, Middle Initial) Ms. Celia N. Boyd				0	Date of	Rece	eipt						
	Mailing Address 419A Decatur Street			12 / D D / Y Y Y Y 31 / 2005										
	City	State		Transaction ID: 3227749										
	Brooklyn	NY		Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		0.00						00				
	Name of Employer New York Life Insurance	Occupation												
	Company	Employe												
	Receipt For: Primary General	Aggregate	Year-to-Date V			IEMO								
	Other (specify)		-600.40		Re	etund((S) 0 1 \$71	n Sc 15.9	hec 0 Th	lule B his cha	a-			
		0 0	0 0 0 0 0 0		Refund(s) on Schedule B Totaling \$715.90 This cha- nges the YTD Total to \$-6- 00 40									
<u>с</u>	Full Name (Last, First, Middle Initial) Mr. Jorge Burgoa					Date of	Bece	eint						
	Mailing Address 3451 Southwest 137 Ave	enue				мм		D	D	Y	YY			
						12	L	0	9		200	5		
	City	State	Zip Code			ransa								
	Miramar	<u> </u>	33027-3204		Α	Amoun	t of E	ach I	Reco	eipt this	s Period	ł		
	FEC ID number of contributing federal political committee.	C			0.00						00			
	Name of Employer New York Life Insurance	Occupation	1											
	Company	Agent												
	Receipt For:	Aggregate	Year-to-Date 🔻			IEMO								
Primary General Other (specify) ▼			-450.00		Re	efund otaling	(s) o 1 \$45	n Sc 50.0	chec 0 Th	lule B nis cha to \$-4	a-			
					50).00			otal	ιυ φ-2	r"			
s	UBTOTAL of Receipts This Page (optional)			►	ļ						0.	00		
Т	OTAL This Period (last page this line number or	ıly)		•										

0		1		FOR LINE NUMBER: PAGE 10/395					
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)					
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12					
			, ,	13 14 15 16 17					
	ny information copied from such Reports and Stat for commercial purposes, other than using the na								
	NAME OF COMMITTEE (In Full)								
\geq	New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Clifford G. Canavera			Date of Receipt					
	Mailing Address 448 Pine Point Road			1 2 0 9 2 0 0 5					
	City	State	Zip Code	Transaction ID: 3227751					
	Brandenburg	KY	40108-7119	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	<u> </u>	Year-to-Date V						
	Primary General Other (specify) ▼	0 0	-125.00	Refund(s) on Schedule B Totaling \$275.00 This cha- nges the YTD Total to \$-1-					
<u> </u>	Full Name (Last, First, Middle Initial) Ms. Cathy Casper	25.00 Date of Receipt							
υ.	Mailing Address 881 Cupp Ridge Road								
		12 09 2005							
	City	State	Zip Code	Transaction ID: 3227752					
	New Tazewell	TN	37825-4109	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent	Voar to Dato						
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	[MEMO ITEM] Refund(s) on Schedule B					
_	Other (specify)	0 0	-704.00	Refund(s) on Schedule B Totaling \$854.00 This cha- nges the YTD Total to \$-7- 04.00					
~	Full Name (Last, First, Middle Initial)								
U.	Mr. Jun R. Chen Mailing Address 1640 74th Street			Date of Receipt					
				1 2 0 9 2 0 0 5					
	City	State	Zip Code	Transaction ID: 3227753					
	Brooklyn	NY	11204-5127	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company	Agent							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼						
	Other (specify)	0 0	-136.00	Refund(s) on Schedule B Totaling \$202.00 This cha- nges the YTD Total to \$-1- 36.00					
s	UBTOTAL of Receipts This Page (optional)			0.00					
11	OTAL This Period (last page this line number on	ııy)							

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 11/395							
			Use separate schedule(s) or each category of the	(check only one)							
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12							
Δ	winformation appied from such Departs and Ob	tomonto	unot be cold as used by same	13 14 15 16 17							
	y information copied from such Reports and Sta for commercial purposes, other than using the n										
\sum	NAME OF COMMITTEE (In Full)										
\geq	New York Life Insurance Company Polit	tical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. Lance Crawford			Date of Receipt							
	Mailing Address 8290 Lake Drive Apt. 101			1 2 / D D / Y Y Y Y 1 2 0 0 5							
	City	State	Zip Code	Transaction ID: 3227754							
	Doral	FL	33166-4670	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance	Occupation Agent	n								
	Company Receipt For:	-	e Year-to-Date 🔻								
	Primary General		E70.00								
	Other (specify)	0 0	-570.00	Refund(s) on Schedule B Totaling \$660.00 This cha- nges the YTD Total to \$-5- 70.00							
в.	Full Name (Last, First, Middle Initial) Ms. Cynthia Jo Deberg			Date of Receipt							
	Mailing Address 907 Crestridge Drive			M M / D D / Y Y Y Y 12 09 2005							
	City	Zip Code	Transaction ID: 3227755								
	Kearney	MO	64060-7174	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance	Occupation	n								
	Company	Agent	<u> </u>								
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻								
	Other (specify) ▼	0 0	-250.00	Refund(s) on Schedule B Totaling \$250.00 This cha- nges the YTD Total to \$-2- 50 00							
с.	Full Name (Last, First, Middle Initial) Mr. Sergy Dorfman			Date of Receipt							
	Mailing Address 1401 E San Angelo Aver	nue		1 2 0 9 2 0 0 5							
	City	State	Zip Code	Transaction ID: 3227756							
	Gilbert	AZ	85234-3628	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		0.00							
	Name of Employer New York Life Insurance	Occupation	n	7							
	Company	Agent	Voor to Doto								
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	[MEMO ITEM]							
	Other (specify)	-312.09	Refund(s) on Schedule B Totaling \$364.11 This cha- nges the YTD Total to \$-3- 12.09								
S	UBTOTAL of Receipts This Page (optional)			0.00							
Ľ	UTTAL OF RECEIPTS THIS Fage (optional)										
т	OTAL This Period (last page this line number or	nly)									

6	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 12/395					
	1 J		Use separate schedule(s) or each category of the	(check only one)					
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
	y information copied from such Reports and Sta								
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Polit								
\square	New Fork Life insurance company Fork		oommace						
Α.	Full Name (Last, First, Middle Initial) Mr. Clay Doss, Jr.			Date of Receipt					
	Mailing Address 215 Lakeside Drive			M M / D D / Y Y Y Y 12 09 2005					
	City	State	Zip Code	Transaction ID: 3227757					
	Kennesaw	GA	30144-3097	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance	Occupation Agent	1	_					
	Company Receipt For:	, v	e Year-to-Date 🔻						
	Primary General		-570.00	Refund(s) on Schedule B					
	Other (specify)	0 0		Totaling \$660.00 This cha- nges the YTD Total to \$-5- 70.00					
В.	Full Name (Last, First, Middle Initial) Mr. Khashayar Dowlatshahi			Date of Receipt					
	Mailing Address 14430 Benefit Street North 101			M M / D D / Y Y Y Y 12 09 2005					
	City	State	Zip Code	Transaction ID: 3227758					
	Sherman Oaks	CA	91423-4057	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer	Occupation	า						
	New York Life Insurance Company	Agent							
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	[MEMO ITEM]					
	Other (specify) ▼		-464.01	Refund(s) on Schedule B Totaling \$554.01 This cha- nges the YTD Total to \$-4- 64 01					
	Full Name (Last, First, Middle Initial) Ms. Violet Ertel			Date of Receipt					
	Mailing Address 33 Zion Street			M M / D D / Y Y Y Y 12 09 2005					
	City	State	Zip Code	Transaction ID: 3227759					
	Kenner	LA	70065-1040	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:		Year-to-Date 🔻						
	Primary General Other (specify) ▼		-329.46	Refund(s) on Schedule B Totaling \$381.48 This cha- nges the YTD Total to \$-3- 29.46					
				0.00					
F	UBTOTAL of Receipts This Page (optional)		••••••						

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 395 (check only one)								
ITEMIZED RECEIPTS			or each category of the	(Check only one)								
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$								
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	on for the purpose of soliciting contributions										
	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Company Polit	tical Action	Committee									
Α.	Full Name (Last, First, Middle Initial) Ms. Olivia Fischer			Date of Receipt								
	Mailing Address 15461 3 Fathoms Bk			1 2 0 9 2 0 0 5								
	City	State	Zip Code	Transaction ID: 3227760								
	Crps Christi	TX	78418-0000	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		0.00								
	Name of Employer New York Life Insurance	Occupation Agent	n	_								
	Company Receipt For:	, v	e Year-to-Date 🔻	[MEMO ITEM]								
	Primary General											
	Other (specify)	0 0	-416.16	Refund(s) on Schedule B Totaling \$468.18 This cha- nges the YTD Total to \$-4- 16.16								
В.	Full Name (Last, First, Middle Initial) Ms. Susan D'Ettorre Friedman			Date of Receipt								
	Mailing Address 10923 NW 18th Place			M M / D D / Y Y Y Y 12 09 2005								
	City	State	Zip Code	Transaction ID: 3227761								
	Plantation	FL	33322-3455	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		0.00								
	Name of Employer Friedman	Occupation Agent	n	-								
	Receipt For:	Ŭ	e Year-to-Date 🔻	[MEMO ITEM]								
	Primary General		010.00									
	Other (specify) v	0 0	-210.00	Refund(s) on Schedule B Totaling \$210.00 This cha- nges the YTD Total to \$-2- 10.00								
C.	Full Name (Last, First, Middle Initial) Mr. Kenneth Heise			Date of Receipt								
	Mailing Address 6100 W Stonehedge Dri	ve Apt. 32	2B	12 09 2005								
	City	State	Zip Code	Transaction ID: 3227762								
	Greenfield	WI	53220-4602	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		0.00								
	Name of Employer New York Life Insurance	Occupation Agent	n	7								
	Company Receipt For:		e Year-to-Date 🔻									
Primary General		riggrogaio		[MEMO ITEM] Refund(s) on Schedule B								
	Other (specify)	0 0	-339.99	Totaling \$459.99 This cha- nges the YTD Total to \$-3- 39.99								
s	UBTOTAL of Receipts This Page (optional)			0.00								
	OTAL This Period (last page this line number of											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14/395 (check only one) 11a X 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.									
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Ernesto Herrera			Date of Receipt					
	Mailing Address 609 Meadow Willow Driv	/e		M M / D D / Y Y Y Y 12 09 2005					
	City	State	Zip Code	Transaction ID: 3227763					
	<u>El Paso</u>	TX	79922-2216	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	n						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ -465.15	[MEMO ITEM] Refund(s) on Schedule B Totaling \$615.15 This cha- nges the YTD Total to \$-4- 65.15					
в.	Full Name (Last, First, Middle Initial) Mr. Jostelyn Heslop			Date of Receipt					
υ.	Mailing Address 2181 Madison Avenue	M M / D D / Y Y Y Y 12 09 2005							
	City	State	Zip Code	Transaction ID: 3227764					
	New York	NY	10037-2301	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	n						
	Receipt For:	Aggregate	e Year-to-Date 🔻	[MEMO ITEM]					
	Other (specify) ▼	0 0	-309.99	Refund(s) on Schedule B Totaling \$429.99 This cha- nges the YTD Total to \$-3-					
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Matthew Hill			08.99 Date of Receipt					
	Mailing Address 673 2nd Place S			M M / D D / Y Y Y Y 12 09 2005					
	City	State	Zip Code	Transaction ID: 3227765					
	Garden City	NY	11530-5203	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance	Occupation Agent	n						
	Company Receipt For:	U U	e Year-to-Date 🔻						
	Primary General Other (specify) ▼		-136.00	Refund(s) on Schedule B Totaling \$202.00 This cha- nges the YTD Total to \$-1- 36.00					
s	UBTOTAL of Receipts This Page (optional)			0.00					

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3X) Rev. 02/2003

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15/395 (check only one) 11a 11b 11c 12 13 14 15 16 17							
	ny information copied from such Reports and Sta for commercial purposes, other than using the r										
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Poli	tical Action	Committee								
<u>А</u> .	Full Name (Last, First, Middle Initial) Ms. Swee Lin Hines			Date of Receipt							
	Mailing Address 3494 Hines Circle			12 / Y Y Y Y 12 12 2005							
	City	State	Zip Code	Transaction ID: 3227766							
	Anchorage	AK	99516-7615	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance Company	Occupation Agent	n								
	Receipt For:	Aggregate	e Year-to-Date 🔻								
	Primary General Other (specify) ▼	0 0	-225.00	Refund(s) on Schedule B Totaling \$225.00 This cha- nges the YTD Total to \$-2- 25.00							
в.	Full Name (Last, First, Middle Initial) Mr. Ronald A. Hoffman Clu			Date of Receipt							
	Mailing Address 7 Wilma Drive			12 09 Y Y Y Y 12 09 2005							
	City	State	Zip Code	Transaction ID: 3227767							
	Lancaster	NY	14086-2709	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance <u>Company</u> Receipt For: Primary General Other (specify) ▼	Occupation Agent Aggregate	n e Year-to-Date ▼ -720.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$810.00 This cha- nges the YTD Total to \$-7-							
_	Full Name (Last, First, Middle Initial)			20.00							
C.	Mr. Asif Huda Mailing Address 3625 Santa Elena Circle			Date of Receipt							
		;		12 12 2005							
	City	State	Zip Code	Transaction ID: 3227768							
	Corona	CA	92882-7913	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
New York Life Insurance		Occupation Agent	n								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ -349.97	[MEMO ITEM] Refund(s) on Schedule B Totaling \$499.97 This cha- nges the YTD Total to \$-3- 49.97							
s	UBTOTAL of Receipts This Page (optional)			0.00							
Т	OTAL This Period (last page this line number o	nly)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 395 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17			
	y information copied from such Reports and Sta for commercial purposes, other than using the n						
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Poli	tical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Donald Jackson			Date of Receipt			
	Mailing Address 1610 S Bonham St.			1 2 1 2 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 3227769			
	Amarillo FEC ID number of contributing federal political committee.	TX C	79102-2410	Amount of Each Receipt this Period			
	Name of Employer New York Life Insurance Co.	Occupation Agent	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ -225.42	[MEMO ITEM] Refund(s) on Schedule B Totaling \$225.42 This cha- nges the YTD Total to \$-2- 25.42			
В.	Full Name (Last, First, Middle Initial) Mr. Hagop Nerses Kazizian Mailing Address 2516 Redfish Drive			Date of Receipt			
	City	State Zip Code					
	Texas City	ТΧ	77591-9242	Transaction ID: 3227770 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		0.00			
	Name of Employer New York Life Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Agent Aggregate	n ∋ Year-to-Date ▼ -136.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$202.00 This cha- nges the YTD Total to \$-1- 36 00			
с.	Full Name (Last, First, Middle Initial) Mr. Tariq N. Khan			Date of Receipt			
	Mailing Address 4610 Sylvan Glen Drive			M M / D D / Y Y Y Y 12 12 2005			
	City Houston	State TX	Zip Code 77084-3641	Transaction ID: 3227771			
	FEC ID number of contributing federal political committee.	C	//004-3041	Amount of Each Receipt this Period 0.00			
	Name of Employer New York Life Insurance Co.	Occupation Agent	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ -260.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$260.00 This cha- nges the YTD Total to \$-2- 60.00			
s	UBTOTAL of Receipts This Page (optional)			0.00			
Т	OTAL This Period (last page this line number or	nly)					

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 17/395							
	· · · ·		Use separate schedule(s) or each category of the	(check only one)							
			Detailed Summary Page	X 11a 11b 11c 12							
				13 14 15 16 17							
	y information copied from such Reports and Sta for commercial purposes, other than using the na										
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Company Polit	ical Action	Committee								
Á.	Full Name (Last, First, Middle Initial) Mr. Terry L. Lewis			Date of Receipt							
	Mailing Address 20010 Kingsland			1 2 / D D / Y Y Y Y 1 2 0 0 5							
	City	State	Zip Code	Transaction ID: 3227772							
	Katy	TX	77450-3005	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance Company	Occupation Agent	n								
	Receipt For:		e Year-to-Date 🔻								
	Primary General		-437.16	Refund(s) on Schedule B Totaling \$499.68 This cha-							
	Other (specify)	0 0		nges the YTD Total to \$-4- 37.16							
в.	Full Name (Last, First, Middle Initial) Mr. Jim Littlefield			Date of Receipt							
	Mailing Address 11 Potters Avenue			1 2 1 2 7 Y Y Y Y Y 1 2 0 0 5							
	City	State	Zip Code	Transaction ID: 3227773							
	St. Albans	VT	05478-5121	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		0.00							
	Name of Employer New York Life Insurance	Occupation	n								
	Company	Agent									
	Receipt For: Primary General	Aggregate	e Year-to-Date V	[MEMO ITEM]							
	Other (specify) ▼	0 0	-416.00	Refund(s) on Schedule B Totaling \$520.00 This cha- nges the YTD Total to \$-4- 16.00							
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Chien-Te Lu			Date of Receipt							
	Mailing Address 20318 Julliard Drive			M M / D D / Y Y Y Y 12 12 2005							
	City	State	Zip Code	Transaction ID: 3227774							
	Walnut	CA	91789-2433	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance	Occupation	n	7							
	New York Life Insurance Company	Agent									
	Receipt For:	Aggregate	e Year-to-Date 🔻	[MEMO ITEM]							
	Other (specify) ▼	0 0	-419.97	Refund(s) on Schedule B Totaling \$569.97 This cha- nges the YTD Total to \$-4- 19.97							
				0.00							
	UBTOTAL of Receipts This Page (optional)		•••••	-							
Т	OTAL This Period (last page this line number or	ıly)									

				FOR LINE NUMBER: PAGE 18/395							
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 18/395 (check only one)							
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information conied from such Departs and Statements			Secure Summary Lugo	13 14 15 16 17							
	y information copied from such Reports and Stat for commercial purposes, other than using the na										
\sum	NAME OF COMMITTEE (In Full)										
$\left \right\rangle$	New York Life Insurance Company Polit	ical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. Kutty Mathai			Date of Receipt							
	Mailing Address 3182 Allison Court			1 2 / D D / Y Y Y Y 1 2 / 2 0 0 5							
	City	State	Zip Code	Transaction ID: 3227775							
	Tallahassee	FL	32304	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance Company	Occupation Agent	1								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General		-705.00	Refund(s) on Schedule B Totaling \$705.00 This cha-							
	Other (specify)	0 0		nges the YTD Total to \$-7- 05.00							
в.				Date of Receipt							
	Mailing Address 10401 Cascade Drive			1 2 / D D / Y Y Y Y 1 2 2 0 0 5							
	City	State	Zip Code	Transaction ID: 3227776							
	Denton	TX	76207-8658	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance	Occupation	ו								
	Company	Agent	Veerste Dete	_							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	[MEMO ITEM]							
	Other (specify) ▼		-720.00	Refund(s) on Schedule B Totaling \$810.00 This cha- nges the YTD Total to \$-7-							
	Full Name (Last, First, Middle Initial)			20.00							
C.	Mr. Thomas R. Melendy			Date of Receipt							
	Mailing Address 218 Tirrell Hill Road			M M / D D / Y Y Y Y 12 12 2005							
	City	State	Zip Code	Transaction ID: 3227777							
	Goffstown	NH	03045-2727	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance	Occupation	1	7							
	Company			_							
		Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼	0 0	-458.15	Refund(s) on Schedule B Totaling \$520.67 This cha- nges the YTD Total to \$-4-							
				0.00							
	UBTOTAL of Receipts This Page (optional)		•••••								
т	OTAL This Period (last page this line number on	ıly)									

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 19/395							
	· · · ·		Use separate schedule(s) or each category of the	(check only one)							
Any information copied from such Reports and Sta			Detailed Summary Page	X 11a 11b 11c 12							
		atomonte mai	unot be sold or used by any porec	13 14 15 16 17							
	for commercial purposes, other than using the r										
$\overline{\mathbf{N}}$	NAME OF COMMITTEE (In Full)										
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. Lawrence Miller			Date of Receipt							
	Mailing Address 4 Horseshoe Lane			1 2 1 2 / Y Y Y Y 1 2 1 2 2 0 0 5							
	City	State	Zip Code	Transaction ID: 3227778							
	Commack	NY	11725-5507	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance Company	Occupation Agent	1								
	Receipt For:	-	Year-to-Date V								
	Primary General		-458.15	Refund(s) on Schedule B Totaling \$520.67 This cha-							
	Other (specify) 🔻	0 0		nges the YTD Total to \$-4- 58.15							
в.	Full Name (Last, First, Middle Initial) Mr. Mozaffar Morowati			Date of Receipt							
	Mailing Address 5736 Wallis Lane			M M / D D / Y Y Y Y 12 12 2005							
	City	State	Zip Code	Transaction ID: 3227779							
	Woodland Hills	CA	91367-5325	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance	Occupation	1								
	Company Receipt For:	Agent	Year-to-Date ▼								
	Primary General	Ayyreyale		[MEMO ITEM] Befund(s) on Schedule B							
	Other (specify)	0 0	-504.32	Refund(s) on Schedule B Totaling \$540.32 This cha- nges the YTD Total to \$-5- 04.32							
с.	Full Name (Last, First, Middle Initial) Mr. Narendra Parikh			Date of Receipt							
	Mailing Address 1363 Omara Drive			12 12 2005							
	City	State	Zip Code	Transaction ID: 3227780							
	Union	NJ	07083-5210	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		0.00							
	Name of Employer New York Life Insurance	Occupation	1	7							
	Company Receipt For:	Agent	Year-to-Date ▼								
	Primary General	Aggregate		[MEMO ITEM] Refund(s) on Schedule B							
	Other (specify)		-720.00	Totaling \$810.00 This cha- nges the YTD Total to \$-7- 20.00							
•	UBTOTAL of Receipts This Page (optional)			0.00							
Ľ											
т	OTAL This Period (last page this line number o	nly)									

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 395 (check only one) 11a X 11a 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.									
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Poli	tical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Mr. Brian D. Parker			Date of Receipt						
	Mailing Address 2211 May Wine Lane			M M / D D / Y Y Y Y 12 12 2005						
	City O'Fallon	State MO	Zip Code 63366-8242	Transaction ID: 3227781 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C								
	Name of Employer New York Life Insurance Co.	Occupation Agent	n							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ -440.46	[MEMO ITEM] Refund(s) on Schedule B Totaling \$440.46 This cha- nges the YTD Total to \$-4- 40.46						
в.	Full Name (Last, First, Middle Initial) Mr. Bhaveshkumar Patel			Date of Receipt						
	Mailing Address 41-15 50th Street Apt. 1A			M M / D D / Y Y Y Y 12 12 2005						
	City Woodside	State NY	Zip Code 11377-4300	Transaction ID: 3227782 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		0.00						
	Name of Employer New York Life Insurance Company	Occupation Agent								
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ -416.16	[MEMO ITEM] Refund(s) on Schedule B Totaling \$468.18 This cha- nges the YTD Total to \$-4- 16.16						
с.	Full Name (Last, First, Middle Initial) Mr. Ulric Phillip			Date of Receipt						
	Mailing Address 1860 Flushing Avenue Apt. 3L			M M / D D / Y Y Y Y 12 12 2005						
	City	State	Zip Code	Transaction ID: 3227783						
	Ridgewood FEC ID number of contributing federal political committee.	C	11385-1059	Amount of Each Receipt this Period						
	Name of Employer New York Life Insurance Company	Occupation Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	• Year-to-Date ▼ -455.02	[MEMO ITEM] Refund(s) on Schedule B Totaling \$530.02 This cha- nges the YTD Total to \$-4- 55.02						
s	UBTOTAL of Receipts This Page (optional)		>	0.00						
F	· · · · · · · · · · · · · · · · · · ·									

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 395 (check only one) 11a X 11a 11b I3 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) New York Life Insurance Company Poli	itical Action	I Committee	
Full Name (Last, First, Middle Initial) A. Mr. JERRY N PHILLIPS			Date of Receipt
Mailing Address 375 E Manley Avenue L	Jnit 5		12 / 12 / Y Y Y Y 12 / 12
City Southern Pns	State NC	Zip Code 28387-4900	Transaction ID: 3227784 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		0.00
Name of Employer New York Life Insurance Company	Occupatio Agent		_
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ -458.18	[MEMO ITEM] Refund(s) on Schedule B Totaling \$520.70 This cha- nges the YTD Total to \$-4- 58.18
Full Name (Last, First, Middle Initial) B. Ms. Kimberly Pillow			Date of Receipt
Mailing Address 2503 W River Rd. Ex	M M / D D / Y Y Y Y 12 12 2005		
City Greenwood	State MS	Zip Code 38930-4947	Transaction ID: 3227785 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer New York Life Insurance Company Descript Form	Occupatio Agent		_
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ -416.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$416.00 This cha- nges the YTD Total to \$-4- 16.00
Full Name (Last, First, Middle Initial) C. Mr. Mike Presley			Date of Receipt
Mailing Address 441 Towne Lake Place			M M / D D / Y Y Y Y 12 12 2005
City	State	Zip Code	Transaction ID: 3227786
Montgomery FEC ID number of contributing federal political committee.	C	36117-6013	Amount of Each Receipt this Period
Name of Employer New York Life Insurance Company	Occupatio Agent		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ -385.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$445.00 This cha- nges the YTD Total to \$-3- 85.00
SUBTOTAL of Receipts This Page (optional)		····· •	0.00

TOTAL This Period (last page this line number only)

▶

0				FOR LINE NUMBER: PAGE 22/395								
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12								
			Detailed Summary Fage	13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Company Polit	ical Action	Committee									
Α.	Full Name (Last, First, Middle Initial) Mr. Mark S. Proman			Date of Receipt								
	Mailing Address 6383 Northwest 23rd Wa	ау		1 2 / 1 2 / Y Y Y Y 1 2 0 0 5								
	City	State	Zip Code	Transaction ID: 3227787								
	Boca Raton	FL	33496-3611	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		0.00								
	Name of Employer New York Life Insurance Company	Occupation Agent	n									
	Receipt For:	, v	e Year-to-Date 🔻									
	Primary General Other (specify) ▼	0 0	-1248.00	Refund(s) on Schedule B Totaling \$1404.00 This ch- anges the YTD Total to \$-								
в.	Full Name (Last, First, Middle Initial) Ms. Sonia Roman			Date of Receipt								
	Mailing Address 144 Central Avenue Apt. 2			M M / D D / Y Y Y Y 12 12 2005								
	City	State	Zip Code	Transaction ID: 3227788								
	Jersey City	NJ	07306-2119	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		0.00								
	Name of Employer New York Life Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Employed Aggregate		[MEMO ITEM] Refund(s) on Schedule B Totaling \$288.10 This cha- nges the YTD Total to \$-2-								
_	Full Name (Last, First, Middle Initial)			88.10								
U.	Mr. Robert Rosenberg Mailing Address 171 E 84th Street			Date of Receipt								
				12 12 2005								
	City	State	Zip Code	Transaction ID: 3227789								
	New York	NY	10028-2000	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		0.00								
	Name of Employer New York Life Insurance Company	Occupation Agent	n									
	Receipt For:		e Year-to-Date 🔻									
	Primary General Other (specify) v		-324.97	Refund(s) on Schedule B Totaling \$474.97 This cha- nges the YTD Total to \$-3- 24.97								
s	UBTOTAL of Receipts This Page (optional)		·····	0.00								
T	OTAL This Period (last page this line number or	וע)	· · · ·									

SCHEDULE A (FEC Form 3X)			-	FOR LINE NUMBER: PAGE 23 / 395 (check only one)												
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page													
				13		-	Η	15		16	17					
	y information copied from such Reports and Sta for commercial purposes, other than using the n									3						
\sum	NAME OF COMMITTEE (In Full)															
\geq	New York Life Insurance Company Polit	tical Action	Committee													
Α.	Full Name (Last, First, Middle Initial) Ms. Rajini Saggar				Date of Receipt											
	Mailing Address 1783 Somerset Lane				^M 1 2	JL	1	2	/ Y	2	0 [°] 0					
	City	State	Zip Code		Transa											
	Mundelein	IL	60060-5362	_	Amoun	t of Ea	ach I	Rec	eipt tl	his P	eriod					
	FEC ID number of contributing federal political committee.	C									0.0	00				
	Name of Employer New York Life Insurance Company	Occupation Agent	1													
	Receipt For:	Aggregate	e Year-to-Date 🔻	- I I	мемс		M 1									
	Other (specify)	0 0	-416.00	- I n	Refund otaling iges th 6.00	(s) on 3 \$41 e YT[- Sc 6.00 D To	hea 0 Ti otal	dule his c l to \$	B ha- S-4-						
в.	Full Name (Last, First, Middle Initial) Mr. Arish Kumar Sahani				Date of	Rece	ipt									
	Mailing Address 54-15 108th Street				1 2 ^M	/	- 1	^D 2	/ Y		0 0					
	City	State	Zip Code	- I -	Transa	ction	D: 3	322	2779	1						
	Corona	NY	11368-3913		Amoun	t of Ea	ach I	Rec	eipt tl	his P	eriod					
	FEC ID number of contributing federal political committee.	C									0.0	0				
	Name of Employer New York Life Insurance	Occupation Agent	1													
	Company Receipt For:	ļ	Year-to-Date ▼	- r	[MEMO ITEM]											
	Primary General Other (specify) ▼	0 0	0.00] F T T	Refund otaling			cheo 4 Ti otal	dule his c l to \$	B ha- 50						
 c.	Full Name (Last, First, Middle Initial) Ms. Molly K. Sammons				Date of											
0.	Mailing Address 5978 Annaberg Place				1 2	_	יףי 1		/ Y		0 0					
	City	State	Zip Code		Transa		_	_	ـــــــــــــــــــــــــــــــــــــ		00					
	Burke	VA	22015-2832		Amoun						eriod					
	FEC ID number of contributing federal political committee.	С							1		0.0	0				
	Name of Employer New York Life Insurance	Occupation Agent	ı													
Co. Receipt For:			Year-to-Date V		мемс		M 1									
	Primary General Other (specify) v	0 0	-225.00		Refund otaling ges th 25.00	(s) on 3 \$22 e YTI	5.00 5.00	cheo 0 Ti otal	dule his c l to \$	B ha- S-2-						
s	 UBTOTAL of Receipts This Page (optional)			•							0.0	0				
Т	OTAL This Period (last page this line number or	nly)		• ▶												

~					FOR LINE NUMBER: PAGE 24/395							
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		FOR LINE NUMBER: PAGE 24/395 (check only one)							
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	`_	X 11a 11b 11c 12							
			Detailed Summary Page		13 14 15 16 17							
	y information copied from such Reports and Sta for commercial purposes, other than using the n											
\sum	NAME OF COMMITTEE (In Full)											
\geq	New York Life Insurance Company Polit	ical Action	Committee									
Α.	Full Name (Last, First, Middle Initial) Mr. Kenneth P. Scott, Jr., Jr.				Date of Receipt							
	Mailing Address 5804 Christopher Lane				1 2 1 2 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	City	State	Zip Code		Transaction ID: 3227793							
	Richmond	VA	23226-2626		Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C			0.00							
	Name of Employer New York Life Insurance Company	Occupation Agent	1									
	Receipt For:	Ŭ	e Year-to-Date 🔻		[MEMO ITEM]							
	Primary General		-125.00		Refund(s) on Schedule B							
	Other (specify)	0 0	-123.00		Totaling \$275.00 This cha- nges the YTD Total to \$-1- 25.00							
в.					Date of Receipt							
	Mailing Address 11781 N Lower Sacrame	ento Road			1 2 / 1 2 / Y Y Y Y 1 2 0 0 5							
	City	State	Zip Code		Transaction ID: 3227794							
	Lodi	CA	95242-9547		Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C			0.00							
	Name of Employer New York Life Insurance	Occupation	ı									
	Company	Agent										
	Receipt For:	Aggregate	e Year-to-Date ▼	_	[MEMO ITEM]							
	Primary General Other (specify) ▼		-125.00		Refund(s) on Schedule B Totaling \$215.00 This cha- nges the YTD Total to \$-1-							
	Full Nome (Leet First Middle 1-91-1)				25.00							
C.	Full Name (Last, First, Middle Initial) Mr. Den Stubblefield				Date of Receipt							
	Mailing Address 5727 N Farris				1 2 1 2 2 0 0 5							
	City	State	Zip Code		Transaction ID: 3227795							
	Fresno	CA	93711-2426		Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C			0.00							
	Name of Employer New York Life Insurance	Occupation	1									
	New York Life Insurance Company	Agent										
	Receipt For:	Aggregate	e Year-to-Date 🔻		[MEMO ITEM]							
	Primary General		-4000.18									
	Other (specify) ▼	0 0			Refund(s) on Schedule B Totaling \$4500.22 This ch- anges the YTD Total to \$- 4000.18							
s	UBTOTAL of Receipts This Page (optional)			►	0.00							
Т	OTAL This Period (last page this line number or	ıly)		•								

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)				FOR LINE NUMBER: PAGE 25 / 395 (check only one)					
IT	EMIZED RECEIPTS		or each category	of the	(cn	_	<u> </u>) 11b		11c [12	
			Detailed Summar	ry Page	Ĥ	13		14	\vdash	15	-1^{12}	□ 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	for solici	the pur	pose	of sol	licitir m sı	ng contr	ribution	s			
	NAME OF COMMITTEE (In Full)											
\geq	New York Life Insurance Company Polit	ical Action	Committee									
Α.	Full Name (Last, First, Middle Initial) Mr. Jerry Sullivan				Date of Receipt							
	Mailing Address 204 Paseo Arboles					^M 1 2		^D 3	1		200	
	City	State	Zip Code		-	Transa						
	Fairfield	CA	94534-1514		-	Amour	nt of E	ach I	Rece	eipt this	Period	
	FEC ID number of contributing federal political committee.	С								 	0.	00
	Name of Employer New York Life Insurance Company	Occupation Agent	ſ									
	Receipt For:		Year-to-Date 🔻		1 n	мемс		M				
	Primary General Other (specify)	0 0	-2	2965.48	F	lefund otaling nges t 965.4	(s) o g \$31 the Y	n So 132.	cheo 16 1 Tota	dule B This ch al to \$-	ן-	
в.	Full Name (Last, First, Middle Initial) Mr. Leon Tacher					Date of		eipt				
	Mailing Address 3155 Avenue W					^M 1 2	/	D 1	D 2	Y	^Y 2 0 0	
	City	State	Zip Code		· -	Transa	ction	ID:	322	7797		
	Brooklyn	NY	11229-5962			Amour	nt of E	ach I	Rece	eipt this	Period	l
	FEC ID number of contributing federal political committee.	C									0.	00
	Name of Employer New York Life Insurance Company	Occupation Agent	ı									
	Receipt For:	Aggregate	Year-to-Date 🔻		1 n	мемс) ITE	EM1				
	Primary General Other (specify) v	0 0		-470.00	F T	efund otaling ges th	(s) o g \$68 ie YT	n So 30.00 D To	chec 0 Th otal	dule B nis cha to \$-4	a- 	
с.	Full Name (Last, First, Middle Initial) Mr. Anthony J. Taylor					Date of	f Rece	eipt				
	Mailing Address 4672 Country Club Drive	9				^м 1 2	1	3		Y	y y 200	
	City	State	Zip Code		1 •	Transa	ction	ID:	322	7798		
	Highland	UT	84003-9593			Amour	nt of E	ach I	Rece	eipt this	Period	
	FEC ID number of contributing federal political committee.	C									0.	00
	Name of Employer Occupat New York Life Insurance Agent		ו									
	Receipt For:	Aggregate	Year-to-Date 🔻		1 п	мемс) ITE	EM1				
	Primary General Other (specify) v	0 0		125.00	F T	efund otaling ges th	(s) o	n Ŝc	chec 0 Tł otal	lule B nis cha to \$12	a- 2-	
s	UBTOTAL of Receipts This Page (optional)										0.0	0
	OTAL This Period (last page this line number or							,				

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 26 / 395
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
٨٣	y information copied from such Reports and Sta	atomonte mo	unot be sold or used by any porce	13 14 15 16 17
	for commercial purposes, other than using the n			
$\overline{\mathbf{N}}$	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
A.	Full Name (Last, First, Middle Initial) Mr. Wyllys Taylor			Date of Receipt
	Mailing Address PO Box 248 Oad			1 2 / D D / Y Y Y Y 1 2 0 0 5
	City	State	Zip Code	Transaction ID: 3227799
	Landrum	SC	29356-0248	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		0.00
	Name of Employer New York Life Insurance Company	Occupation Agent	n	
	Receipt For:	, v	e Year-to-Date V	
	Primary General	-	-576.00	Refund(s) on Schedule B Totaling \$648.00 This cha-
	Other (specify) ▼	0 0		nges the YTD Total to \$-5- 76.00
в.	Full Name (Last, First, Middle Initial) Mr. Jerome A. Timmermann			Date of Receipt
	Mailing Address 64 Windsor Lane			1 2 / D D / Y Y Y Y 3 1 / 2 0 0 5
	City	State	Zip Code	Transaction ID: 3227800
	Breeze		62230-3512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		0.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	Veerte Dete 🖛	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	[MEMO ITEM]
	Other (specify)	0 0	0.00	Refund(s) on Schedule B Totaling \$300.00 This cha- nges the YTD Total to \$0 00
С.	Full Name (Last, First, Middle Initial) Mr. Kenneth Tooke			Date of Receipt
	Mailing Address 3033 Curry Lane			M M / D D / Y Y Y Y 12 31 2005
	City	State	Zip Code	Transaction ID: 3227801
	Carmel	IN	46033-9064	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		0.00
	Name of Employer New York Life Insurance	Occupation	n	1
	Company Receipt For:	Agent	e Year-to-Date ▼	
	Primary General	Ayyreyaid		[MEMO ITEM] Refund(s) on Schedule B
	Other (specify)	0 0	0.00	Totaling \$500.00 This cha- nges the YTD Total to \$0
9	UBTOTAL of Receipts This Page (optional)			0.00
F				
т	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)			FOR LINE NUMBER: PAGE 27 / 395 (check only one)					
IT	EMIZED RECEIPTS		or each category of the	` _ `_	Neck on X 11a	<u>`</u>	1b		11c	☐ 12	,
			Detailed Summary Page	l l	13		4	H	15		
Ar or	Any information copied from such Reports and Statements may not be sold or used by any person f or for commercial purposes, other than using the name and address of any political committee to so							licitii m si	ng con	tributio	ns
	NAME OF COMMITTEE (In Full)										
\rangle	New York Life Insurance Company Polit	ical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. Robert Vest				Date of Receipt						
	Mailing Address 4303 E Cactus Road Apt. 1088			12		D 1		/ Y	2 0 (
	City	State	Zip Code		Transa	ction	ID:	322	27802		
	Phoenix	AZ	85032-7638		Amour	nt of E	ach I	Rec	eipt thi	is Peric	d
	FEC ID number of contributing federal political committee.	C								0	.00
	Name of Employer New York Life Insurance	Occupatior Agent	1								
	Company Receipt For:		Year-to-Date 🔻	-			M1				
	Primary General Other (specify) ▼		-570.00		Refund Totaling	(s) or a \$66	n Šc 60.00	chec 0 Tl otal	dule E his ch to \$-	3 1a- 5-	
в.	Full Name (Last, First, Middle Initial) Mr. Juan Villarreal				70.00 Date o	f Rece	eipt		-		
	Mailing Address 2442 S Oakley Avenue #	#1			1 2	1	D 1	D 2	/ Y	Y Y 200).5
	City	State	Zip Code		Transa	ction	_		7803		
	Chicago	IL	60608-4930		Amour						d
	FEC ID number of contributing federal political committee.	C								0	.00
	Name of Employer New York Life Insurance Co.	Occupatior Agent	1								
	Receipt For:	Aggregate	Year-to-Date 🔻) ITE	M1				
	Other (specify)	0 0	-268.77		Refund Totaling nges th	(s) or g <u>\$26</u> ie YT	n Sc 8.7 D Te	cheo 7 Ti otal	dule E his ch to \$-	} 1a- 2-	
	Full Name (Last, First, Middle Initial) Ms. Michelle T. Wang				00.77 Date o	f Rece	aint				
	Mailing Address 11945 Long Leaf Lane				1 2		D	D 2	/ Y	y y 20(
	City	State	Zip Code		Transa	L L	_		7804		
	Houston	ТХ	77024-7105		Amour						d
	FEC ID number of contributing federal political committee.	C								0	.00
	Name of Employer Occupatio New York Life Insurance Agent		1								
Company		Year-to-Date V				мт					
	Primary General Other (specify) v	0 0	-458.15		Refund Totaling nges th 58.15			cheo 7 TI otal	dule E his ch to \$-	3 1a- 4-	
s	UBTOTAL of Receipts This Page (optional)			•						0	.00
	OTAL This Period (last page this line number or			<u>,</u> ▶							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 395 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscillations oscillations from such committee.
NAME OF COMMITTEE (In Full) New York Life Insurance Company Poli	tical Action	Committee	
Full Name (Last, First, Middle Initial) A. Mr. David Weber			Date of Receipt
Mailing Address 6 Getzel Berger Bouleva Unit 201	ard		12 / 12 / Y Y Y Y 12 / 12 / 2005
City	State	Zip Code	Transaction ID: 3227805
Monroe	NY	10950-6315	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		0.00
Name of Employer New York Life Insurance Company	Occupation Agent	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ -416.16	[MEMO ITEM] Refund(s) on Schedule B Totaling \$468.18 This cha- nges the YTD Total to \$-4- 16.16
Full Name (Last, First, Middle Initial) B. Ms. Ying Wei			Date of Receipt
Mailing Address 171 Lawn Lane			M M / D D / Y Y Y Y 12 12 2005
City	State	Zip Code	Transaction ID: 3227806
Upper Brookville	NY	11771-2805	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		0.00
Name of Employer New York Life Insurance Company	Occupation Agent	n	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	[MEMO ITEM] Refund(c) on Schedule B
Other (specify)	0 0	-125.00	Refund(s) on Schedule B Totaling \$275.00 This cha- nges the YTD Total to \$-1- 25.00
Full Name (Last, First, Middle Initial) C. Mr. William E. Weimer			Date of Receipt
Mailing Address 1122 Bentwater Drive			M M / D D / Y Y Y Y 12 12 2005
City	State	Zip Code	Transaction ID: 3227807
Montgomery	TX	77356-8295	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		0.00
Name of Employer New York Life Insurance Company	Occupation Agent	n	
Receipt For:	Aggregate	e Year-to-Date 🔻	[MEMO ITEM]
Other (specify) ▼	0 0	-250.07	Refund(s) on Schedule B Totaling \$312.59 This cha- nges the YTD Total to \$-2- 50.07
SUBTOTAL of Receipts This Page (optional)		······	0.00

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3X) Rev. 02/2003

▶

<u> </u>		1		FOR LINE NUMBER: PAGE 29 / 395					
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12					
			Solation Summary Lago	13 14 15 16 17					
	y information copied from such Reports and Stat for commercial purposes, other than using the na								
	NAME OF COMMITTEE (In Full)								
\rangle	New York Life Insurance Company Polit	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Steven G. Weinkle			Date of Receipt					
	Mailing Address 1657 Passion Vine Circle	9		1 2 / D D / Y Y Y Y 1 2 0 0 5					
	City	State	Zip Code	Transaction ID: 3227808					
	Weston	FL	33327-3661	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	1						
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary General	1	-390.00	Refund(s) on Schedule B					
	Other (specify)	0 0		Totaling \$480.00 This cha- nges the YTD Total to \$-3- 90.00					
в.				Date of Receipt					
	Mailing Address 3630 Arrow Avenue			12 ^M 12 ^J 12 ^J 2005					
	City	State	Zip Code	Transaction ID: 3227809					
	Bismarck	ND	58504-9643	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance	Occupation	ı						
	<u>Co.</u>	Agent	Veerste Dete 🗮	_					
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	[MEMO ITEM]					
	Other (specify)	0 0	-355.47	Refund(s) on Schedule B Totaling \$355.47 This cha- nges the YTD Total to \$-3- 55 47					
_	Full Name (Last, First, Middle Initial)			55.47					
C.	Ms. Fern D. Weizner			Date of Receipt					
	Mailing Address 27 Gatto Lane			12 31 Y Y Y Y 12 31 2005					
	City	State	Zip Code	Transaction ID: 3227810					
	Pearl River	NY	10965-1002	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		0.00					
	Name of Employer New York Life Insurance	Occupation		1					
	New York Life Insurance Senior Ad Company Aggregate		dministrative Field Specialist	_					
			e Year-to-Date 🔻						
	Other (specify) ▼	0.0	-471.81	Refund(s) on Schedule B Totaling \$543.96 This cha- nges the YTD Total to \$-4- 71.81					
s	UBTOTAL of Receipts This Page (optional)			0.00					
Ľ			••••••						
т	OTAL This Period (last page this line number or	ıly)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 395 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full)			solicit contributions from such committee.
\rangle	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Sharon Welch-Blair			Date of Receipt
	Mailing Address 2120 S Louisana Street			1 1 1 0 Y Y Y Y 1 1 1 1 0 2 0 0 5
	City	State	Zip Code	Transaction ID: 325509
	Little Rock	AR	72206-1522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer New York Life Insurance	Occupatio	n	
	Company Receipt For:	Agent	e Year-to-Date ▼	_
	Primary General	riggrogaio		1
	Other (specify)	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) Mr. Dale Lazzarone			Date of Receipt
	Mailing Address 4165 Caughlin Parkway			M M / D D / Y Y Y Y
	City	Ctoto	Zin Codo	11 18 2005
	City Reno	State NV	Zip Code 89509-0601	Transaction ID: 326922 Amount of Each Receipt this Period
	FEC ID number of contributing		09309-0001	
	federal political committee.	C		
	Name of Employer New York Life Insurance	Occupatio	n	
	Company Receipt For:	Agent	e Year-to-Date 🔻	-
	Primary General	, iggi oguit		1
	Other (specify)	0 0	374.98	
с.	Full Name (Last, First, Middle Initial) Ms. Pat Nowak			Date of Receipt
0.	Mailing Address 98 Logwood Street			
	City	State	Zip Code	Transaction ID: PR100274
	South Burlington	VT	05403-6444	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		156.00
	Name of Employer New York Life Insurance	Occupatio	n	7
	Company Receipt For:	Agent	e Year-to-Date ▼	_
	Primary General	Ayyreyale		P/R Deduction (\$26.00 Mon-
	Other (specify)	0 0	312.00	thly)
s	UBTOTAL of Receipts This Page (optional)		······	656.00
т	OTAL This Period (last page this line number or	וy)		-

ITE	MIZED RECEIPTS	DULE A (FEC Form 3X) Use separate schedule(s) or each category of the		(check only one)
			Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
Any i or for	nformation copied from such Reports and Sta commercial purposes, other than using the n	atements may	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions
<u> </u>	AME OF COMMITTEE (In Full)			
N	ew York Life Insurance Company Polit	tical Action	Committee	
-	Ill Name (Last, First, Middle Initial) r. Mel M. Adams			Date of Receipt
М	ailing Address 11333 Warbonnet			M M / D D / Y Y Y Y
C	•	State	Zip Code	Transaction ID: PR1005274
E	l Paso	TX	79936-2312	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		186.00
N	ame of Employer ew York Life Insurance	Occupation Agent	1	
	ompany eceipt For:		Year-to-Date 🔻	
	Primary General Other (specify) v		372.00	P/R Deduction (\$31.00 Mon- thly)
	Ill Name (Last, First, Middle Initial) r. Archie L. Maybank			Date of Receipt
	ailing Address 235 W 139th Street			M M / D D / Y Y Y Y
C	ty	State	Zip Code	Transaction ID: PR1011274
N	ew York	NY	10030-2104	Amount of Each Receipt this Period
FI fe	EC ID number of contributing deral political committee.	C		165.00
	ame of Employer ew York Life Insurance	Occupation Agent	1	
	ompany eceipt For:	, v	Year-to-Date V	_
	Primary General Other (specify) ▼	U U	315.00	P/R Deduction (\$30.00 Mon- thly)
	III Name (Last, First, Middle Initial) r. C. Ernie Nivens			Date of Receipt
М	ailing Address 3320 Randolph Park Cr			M M / D D / Y Y Y Y
C	ty	State	Zip Code	Transaction ID: PR1013274
<u>G</u>	astonia	NC	28056-6675	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		328.02
N	ame of Employer ew York Life Insurance	Occupation	ו	
<u>C</u>	ompany eceipt For:	Agent	Year-to-Date V	
	Primary General	Aggregate		P/R Deduction (\$83.34 Mon-
	Other (specify)	0 0	484.02	thly)
SUE	TOTAL of Receipts This Page (optional)		·····	679.02
	AL This Period (last page this line number or			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 32 / 395 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
•				
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full)			
\geq	New York Life Insurance Company Polit	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas H. Herlong, Sr.			Date of Receipt
	Mailing Address 65 Bouknight Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1014274
	Johnston	SC	29832-2505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.02
	Name of Employer New York Life Insurance Company	Occupation Agent	1	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼		416.04	P/R Deduction (\$34.67 Mon- thly)
— B.	Full Name (Last, First, Middle Initial) Mr. John A. Thompson, Jr.			Date of Receipt
	Mailing Address PO Box 46			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1020274
	Liberty Hill	SC	29074-0046	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		180.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Veerte Dete 🖛	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D Deduction (#20.00 Man
	Other (specify)	0 0	360.00	P/R Deduction (\$30.00 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Mr. Hoyt L. Holt, Jr.			Date of Receipt
	Mailing Address 321 Davis Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1027274
	Richmond Hill	GA	31324-5407	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation		7
	Company Receipt For:	Managing	g Partner • Year-to-Date ▼	_
	Primary General	Aggregate		D/D Deduction (\$10.00 Pi
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		•••••	518.02
Т	OTAL This Period (last page this line number or	nly)		

SI	CHEDULE A (FEC Form 3X)	[FOR LINE NUMBER: PAGE 33 / 395
			Use separate schedule(s) or each category of the	(check only one)
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso Iress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	New York Life Insurance Company Polit	ical Action	Committee	
\angle				
Α.	Full Name (Last, First, Middle Initial) Mr. Jason L. Hooz			Date of Receipt
	Mailing Address 4235 Bain Avenue			M M / D D / Y Y Y Y
		<u> </u>		
	City Santa Cruz	State CA	Zip Code	Transaction ID: PR10274
			95062-4536	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	1	-
	Company	Agent		
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify)		312.00	P/R Deduction (\$26.00 Mon- thly)
		0 0	0 0 0 0 0 0 0	
в.	Full Name (Last, First, Middle Initial) Mr. Tom Flournoy, Jr.			Date of Receipt
	Mailing Address 2014 Carlyle Place			
	5300 Zebulon Road			
	City	State	Zip Code	Transaction ID: PR1036274
	Macon	GA	31210-2199	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		156.00
	Name of Employer New York Life Insurance	Occupatior Agent	1	
	Company Receipt For:	, v	Year-to-Date 🔻	_
	Primary General		312.00	P/R Deduction (\$26.00 Mon-
	Other (specify) v	0 0	512.00	thly)
	Full Name (Last, First, Middle Initial) Mr. Billy Joe Watson			Date of Receipt
0.	Mailing Address 3435 Indian Lake Trail			
	City	State	Zip Code	Transaction ID: PR1037274
	Pelham	AL	35124-2718	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupation	1	1
	Company	Agent		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		600.00	P/R Deduction (\$50.00 Mon- thly)
_			<u> </u>	
s	UBTOTAL of Receipts This Page (optional)		·····	612.00
T T	OTAL This Period (last page this line number or	וע)	· · · · · · · · · · · · · · · · · · ·	
1.		···,, · · · · · · · · · · · · · · · · ·	······	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 34 / 395
	• • •		Use separate schedule(s) or each category of the	(check only one)
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Mary H. Anderson			Date of Receipt
	Mailing Address 2505 Country Club Roa	d		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1047274
	Winston-Salem	NC	27104-4105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance Company	Occupation Senior G	n .O. Agency Standards Cons	ultan
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General		260.00	P/R Deduction (\$10.00 Bi-
	Other (specify) v	0 0		Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Jerry L. Spivey			Date of Receipt
	Mailing Address 1307 Fairway Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1048274
	Elberton	GA	30635-2611	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupation	า	-
	Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	528.00	P/R Deduction (\$50.00 Mon- thly)
	Full Name (Last, First, Middle Initial) Mr. Warren Budd, Jr.			Date of Receipt
•	Mailing Address PO Box 1723			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1050274
	Newnan	GA	30264-1723	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	Name of Employer New York Life Insurance	Occupation	า	
	Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	480.00	P/R Deduction (\$40.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	670.00
\vdash				-
L	OTAL This Period (last page this line number o	nly)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 35 / 395
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
••	EMIZED RECEIPTS		Detailed Summary Page	
A	An information conied from such Departs and Ch			13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas H. Smoot, II			Date of Receipt
	Mailing Address 102 Park Avenue PO Box 21755			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1052274
	St. Simons Island	GA	31522-0855	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		499.98
	Name of Employer New York Life Insurance	Occupation Agent	n	
	Company Receipt For:	, v	e Year-to-Date 🔻	
	Primary General		000.00	P/R Deduction (\$83.33 Mon-
	Other (specify)	0 0	999.96	thly)
В.	Full Name (Last, First, Middle Initial) Mr. Dean H. Grant			Date of Receipt
	Mailing Address 3669 Sussex Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1058274
	Milledgeville	GA	31061-9382	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	n	-
	Company	Agent		
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Primary General Other (specify) Image: Control of the second	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Kevin S. Odell			Date of Receipt
	Mailing Address 114 Perkins Mill Lane PO Box 889			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1064274
	Claxton	GA	30417-0889	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	Veer to Deta	_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	500.00	P/R Deduction (\$500.00 Mo- nthly)
s	UBTOTAL of Receipts This Page (optional)			1155.98
	OTAL This Period (last page this line number or			-

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 36 / 395						
· · · ·			Use separate schedule(s) or each category of the	(check only one)						
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 17						
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	v not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)		-							
\square	New York Life Insurance Company Polit	ical Action	Committee							
A.	Full Name (Last, First, Middle Initial) Mr. Mark Sigmund			Date of Receipt						
	Mailing Address 6697 Woodberry Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1066274						
	Columbus	GA	31904-2296	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		156.00						
	Name of Employer New York Life Insurance	Occupation	ı							
	Company	Agent	<u> </u>	_						
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼							
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)						
в.	Full Name (Last, First, Middle Initial) Mr. Kermit R. Griner			Date of Receipt						
	Mailing Address 305 Crestfield Drive			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1068274						
	Columbus	GA	31904-2325	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		240.00						
	Name of Employer New York Life Insurance Company	Occupation Agent	ı	-						
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	480.00	P/R Deduction (\$40.00 Mon- thly)						
 C.	Full Name (Last, First, Middle Initial) Mr. Ted Champaneria			Date of Receipt						
	Mailing Address 1612 Magnolia Drive			M M / D D / Y Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1070274						
	Murfreesboro	TN	37129-5907	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		156.00						
	Name of Employer New York Life Insurance	Occupation Agent	1	1						
	Company		Year-to-Date 🔻							
	Primary General Other (specify) ▼		312.00	P/R Deduction (\$26.00 Mon- thly)						
6	UBTOTAL of Receipts This Page (optional)			552.00						
Т	OTAL This Period (last page this line number or	ıly)								
SCHEDIII E A (EEC Form 2V)		[FOR LINE NUMBER: PAGE 37 / 395						
----------------------------	---------------------------------------------------------------------------------------------------	----------------------------	---------------------------------------------------------------------------	-------------------------------------------------------------------------------------------	--	--	--	--	--	--
SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	(check only one)						
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 1						
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and ado	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.						
Ν	NAME OF COMMITTEE (In Full)									
	New York Life Insurance Company Polit	ical Action	Committee	_						
A.	Full Name (Last, First, Middle Initial) Mr. Kent E. Moss			Date of Receipt						
	Mailing Address 11409 Paldao Road			M · M / D · D / Y · Y · Y						
	City	State	Zip Code	Transaction ID: PR1078274						
	Tampa	FL	33618-3923	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		700.00						
	Name of Employer New York Life Insurance	Occupation Agent	1							
	Company Receipt For:	U U	Year-to-Date 🔻							
	Primary General		1000.00	P/R Deduction (\$83.34 Mon-						
	Other (specify)	0 0	1000.00	thly)						
в.	Full Name (Last, First, Middle Initial) Mr. Jay A. Ginn, III			Date of Receipt						
	Mailing Address 401 Prince Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1082274						
	St. Augustine	FL	32086-4906	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		168.00						
	Name of Employer New York Life Insurance	Occupation	1							
	Company	Agent								
	Receipt For:	Aggregate	Year-to-Date 🔻	_						
	Other (specify) ▼	0 0	336.00	P/R Deduction (\$28.00 Mon- thly)						
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. Reggie Sedita			Date of Receipt						
-	Mailing Address 5155 Isla Key Boulevard #402	l		M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1086274						
	St. Petersburg	FL	33715-1689	Amount of Each Receipt this Period						
				150.00						
			1	-1						
			Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)						
s	UBTOTAL of Receipts This Page (optional)		······	1018.00						
\vdash	OTAL This Period (last page this line number or			-						
Ľ		,,	······································							

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	tements may	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 395 (check only one)						
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Polit	tical Action	Committee							
<u>/</u> А.	Full Name (Last, First, Middle Initial) Mr. Salwyn M. Parker			Date of Receipt						
	Mailing Address 505 Woodbine Lane		M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1092274						
	<u>El Paso</u>	ТХ	79912-1352	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		325.00						
	Name of Employer New York Life Insurance	Occupatio								
	Company Receipt For:		ency Standards Consultant e Year-to-Date ▼	_						
	Primary General Other (specify) ▼		425.00	P/R Deduction (\$25.00 Bi- Weekly)						
в.	Full Name (Last, First, Middle Initial) Mr. Frank B. Dolph, III			Date of Receipt						
	Mailing Address 631 Intracoastal Drive			M M / D D / Y Y Y Y						
	City S Fort Lauderdale I FEC ID number of contributing federal political committee.		Zip Code	Transaction ID: PR1098274						
			33304-3618	Amount of Each Receipt this Period						
				390.00						
	Name of Employer New York Life Insurance	Occupatio	n							
	Company Receipt For:	Agent	e Year-to-Date V	_						
	Primary General Other (specify) ▼		690.00	P/R Deduction (\$80.00 Mon- thly)						
<u></u>	Full Name (Last, First, Middle Initial) Mr. Mark Bailey			Date of Receipt						
	Mailing Address 309 Redwing Lane			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1106274						
	St. Augustine	FL	32084-7981	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		150.00						
	Name of Employer Occu New York Life Insurance		n							
Company Agen Receipt For: Agree			e Year-to-Date 🔻	-						
	Primary General Other (specify) ▼	300.00	P/R Deduction (\$25.00 Mon- thly)							
s	UBTOTAL of Receipts This Page (optional)		·····•	865.00						
Т	TOTAL This Period (last page this line number only)									

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 395 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17						
	ny information copied from such Reports and Sta for commercial purposes, other than using the n									
	NAME OF COMMITTEE (In Full)									
\rangle	New York Life Insurance Company Polit	tical Action	n Committee							
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas G. Krach			Date of Receipt						
	Mailing Address 20670 Westminster Driv	M " M / D " D / Y " Y " Y " Y								
	City	State	Zip Code	Transaction ID: PR1111274						
	Strongsville OH		44149-6773	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		130.00						
	Name of Employer New York Life Insurance	Occupatio	n							
	Company	Senior P		_						
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻							
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)						
	Full Name (Last, First, Middle Initial) Ms. Janice M. Snyder			Date of Respiret						
ь.	Mailing Address 03369 County Rd. M			Date of Receipt						
	City	State	Zip Code	Transaction ID: PR1112274						
	EdonOHFEC ID number of contributing federal political committee.C		43518-9543	Amount of Each Receipt this Period						
				100.02						
	Name of Employer New York Life Insurance	Occupatio	n							
	Company	Agent	Versite Dete 🖛							
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	P/P Deduction (\$16.67 Man						
	Other (specify)	0 0	200.04	P/R Deduction (\$16.67 Mon- thly)						
с.	Full Name (Last, First, Middle Initial) Mr. William F. Lyon			Date of Receipt						
	Mailing Address 3809 Arbor Lane			M · M / D · D / Y · Y · Y · Y						
	City	State	Zip Code	Transaction ID: PR1114274						
	Cincinnati	OH	45255-5628	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.02						
	Name of Employer New York Life Insurance	Occupatio	n							
	Company	Agent	Veer to Dete	_						
Receipt For: Agg			e Year-to-Date 🔻	P/R Deduction (\$41.67 Mon-						
	Other (specify)	thly)								
s	UBTOTAL of Receipts This Page (optional)			480.04						
Т	TOTAL This Period (last page this line number only)									

6	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 40 / 395						
1 <i>j</i>			Use separate schedule(s) or each category of the	(check only one)						
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
			, ,	13 14 15 16 1						
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions						
$\overline{}$	NAME OF COMMITTEE (In Full)									
	New York Life Insurance Company Polit	ical Action	Committee							
۲ <u>ـــــــ</u>	Full Name (Last, First, Middle Initial) Mr. Mark I. Burton			Date of Receipt						
	Mailing Address 22781 Foxridge			M M / D D / Y Y Y						
	City	State	Zip Code	Transaction ID: PR1117274						
	Mission Viejo	CA	92692-4703	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		281.28						
	Name of Employer New York Life Insurance	Occupation	1	-						
	Company Receipt For:	Agent	Year-to-Date V	_						
	Primary General	Ayyreyale		D/D Deduction (\$92.24 Man						
	Other (specify)	0 0	343.80	P/R Deduction (\$83.34 Mon- thly)						
в.	Full Name (Last, First, Middle Initial) Mr. David R. Colflesh			Date of Receipt						
	Mailing Address 905 Olive PO Box 37			M M / D D / Y Y Y Y						
	City		Zip Code	Transaction ID: PR1118274						
	Tarkio	MO	64491-0037	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		249.96						
	Name of Employer New York Life Insurance	Occupation Agent	1							
	Company Receipt For:	<u> </u>	Year-to-Date V	_						
	Primary General	33 - 3		P/R Deduction (\$41.66 Mon-						
	Other (specify)	0 0	499.92	thly)						
С.	Full Name (Last, First, Middle Initial) Mr. Wayne E. Bragg			Date of Receipt						
	Mailing Address 5433 Senford Avenue			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1125274						
	Los Angeles	CA	90056-1028	Amount of Each Receipt this Period						
				975.00						
			1							
			Year-to-Date V	_						
	Other (specify)	0 0	1950.00	P/R Deduction (\$75.00 Bi- Weekly)						
s	UBTOTAL of Receipts This Page (optional)		······	1506.24						
\vdash	OTAL This Period (last page this line number or			-						
1'		······	·····							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 395 (check only one) X X 11a 11b 11c 12					
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		tements may	y not be sold or used by any perso	13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee					
	NAME OF COMMITTEE (In Full)								
\rangle	New York Life Insurance Company Polit	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Ms. Pamela A. Walton			Date of Receipt					
	Mailing Address 1907 Eagle Meadow			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1126274					
	San Antonio	ТХ	78248-1307	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	n						
	Company Receipt For:	Agent	e Year-to-Date V	_					
	Primary General Other (specify) ▼		312.00	P/R Deduction (\$26.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Timothy I. Miller			Date of Receipt					
	Mailing Address 285 Main Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR11274					
	Dunstable	MA	01827-1911	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of Employer New York Life Insurance	Occupation		-					
	Company Receipt For:		e Year-to-Date V	-					
	Primary General Other (specify) ▼		650.00	P/R Deduction (\$25.00 Bi- Weekly)					
<u></u>	Full Name (Last, First, Middle Initial) Ms. Kim D. King			Date of Receipt					
•	Mailing Address 8037 Lea Court								
	City	State	Zip Code	Transaction ID: PR1128274					
	Holland	OH	43528-8042	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		360.00					
	Name of Employer New York Life Insurance CompanyOccupati AgentReceipt For:Aggrega		n	7					
			e Year-to-Date 🔻	_					
Primary General Other (specify) ▼			660.00	P/R Deduction (\$80.00 Mon- thly)					
	UBTOTAL of Receipts This Page (optional)			841.00					
F	UDIVIAL OF THE CEIPLS THIS Page (optional)								
т	OTAL This Period (last page this line number or	ıly)							

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 42/395 (check only one)							
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12							
				13 14 15 16 17							
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
\sum	NAME OF COMMITTEE (In Full)										
\backslash	New York Life Insurance Company Poli	tical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. J. Peter Lyons			Date of Receipt							
	Mailing Address 54 Cranmore Road			M M / D D / Y Y Y Y							
	City State		Zip Code	Transaction ID: PR113274							
	Wellesley	MA	02181-1330	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		500.10							
	Name of Employer New York Life Insurance	Occupation	ı								
	Company Receipt For:	Agent	e Year-to-Date ▼	_							
	Primary General	Aggregate		P/R Deduction (\$83.35 Mon-							
	Other (specify)	0 0	1000.20	thly)							
в.	Full Name (Last, First, Middle Initial) Mr. Larry E. Beebe			Date of Receipt							
	Mailing Address 3209 Stone Wall Road			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1134274							
	Maumee	OH	43537-9593	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		200.01							
	Name of Employer New York Life Insurance	Occupation	1								
	Company Receipt For:	Agent	e Year-to-Date ▼	_							
	Primary General	riggrogate		P/R Deduction (\$41.67 Mon-							
	Other (specify)	0 0	350.01	thly)							
с.	Full Name (Last, First, Middle Initial) Mr. Bill Hensel			Date of Receipt							
	Mailing Address PO Box 132			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1139274							
	Strasburg	OH	44680-0132	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		420.00							
	Name of Employer New York Life Insurance	Occupation	1								
	Company	Agent									
	Receipt For:		Year-to-Date ▼								
Primary General Other (specify) ▼			720.00	P/R Deduction (\$80.00 Mon- thly)							
s	LUBTOTAL of Receipts This Page (optional)			1120.11							
F			•								
Т	OTAL This Period (last page this line number of	nly)									

SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 43 / 395 (check only one)							
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12							
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	ress of any political committee to	o solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)										
\geq	New York Life Insurance Company Polit	tical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. Scott Wilcox			Date of Receipt							
	Mailing Address 11609 Kings Circle			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1141274							
	Oklahoma City	OK	73162-2048	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		290.00							
	Name of Employer New York Life Insurance	Occupation Agent	1								
	Company Receipt For:		Year-to-Date 🔻								
	Primary General			P/R Deduction (\$55.00 Mon-							
	Other (specify)	0 0	560.00	thly)							
в.	Full Name (Last, First, Middle Initial) Mr. William H. Werfelman, Jr.			Date of Receipt							
	Mailing Address 195 Gallows Hill Road			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR114274							
	Redding CT		06896-1423	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		130.00							
	Name of Employer New York Life Insurance	Occupation									
	Company Receipt For:		President Year-to-Date ▼	_							
	Primary General	riggi egaie		P/R Deduction (\$10.00 Bi-							
	Other (specify)	0 0	202.91	Weekly)							
с.	Full Name (Last, First, Middle Initial) Mr. Jeff King			Date of Receipt							
	Mailing Address 8037 Lea Court			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1143274							
	Holland	OH	43528-8042	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		300.00							
	Name of Employer C New York Life Insurance		1								
	Company	Agent	<u> </u>	_							
	Receipt For: Aggre		Year-to-Date ▼	D/D Darkertian (#50.00 Mar							
	Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)							
s	UBTOTAL of Receipts This Page (optional)			720.00							
	OTAL This Period (last page this line number or			-							

SCHEDULE A (FEC Form 3X)			Llos concrete activita/a)	FOR LINE NUMBER: PAGE 44/395						
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)						
			Detailed Summary Page	X 11a 11b 11c 12						
٨٣	y information copied from such Reports and Sta	atomonto mo	unot be cold or used by any perce	13 14 15 16 17						
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)									
\geq	New York Life Insurance Company Poli	tical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Mr. Michael A. Rudolph			Date of Receipt						
	Mailing Address 200 Morgan Circle			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1144274						
	Oxford	OH	45056-9403	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		120.00						
	Name of Employer New York Life Insurance	Occupation Agent	1							
	Company Receipt For:	-	Year-to-Date 🔻	-						
	Primary General		010.00	P/R Deduction (\$25.00 Mon-						
	Other (specify) v	0 0	210.00	thly)						
В.	Full Name (Last, First, Middle Initial) Mr. James R. Vavra			_ Date of Receipt						
	Mailing Address 461 Northwest Riven Ro	ock Place		M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1154274						
	Lees Summit		64081-2092	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		195.00						
	Name of Employer New York Life Insurance	Occupation	า							
	Company	Vice Pres								
	Receipt For:	Aggregate	Year-to-Date ▼	_						
	Primary General Other (specify) ♥		390.00	P/R Deduction (\$15.00 Bi- Weekly)						
<u></u> с.	Full Name (Last, First, Middle Initial) Mr. Michael C. Quilter			Date of Receipt						
	Mailing Address PO Box 443			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1155274						
	London	OH	43140-0443	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		150.00						
	Name of Employer New York Life Insurance	Occupation	า							
	Company	Agent								
	Receipt For:		e Year-to-Date 🔻	_						
Primary General Other (specify) ▼			300.00	P/R Deduction (\$50.00 Mon- thly)						
s	LUBTOTAL of Receipts This Page (optional)			465.00						
F										
Т	OTAL This Period (last page this line number o	nly)								

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 45 / 395										
			Use separate schedule(s) or each category of the	(check only one)										
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12										
•				13 14 15 16 17										
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	r not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.										
	NAME OF COMMITTEE (In Full)													
	New York Life Insurance Company Politi	ical Action	Committee											
Α.	Full Name (Last, First, Middle Initial) Mr. Tom Staebler			Date of Receipt										
	Mailing Address 7303 Red Bank Road			M M / D D / Y Y Y Y										
	City	State	Zip Code	Transaction ID: PR1165274										
	Westerville	OH	43082-8241	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		210.00										
	Name of Employer New York Life Insurance	Occupation	1											
	Company	Agent		_										
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼	0 0	420.00	P/R Deduction (\$35.00 Mon- thly)										
в.	Full Name (Last, First, Middle Initial) Ms. Barbara F. Hinebaugh			Date of Receipt										
	Mailing Address 3201 Westmont Place	M M / D D / Y Y Y Y												
	City	State	Zip Code	Transaction ID: PR1175274										
	the Villages	FL	32162-7640	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		300.00										
	Name of Employer New York Life Insurance	Occupation	1	7										
	Company Receipt For:	Agent	Year-to-Date V	-										
	Primary General	7 (99) 094(0		P/R Deduction (\$50.00 Mon-										
	Other (specify)	0 0	600.00	thly)										
с.	Full Name (Last, First, Middle Initial) Mr. Dave Baker			Date of Receipt										
	Mailing Address 31686 Lake Road			M M / D D / Y Y Y Y										
	City	State	Zip Code	Transaction ID: PR1176274										
	Bay Village	OH	44140-1027	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C		844.00										
	Name of Employer New York Life Insurance	Occupation	1	1										
	Company Receipt For:	Agent	Year-to-Date V											
	Primary General	Ayyreyale		P/R Deduction (\$83.34 Mon-										
	Other (specify)	0 0	1000.00	thly)										
s	UBTOTAL of Receipts This Page (optional)		·····	1354.00										
\vdash	OTAL This Period (last page this line number on													

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 46/395							
		Use separate schedule(s) or each category of the		(check only one)							
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12							
				13 14 15 16 17							
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	rot be sold or used by any person	on for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full)			Solicit contributions from such committee.							
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committoo								
	New Tork Life insurance Company Foli	lical Action	Commutee								
<u> </u>	Full Name (Last, First, Middle Initial)										
Α.	Mr. Steven D. Meier			Date of Receipt							
	Mailing Address 4575 Lanercost Way			M M / D D / Y Y Y							
	City	State	Zip Code	Transaction ID: PR1180274							
	Columbus	OH	43220-2916	Amount of Each Receipt this Period							
	FEC ID number of contributing										
	federal political committee.	C		250.02							
	Name of Employer	Occupatio	n	-							
	New York Life Insurance Company	Agent									
	Receipt For:	Aggregate	e Year-to-Date 🔻	_							
	Other (specify)		500.04	P/R Deduction (\$41.67 Mon- thly)							
		0.0	0 0 0 0 0 0 0	(()))							
_	Full Name (Last, First, Middle Initial)										
в.	Mr. Andrew N. Reiss			Date of Receipt							
	Mailing Address 1288 Bridle Estates Driv	/e		M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR118274							
	Yardley		19067-3961	Amount of Each Receipt this Period							
	FEC ID number of contributing			209.95							
	federal political committee.	С		209.93							
	Name of Employer	Occupatio	n	_							
	Name of Employer New York Life Insurance Company	Vice Pres									
	Receipt For:	Aggregate	e Year-to-Date 🔻								
	Primary General		419.90	P/R Deduction (\$16.15 Bi-							
	Other (specify) 🔻	0 0	419.90	Weekly)							
	Full Name (Last, First, Middle Initial)										
C.	Mr. Joseph B. Sculler			Date of Receipt							
	Mailing Address 17117 Stare Street			M M / D D / Y Y Y Y							
		Ctot-	Zin Codo								
	City Northridge	State CA	Zip Code 91325-1648	Transaction ID: PR1185274							
	•		31323-1040	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		156.00							
	Name of Employer	Occupatio	n	-							
	Name of Employer New York Life Insurance Company	Agent									
	Receipt For:		e Year-to-Date 🔻								
Primary General			312.00	P/R Deduction (\$26.00 Mon-							
	Other (specify)	0 0		thly)							
s	UBTOTAL of Receipts This Page (optional)			615.97							
L 1	OTAL This Period (last page this line number or	····y)	P								

SCHEDULE A (FEC Form 3X)			· · · · · · · · · · · · · · · · · · ·	FOR LINE NUMBER: PAGE 47/395							
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)							
		Detailed Summary Page		X 11a 11b 11c 12							
An	y information copied from such Reports and Sta for commercial purposes, other than using the na	on for the purpose of soliciting contributions osolicit contributions from such committee.									
	NAME OF COMMITTEE (In Full)										
\rangle	New York Life Insurance Company Polit	ical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. Fred Eisner			Date of Receipt							
	Mailing Address 432 E Glengary Circle			M M / D D / Y Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1188274							
	Highland Heights	OH	44143-3623	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		300.00							
	Name of Employer New York Life Insurance	Occupation Agent	1								
	Company Receipt For:	, v	Year-to-Date 🔻								
	Primary General			P/R Deduction (\$50.00 Mon-							
	Other (specify)	0.0	600.00	thly)							
В.	Full Name (Last, First, Middle Initial) Ms. Janet B. Spector			Date of Receipt							
	Mailing Address 802 Lakeglen Drive			M M / D D / Y Y Y Y							
	City		Zip Code	Transaction ID: PR1189274							
	Suwanee	GA	30024-3464	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		156.00							
	Name of Employer New York Life Insurance	Occupation	1								
	Company	Agent									
	Receipt For: Primary General	Aggregate	Year-to-Date V								
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)							
<u></u>	Full Name (Last, First, Middle Initial) Mr. Thomas W. Paul			Date of Receipt							
	Mailing Address 16201 Chancellors Ridg	e Way		M • M / D • D / Y • Y • Y • Y							
	City	State	Zip Code	Transaction ID: PR1190274							
	Noblesville	IN	46062-7138	Amount of Each Receipt this Period							
	Receipt For: Aggregat			130.00							
			g Partner	_							
			Year-to-Date V								
Primary General Other (specify) ▼			260.00	P/R Deduction (\$10.00 Bi- Weekly)							
s	UBTOTAL of Receipts This Page (optional)			586.00							
Ĕ											
Т	TOTAL This Period (last page this line number only)										

SCHEDULE & (EEC Form 2V)				FOF	FOR LINE NUMBER: PAGE 48 / 395								
	CHEDULE A (FEC Form 3X)	Use separate schedule(s) or each category of the			(check only one)								
11	EMIZED RECEIPTS		X	11a	11	» [] 11	c [12				
			Detailed Summary Page		13	14		15	;	16	17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	on for th o solicit	ne purpo contribi	ose of a	solic rom	iting (such	contrib comn	oution: nittee.	3				
$\left \right\rangle$	NAME OF COMMITTEE (In Full)												
\mathbb{Z}	New York Life Insurance Company Polit												
A.	Full Name (Last, First, Middle Initial) Mr. Peter W. Scheid				Date of	Receip	t						
	Mailing Address 3175 Scarborough Road			ММ				YYY		Y			
	City	State	Zip Code	Т	ransac	tion ID): P	R119	91274	1			
	Cleveland Heights	OH	44118-4049		Amount	of Eac	h Re	eceipt	this F	[•] eriod			
	FEC ID number of contributing federal political committee.	C								300.0	00		
	Name of Employer New York Life Insurance	Occupation Agent	n										
	Company Receipt For:		e Year-to-Date 🔻	_									
	Primary General	33 - 3		- _{Р/}	R Ded	uctior	ı (\$	50.0		n-			
	Other (specify) v	0 0	600.00		P/R Deduction (\$50.00 Mon- thly)								
в.	Full Name (Last, First, Middle Initial) Ms. Rene J. Johnson				Date of	Receip	t						
	Mailing Address 2632 Harding Road			[M M / D D / Y Y Y Y								
	City	State	Zip Code	Т	Transaction ID: PR1199274								
	Lafayette	IN	47903-9431	A	Amount	of Eac	h Re	eceipt	this F	Period			
	FEC ID number of contributing federal political committee.	C			150.00						00		
	Name of Employer New York Life Insurance	Occupation Agent	n										
	Company Receipt For:	J	e Year-to-Date 🔻										
	Primary General Other (specify) ▼		300.00		P/R Deduction (\$25.00 Mon- thly)								
<u></u>	Full Name (Last, First, Middle Initial) Mr. Mark Vahala				Date of Receipt								
-	Mailing Address 500 Cedar Elm Court												
	City	State	Zip Code	Π Τ	ransac	tion IE	: P	R120)6274	4			
	Irving	ТХ	75063-8467		Amount								
	FEC ID number of contributing federal political committee.		[1					600.0	00			
	Name of Employer New York Life Insurance	n											
	Company Agent Receipt For: Aggrega		e Year-to-Date V	\neg									
Primary General Other (specify) ▼			1200.00	P/ ntl	P/R Deduction (\$100.00 Mo- nthly)								
s	UBTOTAL of Receipts This Page (optional)								10)50.0	0		
	OTAL This Period (last page this line number or												
L	· · · ·												

S	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 49/395
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)
11			Detailed Summary Page	X 11a 11b 11c 12
•	winformation conied from each Development of the	tomeste	, not be cold as word by some	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	litements may	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\left \right\rangle$	New York Life Insurance Company Polit	tical Action	Committee	
۲ <u>ـــــــ</u>	Full Name (Last, First, Middle Initial) Mr. Daniel M. Nichols			Date of Receipt
	Mailing Address 32 Riverband Road			
	City	State	Zip Code	Transaction ID: PR121274
	Trumbull		06611-3980	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	-
	Company Receipt For:	Agent	e Year-to-Date ▼	
	Primary General	Ayyreyale		P/R Deduction (\$15.00 Mon-
	Other (specify)		360.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. James Kageleiry			Date of Receipt
	Mailing Address 8 Hayes Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR12274
	Dover	NH	03820-4213	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	<u> </u>	
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
С.	Full Name (Last, First, Middle Initial) Mr. David E. Levee			Date of Receipt
	Mailing Address 982 Vernon Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1229274
	Glencoe	IL	60022-1266	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	<u> </u>	_
			e Year-to-Date 🔻	
	Other (specify) ▼	0 0	420.00	P/R Deduction (\$35.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		······	516.00
F				
Т	OTAL This Period (last page this line number or	nly)		

5	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 50 / 395				
			Use separate schedule(s) or each category of the	(check only one)				
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
				13 14 15 16 17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Poli	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Curtis T. Schultz			Date of Receipt				
	Mailing Address 2204 Cherokee			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1252274				
	Valporaiso	IN	46383-2284	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		600.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	U U	Year-to-Date V	_				
	Primary General	33 - 3		P/R Deduction (\$100.00 Mo-				
	Other (specify) v	0 0	1200.00	nthly)				
в.	Full Name (Last, First, Middle Initial) Mr. Joseph H. D. Lee, Sr.			Date of Receipt				
	Mailing Address 16640 Kehrs Grove			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1254274				
	Chesterfield	MO	63005-4539	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation Agent	1	-				
	Company Receipt For:	<u> </u>	Year-to-Date V	_				
	Primary General	7.99.094.0		P/R Deduction (\$25.00 Mon-				
	Other (specify) v	0 0	300.00	thly)				
С.	Full Name (Last, First, Middle Initial) Mr. Harlow C. Johnson			Date of Receipt				
	Mailing Address 1070 Lakeview Way			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1255274				
	Emerald Hills	CA	94062-3446	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		160.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company Age Receipt For: Age							
			Year-to-Date 🔻	_				
	Other (specify)	0 0	310.00	P/R Deduction (\$30.00 Mon- thly)				
s	LUBTOTAL of Receipts This Page (optional)		······	910.00				
\vdash	TOTAL This Period (last page this line number only)							
<u> </u>	(• · · · · · · · · · · · · · · · · · · ·						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 51 / 395 (check only one)					
11	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12					
Δr	y information copied from such Reports and Stat	tements may	not be sold or used by any perso	13 14 15 16 17					
	for commercial purposes, other than using the na								
\mathbb{N}	NAME OF COMMITTEE (In Full)		0 III						
\mathbb{Z}	New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Raman K. Patel			Date of Receipt					
	Mailing Address 3281 Pleasant Run			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1259274					
	Northbrook	IL	60062-7411	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		600.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	Ŭ	Year-to-Date V						
	Primary General		1200.00	P/R Deduction (\$100.00 Mo-					
	Other (specify)	0 0	1200.00	nthly)					
в.	Full Name (Last, First, Middle Initial) Mr. Greg True			Date of Receipt					
	Mailing Address 719 Council Hill			M M / D D / Y Y Y					
	City	State	Zip Code	Transaction ID: PR1263274					
	East Dundee	IL	60118-1008	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	Ŭ	Year-to-Date V						
	Primary General			P/R Deduction (\$26.00 Mon-					
	Other (specify) ▼		312.00	thly)					
с.	Full Name (Last, First, Middle Initial) Mr. Larry D. Massey			Date of Receipt					
	Mailing Address 3761 Mountain Way Cov	/e		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1266274					
	Snellville	GA	30039-8413	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		206.26					
	Name of Employer New York Life Insurance	Occupation	1						
	Company		Year-to-Date V	-1					
				P/R Deduction (\$25.00 Mon-					
	Other (specify) v	0 0	268.78	thly)					
s	UBTOTAL of Receipts This Page (optional)			962.26					
т	TOTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 52 / 395				
	EMIZED RECEIPTS		or each category of the	(check only one)				
••			Detailed Summary Page	X 11a 11b 11c 12				
Δr	y information copied from such Reports and Stat	omente may	y not be sold or used by any perso	13 14 15 16 17				
or	for commercial purposes, other than using the na	ame and add	Iress of any political committee to	solicit contributions from such committee.				
Ν	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Politi	ical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Tom Gavin			Date of Receipt				
	Mailing Address 449 Vista Court			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1268274				
	Benicia	CA	94510-2715	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		510.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent						
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General Other (specify) ▼	0 0	1020.00	P/R Deduction (\$85.00 Mon- thly)				
в.	Full Name (Last, First, Middle Initial) Mr. Jeffrey R. Donoho			Date of Receipt				
	Mailing Address 2901 Caroline PO Box 487			M M / D D / Y Y Y Y				
	City	State	Transaction ID: PR1269274					
	Mount Vernon	IL	62864-0010	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		200.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent	Veerste Dete	_				
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	D/D Deduction (\$200.00 Ma				
	Other (specify)	0 0	500.00	P/R Deduction (\$200.00 Mo- nthly)				
С.	Full Name (Last, First, Middle Initial) Mr. Amrit Mittal			Date of Receipt				
	Mailing Address 215 Rugeley Rdd			M · M / D · D / Y · Y · Y · Y				
	City	State	Zip Code	Transaction ID: PR1279274				
	Western Springs	IL	60558-1954	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		504.00				
	Name of Employer New York Life Insurance	Occupation	1	7				
	Company Receipt For:	Agent	Year-to-Date V					
	Primary General Aggin			P/R Deduction (\$84.00 Mon-				
	Other (specify)	0 0	1008.00	thly)				
s	UBTOTAL of Receipts This Page (optional)		·····	1214.00				
\vdash	OTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 53 / 395					
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)					
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
A	Any information capied from such Departs and Statements m		, not be cold or used by only nores	13 14 15 16 17 a far the surgest of collisiting contributions					
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.								
\sum	NAME OF COMMITTEE (In Full)								
\langle	New York Life Insurance Company Politi	cal Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Ricardo Alfonso			Date of Receipt					
	Mailing Address 11 Kensington Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1283274					
	North Barrin	IL	60010-6960	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		600.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Managing	, ,						
	Receipt For:	Aggregate	Year-to-Date V						
	Other (specify)	0 0	1575.00	P/R Deduction (\$75.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. David Aaron Graff			Date of Receipt					
	Mailing Address 305 Discovery Court	M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1302274					
	Colorado Springs	CO	80919-1213	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		210.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent	<u> </u>	_					
	Receipt For: Primary General	Aggregate	Year-to-Date V						
	Other (specify) v	0 0	420.00	P/R Deduction (\$35.00 Mon- thly)					
с.	Full Name (Last, First, Middle Initial) Mr. Martin B. Johnston			Date of Receipt					
	Mailing Address 55 Copper Creek Circle			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR130274					
	Newtown	CT	06470-2645	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation	1	1					
	Company Receipt For:	Agent	Year-to-Date V	-					
	Primary General			P/D Deduction (\$25.00 Mon					
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)			960.00					
Т	TOTAL This Period (last page this line number only)								

9	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 54 / 395
		Use separate schedule(s) or each category of the		(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committee	
\angle				
^	Full Name (Last, First, Middle Initial) Mr. Steven J. Heussner			Date of Receipt
А.	Mailing Address 2717 Brookside Lane			
	City	State	Zip Code	Transaction ID: PR1307274
	McKinney	TX	75070-4213	Amount of Each Receipt this Period
	FEC ID number of contributing	С		504.00
	federal political committee.			
	Name of Employer New York Life Insurance	Occupation	า	
	Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Other (specify)		1008.00	P/R Deduction (\$84.00 Mon- thly)
		1 1	0 0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial)			
В.	Ms. Deanna S. Leicht			Date of Receipt
	Mailing Address 13000 Bunkerhill Road			M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR1309274
	Pleasant Lake	MI	49227-9666	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		120.00
	Name of Employer	Occupation	n	
	Name of Employer New York Life Insurance Company	Agent	•	
	Receipt For:	, U	Year-to-Date 🔻	_
	Primary General		240.00	P/R Deduction (\$20.00 Mon-
	Other (specify)	0 0	240.00	thly)
	Full Name (Last, First, Middle Initial)			
C.	Mr. Frederick J. Sievert			Date of Receipt
	Mailing Address 260 S Lake Drive			M · M / D · D / Y · Y · Y
		Ctoto	Zin Cada	
	City Stamford	State CT	Zip Code 06903-1028	Transaction ID: PR1312274 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		223.60
	Name of Employer	Occupation		_
	New York Life Insurance			
			Year-to-Date ▼	-1
				P/R Deduction (\$17.20 Bi-
	Other (specify)		447.20	Weekly)
_	IPTOTAL of Dopping This Dags (antians)			847.60
⊢°	UBTOTAL of Receipts This Page (optional)		••••••	
т	OTAL This Period (last page this line number or	nly)		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME CF COMMITTEE (in Full) NAME OF COMMITTEE (in Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mailing Address 1108 Southridge Road City State FEC ID number of contributing federal political committee. Name of Employer Contributing (ederal political committee) Name of Employer Contributing federal political committee. Name of Employer Contributing (ederal political committee) Receipt For: Pull Name (Last, First, Middle Initial) Mailing Address Aggregate Year-to-Date P/R Deduction (\$25.00 Mon-thly) Transaction ID: PR132274 Aggregate Year-to-Date Pill Name (Last, First, Middle Initial) M. Ronald J. LeFrancois Mailing Address 4336 Verplanck Place Northwest City State Zip Code Name of Employer Now of Each Receipt this Period FEC ID number of contributing federal political committee. DC Name of Employer Now of Each Receipt this Period FEC ID number	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 395 (check only one) 11a X 11a 11b 11c 12	
New York Life Insurance Company Political Action Committee A Mail Address 1108 Southridge Road City State Zp Code Lansing Mill 4917-9511 FC: ID number of contributing federal political committee Occupation New York Life Insurance Occupation Mailing Address 4336 Verplanck Place Northwest Date of Receipt City State Zp Code Name (Last, First, Middle Initial) Date of Receipt Insurance Transaction ID: PH132274 Amount of Each Receipt Insurance Occupation Transaction ID: PH132274 Name of Enployeer Occupation Price Name of Enployeer Occupation Price Maing Address 1448 Lakewood Drive <t< th=""><th>Ar or</th><th>ny information copied from such Reports and Sta for commercial purposes, other than using the n</th><th>atements may</th><th>y not be sold or used by any perso dress of any political committee to</th><th>on for the purpose of soliciting contributions</th></t<>	Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
✓ Full Name (Last, First, Middle Initial) A. Ms. Cynthia Green Mailing Address 1108 Southridge Road City State Zip Code Lansing MI 4817-9511 FEC ID number of contributing federal political committee. Occupation Name of Employer New York Life Insurance Occupation Mill q817-9511 Primary General Occupation Mill q816 Qaregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Bruil Name (Last, First, Middle Initial) But of Receipt Kare Mailing Address 4336 Verplanck Place Northwest City State Zip Code Name of Contributing federal political committiee. C Primary General C Other (specify) ₹ C Occupation New York Life Insurance Coccupation Yice President Receipt Fo: Occupation Yice President Receipt Fo: Qaregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- Vice President Aggregate Year-to-Date ₹ P/R Deduction (\$20.00 Bi- City Sta		NAME OF COMMITTEE (In Full)			
A. Mc. Cynthia Green Date of Receipt Mailing Address 1108 Southridge Road City State Zip Code Haming Address C Transaction ID: PR1321274 Name of Employer Occupation Aggregate Year-to-Date ▼ Name of Employer Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Mon-thilly) Full Name (Last, First, Middle Initia) But Infrance Date of Receipt Mailing Address 4336 Verplanck Place Northwest Date of Receipt City State Zip Code Transaction ID: PR132274 Mailing Address 4336 Verplanck Place Northwest Date of Receipt City State Zip Code Transaction ID: PR132274 Mailing Address 4336 Verplanck Place Northwest Transaction ID: PR132274 City State Zip Code Transaction ID: PR132274 New York Life Insurance Occupation Dc 2016-2428 Primary General Occupation Precept Prece Primary General Precept Prece Precept Precept Prece Primary General Maing Address 1448 Lakewood Drive	\rangle	New York Life Insurance Company Politi	tical Action	Committee	
City State ZIp Code Transaction ID: PR1321274 Amount of Each Receipt this Period C Amount of Each Receipt this Period FeC 1D number of contributing federal political committee. C Amount of Each Receipt this Period Mame of Employee New York Life Insurance Company Receipt For: Occupation Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Mon- this) B Mil. Nonald J. Lefrancois Main Maing Address 4336 Verplanck Place Northwest City State Zip Code Transaction ID: PR132274 Maing Address 4336 Verplanck Place Northwest Transaction ID: PR132274 Maing Address 4336 Verplanck Place Northwest Transaction ID: PR132274 Maing Address 4336 Verplanck Place Northwest Transaction ID: PR132274 Maing Address 4336 Verplanck Place Northwest Transaction ID: PR132274 Maing Address 14 B / accept this Period 260.00 Name of Employer New York Life Insurance City Occupation Yice President Prin PI132274 Maing Address 148 Lakewood Drive Date of Receipt IN: Period City State Zip Code Transaction ID: PR1323274 Maing Address 148 Lakewood Drive Date of	Α.				Date of Receipt
Lansing MI 48917-9511 Amount of Each Receipt this Period FEC ID number of contributing rederal political committee. C 150.00 Name of Employer New York. The Insurance Agent Agent Agent Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Mon-thily) Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Mon-thily) B. Mr. Ronad L. Defrances Date of Receipt for: Date of Receipt for: Oily State Zip Code Washington DC 20016-2428 Receipt For: Occupation Name of Employer Occupation Name of Employer Occupation Vice President Aggregate Year-to-Date ▼ Primary General C Other (specify) ▼ State Zip Code Name of Employer Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi-Weekly) Full Name (Last, First, Middle Initial) C Transaction ID: PR132274 Annount of Each Receipt Material Committee P/R Deduction (\$20.00 Bi-Weekly) City State Zip Code Mailing Address 1448 Lakewood Dr		Mailing Address 1108 Southridge Road			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. C 150.00 Name of Enployer New York Ule Instrumce Campany Occupation Agent Agent Agent 300.00 P/R Deduction (\$25.00 Mon- thily) B. Full Name (Last, First, Middle Initial) Mining Address 4336 Verplanck Place Northwest Date of Receipt City State Zip Code Washington DC 20016-2428 FC: ID number of contributing federal political committee. Occupation Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- Weekly) Name of Enployer New York Life Insurance Company Occupation Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- Weekly) C. Name of Enployer Primary General Other (specify) ▼ Occupation Vice President P/R Deduction (\$20.00 Bi- Weekly) C. Min Address 1448 Lakewood Drive Mining Address 1448 Lakewood Drive Date of Receipt City State Zip Code Transaction ID: PR1323274 Mailing Address 1448 Lakewood Drive Mining 4302-2751 P/R Deduction (\$34.66 Mon- thiy) City State Zip Code P/R Deduction (\$34.66 Mon- thiy) Name of Enployer New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon- thiy)		City	State	Zip Code	Transaction ID: PR1321274
rederal political committee. Image of Enployer Name of Enployer Occupation Agertale Year-to-Date ▼ P/R Deduction (\$25.00 Mon- Primary General Occupation B. Min Ronad L. Efrancis Date of Receipt Mailing Address 4330 Verplanck Place Northwest Image of Enployer City State Zip Code Mailing Address 4336 Verplanck Place Northwest Image of Enployer City State Zip Code Mailing Address 4336 Verplanck Place Northwest Image of Enployer City State Zip Code Transaction Ib: PR132274 Amount of Each Receipt for: 260.00 P/R Deduction (\$20.00 Bi- Period Vice President Receipt for: 260.00 Receipt for: Occupation Vice President P/R Deduction (\$20.00 Bi- City State Zip Code Transaction Ib: PR1323274 <		Lansing	MI	48917-9511	Amount of Each Receipt this Period
Company_ P/Recipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Mon-th/y) Built Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Mon-th/y) B. Mr. Ronal d. Lerrancein Date of Receipt City State Zip Code Variation DC 20016-2428 FEC ID number of contributing federal political committee. C Transaction ID: PR132274 Aggregate Year-to-Date ▼ 260.00 260.00 Name of Enployer Occupation 260.00 Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi-Weekly) C. Mr. Robert V. Schechter Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi-Weekly) C. Mr. Robert V. Schechter Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi-Weekly) City State Zip Code Transaction ID: PR1323274 Mailing Address 1448 Lakewood Drive Transaction ID: PR1323274 Mailing Address 1448 Lakewood Drive P/R Deduction (\$34.66 Mon-th/y) Name of Enployer Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon-th/y) Name of Enployer Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon-th/		federal political committee.			150.00
Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$25.00 Mon- Primary General 300.00 P/R Deduction (\$25.00 Mon- B. Mr. Road L. Defrances Date of Receipt Mailing Address 4336 Verplanck Place Northwest Image: State Zip Code City State Zip Code Transaction ID: PR132274 Mashington DC 2016-2428 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Occupation Yice President Company Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- Mailing Address 1448 Lakewood Drive State Zip Code P/R Deduction (\$20.00 Bi- City State Zip Code Transaction ID: PR1323274 Amount of Each Receipt this Period City State Zip Code Mailing Address 1448 Lakewood Drive City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Qient Amount of Each Receipt this Period Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon-thity) Amount of Each Receipt this Per				n	
Primary General 300.00 P/R Deduction (\$25.00 Mon-thiy) B. Mr. Ronald J. Lefrancois Date of Receipt Mailing Address 4336 Verplanck Place Northwest Transaction ID: PR132274 City State Zip Code Washington DC 20016-2428 FEC ID number of contributing federal political committee. C Name of Employer Occupation New York Life Insurance Occupation Vice President P/R Deduction (\$20.00 Bi-Weekly) C. Mr. Robert V. Schechter Aggregate Year-to-Date ▼ Mailing Address 1448 Lakewood Drive City State Zip Code Mailing Address 1448 Lakewood Drive Transaction ID: PR1323274 City State Zip Code Transaction ID: PR1323274 Mailing Address 1448 Lakewood Drive Transaction ID: PR1323274 City State Zip Code Transaction ID: PR1323274 Amount of Each Receipt this Period C 207.96 P/R Deduction (\$34.66 Mon-thiy) Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon-thiy) Subtrottal of Receipts This Page (optional) 415.92			- °	e Year-to-Date ▼	_
B. Mr. Ronald J. LeFrancois Date of Receipt Mailing Address 4336 Verplanck Place Northwest Image: Constraint of the c		Primary General			P/R Deduction (\$25.00 Mon- thly)
City State Zip Code Transaction ID: PR132274 Washington DC 20016-2428 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 260.00 Name of Employer New York Life Insurance Company. Occupation Vice President P/R Deduction (\$20.00 Bi- Weekly) Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- Weekly) C. Mr. Robert V. Schechter Date of Receipt Mailing Address Mailing Address 1448 Lakewood Drive Transaction ID: PR1323274 City State Zip Code Bloomfild Hills MI 48302-2751 FEC ID number of contributing federal political committee. Occupation Name of Employer New York Life Insurance Occupation Aggregate Year-to-Date ▼ Primary General Occupation Aggregate Year-to-Date ▼ Pirmary General P/R Deduction (\$34.66 Mon- thly) SUBTOTAL of Receipts This Page (optional)	в.	(· · · · · / /			Date of Receipt
Washington DC 20016-2428 Amount of Each Receipt this Period Amount of Each Receipt this Period FEC ID number of contributing tederal political committee. C Name of Employer New York Life Insurance Company Occupation Vice President New York Life Insurance Company Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 520.00 C. Full Name (Last, First, Middle Initial) Mr. Robert V. Schechter Mailing Address 1448 Lakewood Drive Date of Receipt City State Zip Code Bloomfid Hills MI 48302-2751 FEC ID number of contributing tederal political committee. Occupation Agent Name of Employer Occupation Agent Receipt For: Occupation Agent Primary General Other (specify) ▼ Mame of Employer Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 415.92 SUBTOTAL of Receipts This Page (optional)		Mailing Address 4336 Verplanck Place N	M M / D D / Y Y Y Y		
FEC ID number of contributing federal political committee. C 260.00 Name of Employer New York Life Insurance Company Receipt For: Occupation Vice President P/R Deduction (\$20.00 Bi- Weekly) C Mailing Address 1448 Lakewood Drive Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- Weekly) C Mailing Address 1448 Lakewood Drive Date of Receipt City State Zip Code Bloomfild Hills MI 48302-2751 FEC ID number of contributing federal political committee. Occupation Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon- thly) Name of Employer New York Life Insurance Company Occupation Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon- thly) SUBTOTAL of Receipts This Page (optional) 415.92 P/R Deduction (\$34.66 Mon-		City	State	Zip Code	Transaction ID: PR132274
federal political committee. 		Washington	DC	20016-2428	Amount of Each Receipt this Period
Company_ Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ P/R Deduction (\$20.00 Bi-Weekly) Full Name (Last, First, Middle Initial) Date of Receipt C. Mr. Robert V. Schechter Date of Receipt Mailing Address 1448 Lakewood Drive City State Zip Code Bloomfid Hills MI 48302-2751 FEC ID number of contributing federal political committee. C 207.96 Name of Employer New York Life Insurance Company Occupation Agent Aggregate Year-to-Date ▼ Primary General Occupation Agent P/R Deduction (\$34.66 Mon-thily) SUBTOTAL of Receipts This Page (optional) 415.92 P/R Deduction (\$34.66 Mon-thily)			C		260.00
Biomfid Hills Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 520.00 Full Name (Last, First, Middle Initial) Date of Receipt C. Mr. Robert V. Schechter Date of Receipt Mailing Address 1448 Lakewood Drive City State Zip Code Bloomfid Hills MI 48302-2751 FEC ID number of contributing federal political committee. C 207.96 Name of Employer Occupation Aggregate Year-to-Date ▼ New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon-thly) SUBTOTAL of Receipts This Page (optional) 415.92 P/R Deduction (\$34.66 Mon-thly)					_
Other (specify) ▼ 520.00 Weekly) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 1448 Lakewood Drive Date of Receipt City State Zip Code Bloomfld Hills MI 48302-2751 FEC ID number of contributing federal political committee. Occupation Name of Employer Occupation New York Life Insurance Company Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 4115.92					_
C. Mr. Robert V. Schechter Date of Receipt Mailing Address 1448 Lakewood Drive City State Zip Code Bloomfld Hills MI 48302-2751 FEC ID number of contributing federal political committee. C 207.96 Name of Employer New York Life Insurance Company Occupation Agent 207.96 Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon-thly) SUBTOTAL of Receipts This Page (optional)				520.00	P/R Deduction (\$20.00 Bi- Weekly)
Mailing Address 1448 Lakewood Drive City State Zip Code BloomfId Hills MI 48302-2751 FEC ID number of contributing federal political committee. C Transaction ID: PR1323274 Name of Employer New York Life Insurance Company Occupation Agent Amount of Each Receipt this Period New fork Life Insurance Company Occupation Agent P/R Deduction (\$34.66 Mon-thily) Primary General Other (specify) ▼ 415.92 P/R Deduction (\$34.66 Mon-thily) SUBTOTAL of Receipts This Page (optional) 617.96 617.96	<u></u>	· · · · · · · · · · · · · · · · · · ·			Date of Receipt
Bloomfld Hills Ml 48302-2751 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 207.96 Name of Employer New York Life Insurance Company Occupation Agent 207.96 New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon-th/s) Primary General Other (specify) ▼ 415.92 P/R Deduction (\$34.66 Mon-th/s) SUBTOTAL of Receipts This Page (optional) 617.96 617.96		Mailing Address 1448 Lakewood Drive			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. C 207.96 Name of Employer New York Life Insurance Company Occupation Agent Agent Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$34.66 Mon-thly) Primary General Other (specify) ▼ 415.92 P/R Deduction (\$34.66 Mon-thly) SUBTOTAL of Receipts This Page (optional) 617.96 617.96		City	State	Zip Code	Transaction ID: PR1323274
federal political committee. 207.90 Name of Employer New York Life Insurance Company Receipt For: Occupation Agent Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Understand 415.92 P/R Deduction (\$34.66 Mon-thly) SUBTOTAL of Receipts This Page (optional) 617.96		Bloomfld Hills	MI	48302-2751	Amount of Each Receipt this Period
New York Life Insurance Agent Company Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 415.92 P/R Deduction (\$34.66 Mon-thly) SUBTOTAL of Receipts This Page (optional)					207.96
Beceipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 415.92 SUBTOTAL of Receipts This Page (optional) 617.96		New York Life Insurance	· ·	n	
Primary General Other (specify) ▼ 415.92 P/R Deduction (\$34.66 Mon-thly) SUBTOTAL of Receipts This Page (optional)		Company		e Year-to-Date V	
		Primary General			
		UBTOTAL of Receints This Page (ontional)		•	617.96
				-	-

IT Ar	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS by information copied from such Reports and Sta for commercial purposes, other than using the n			
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Polit			
A.	Full Name (Last, First, Middle Initial) Mr. G. Joseph Pasman, Jr. Mailing Address 7397 Heather Ridge Sou	utheast		Date of Receipt
	City	State	Zip Code	Transaction ID: PR1330274
	Caledonia MI		49316-9010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		204.00
	Name of Employer New York Life Insurance Company Receipt For: Primary General Other (specify) ▼	Occupatio Agent Aggregate	n e Year-to-Date ▼ 360.00	P/R Deduction (\$50.00 Mon- thly)
В.	Full Name (Last, First, Middle Initial) Mr. Jeffrey W. Slattery Mailing Address 4052 Walton Ridge Cou	rt		Date of Receipt
	City	State	Zip Code	Transaction ID: PR1331274
	Mason	OIAIE	45040-5916	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer New York Life Insurance Company Receipt For: Primary General Other (specify)		n g Partner ∋ Year-to-Date ▼ 650.00	P/R Deduction (\$25.00 Bi- Weekly)
<u></u>	Full Name (Last, First, Middle Initial) Mr. Brian T. Nowak			Date of Receipt
	Mailing Address 6111 E Cobblestones La	ane		M M / D D / Y Y Y Y
	City Sylvania	State OH	Zip Code	Transaction ID: PR1334274
	FEC ID number of contributing federal political committee.	C	43560-9452	Amount of Each Receipt this Period
	Name of Employer New York Life Insurance Company Receipt For: Primary General Other (specify) ▼	0	n g Partner e Year-to-Date ▼ 1000.22	P/R Deduction (\$38.47 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1029.11
T	OTAL This Period (last page this line number or	nly)	· · · · · · · · · · · · · · · · · · ·	

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 57 / 395 (check only one)				
			or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and Sta for commercial purposes, other than using the n							
$\left[\right]$	NAME OF COMMITTEE (In Full)	is al Astisus	0					
	New York Life Insurance Company Polit	Ical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Ms. Varda Naomi Fink			Date of Receipt				
	Mailing Address 13325 Old Forge Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1335274				
	Silver Spring	MD	20904-6328	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			300.00				
	Name of Employer New York Life Insurance	Occupation	1	7				
	Company Receipt For:	Agent Aggregate	Year-to-Date 🔻	-				
	Primary General Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)				
В.	Full Name (Last, First, Middle Initial) Mr. Gary E. Wendlandt			Date of Receipt				
	Mailing Address 45 Gramercy Park North Apt. 2B	1		M M / D D / Y Y Y Y				
	City New York	State NY	Zip Code	Transaction ID: PR1349274				
	FEC ID number of contributing		10010-6308	Amount of Each Receipt this Period				
	federal political committee.	C		223.60				
	Name of Employer New York Life Insurance	Occupation	າ V.P. & Chief Investment Off					
	Company Receipt For:		Year-to-Date V					
	Primary General Other (specify) ▼		447.20	P/R Deduction (\$17.20 Bi- Weekly)				
<u></u>	Full Name (Last, First, Middle Initial) Mr. Gerry Stadler			Date of Receipt				
0.	Mailing Address E10011 Fawn Lane							
	City	State	Zip Code	Transaction ID: PR1351274				
	Reedsburg	WI	53959-9632	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			300.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company		Year-to-Date 🔻	-				
	Primary General Other (specify) ▼	0 0 0 0	600.00	P/R Deduction (\$50.00 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)		·····	823.60				
т	TOTAL This Period (last page this line number only)							

S	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 58 / 395				
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)				
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
•								
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Polit							
<u>А.</u>	Full Name (Last, First, Middle Initial) Mr. Thomas J. Genera			Date of Receipt				
	Mailing Address 66 River Street			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR135274				
	Guilford	CT	06437-2619	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		156.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	Ŭ	Year-to-Date V	_				
	Primary General		312.00	P/R Deduction (\$26.00 Mon-				
	Other (specify)		512.00	thly)				
В.	Full Name (Last, First, Middle Initial) Mr. Ken Olson			Date of Receipt				
	Mailing Address N6591 Potter Road PO Box 100			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1356274				
	Black River Falls	WI	54615-0100	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		600.00				
	Name of Employer New York Life Insurance Company	Occupatior Agent	1					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	1200.00	P/R Deduction (\$100.00 Mo- nthly)				
	Full Name (Last, First, Middle Initial) Mr. John R. Jagger			Date of Receipt				
•	Mailing Address 1085 Lullwater Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1360274				
	Atlanta	GA	30307-1243	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			150.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company Age Receipt For: Agg			_				
			Year-to-Date V					
	Other (specify)		285.42	P/R Deduction (\$25.00 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)		······	906.00				
Т	TOTAL This Period (last page this line number only)							

5	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 59 / 395
	· · · ·		Use separate schedule(s) or each category of the	(check only one)
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	not be sold or used by any personners of any political committee to the sold or used by any political committee to the sold of the sold	on for the purpose of soliciting contributions solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. George N. Ridings			Date of Receipt
	Mailing Address 887 West Main Street PO Box 1750			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1362274
	Richmond	KY	40476-1750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.68
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	, v	Year-to-Date ▼	_
	Primary General Other (specify)		271.70	P/R Deduction (\$40.00 Mon- thly)
		0 0		
в.	Full Name (Last, First, Middle Initial) Mr. John F. O'Brien			Date of Receipt
	Mailing Address 131 Trumbull Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR136274
	South Windsor	CT	06074-2370	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.02
	Name of Employer New York Life Insurance	Occupation	n Manager - Annuity Sales	
	Company Receipt For:		Year-to-Date ▼	_
	Primary General			P/R Deduction (\$11.54 Bi-
	Other (specify) v	0 0	300.04	Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. R. Keith Bowman			Date of Receipt
	Mailing Address 8706 Glenfield Way			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1365274
	Louisville	KY	40241-2533	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			150.00
	Name of Employer New York Life Insurance	Occupation	1	7
	Company Ager Receipt For: Aggr			_
			e Year-to-Date ▼	
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		······	456.70
\vdash	OTAL This Period (last page this line number or			-
1 1		,,		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 60 / 395 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
٨٣	y information copied from such Reports and Sta	tomonto mo		13 14 15 16 17
	for commercial purposes, other than using the n			
\sum	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. George Nichols, III			Date of Receipt
	Mailing Address 10010 Gary Road			M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR1372274
	Potomac	MD	20854-4149	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			500.11
	Name of Employer New York Life Insurance	Occupation Svp	n	
	Company Receipt For:		e Year-to-Date 🔻	_
	Primary General Other (specify) ▼	U U U U U U U U U U U U U U U U U U U	1000.22	P/R Deduction (\$38.47 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Robert Anthony Tewes			Date of Receipt
	Mailing Address 3523 Reeves Drive			
	City	State	Zip Code	Transaction ID: PR1374274
	Fort Wright	KY	41017-9436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer New York Life Insurance	Occupation	n	_
	Company Receipt For:	Agent Aggregate	e Year-to-Date V	_
	Primary General			P/R Deduction (\$20.00 Mon-
	Other (specify)	0 0	240.00	thly)
C.	Full Name (Last, First, Middle Initial) Mr. Robert H. Quaife			Date of Receipt
	Mailing Address 7223 Old Clore Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1376274
	Prospect	KY	40059-8580	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		102.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company		e Year-to-Date V	_
	Primary General Other (specify) v		204.00	P/R Deduction (\$17.00 Mon- thly)
	I			722.11
^s	UBTOTAL of Receipts This Page (optional)		•••••	
Т	OTAL This Period (last page this line number or	nly)		

IT Ar	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS y information copied from such Reports and Stat						
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.			
$\left \right\rangle$	NAME OF COMMITTEE (In Full)						
	New York Life Insurance Company Politi	cal Action	Committee				
<u>́</u> А.	Full Name (Last, First, Middle Initial) Mr. Thomas J. Murray, Jr.			Date of Receipt			
	Mailing Address 65 Spinning Wheel			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR139274			
	Trumbull	СТ	06611-2674	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		338.00			
	Name of Employer New York Life Insurance	Occupatio	n				
	New York Life Insurance Company	Cvp - Co	mpliance				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	676.00	P/R Deduction (\$26.00 Bi- Weekly)			
в.	Full Name (Last, First, Middle Initial) Mr. Donald E. Helms			Date of Receipt			
	Mailing Address 11508 Big Canoe 367 Laurel Ridge Trail			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR1396274			
	Jasper	GA	30143-0000	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		192.35			
	Name of Employer New York Life Insurance	Occupation					
	Company	Agent					
	Receipt For: Primary General	Aggregate	e Year-to-Date V				
	Other (specify) ▼	0 0	692.46	P/R Deduction (\$38.47 Bi- Weekly)			
с.	Full Name (Last, First, Middle Initial) Mr. Norman M. Bryant			Date of Receipt			
	Mailing Address 14911 Forest Oaks Drive	9		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR1402274			
	Louisville	KY	40245-6509	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		325.00			
	Name of Employer New York Life Insurance	Occupatio		7			
	Company	Managin	0				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)		······	855.35			
	TOTAL This Period (last page this line number only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 62 / 395 (check only one)				
11			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions				
\sum	NAME OF COMMITTEE (In Full)							
\angle	New York Life Insurance Company Politi							
Α.	Full Name (Last, First, Middle Initial) Mr. Joseph A. Burt			Date of Receipt				
	Mailing Address 3018 Colonial Hill Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1403274				
	Louisville	KY	40205-2706	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		156.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company Receipt For:	Agent	Year-to-Date V	_				
	Primary General	Aggregate		P/R Deduction (\$26.00 Mon-				
	Other (specify)	0 0	312.00	thly)				
в.	Full Name (Last, First, Middle Initial) Mr. Terry H. Hood			Date of Receipt				
	Mailing Address 105 Evergreen Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1406274				
	Florence	AL	35630-6917	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company Receipt For:	Agent	Year-to-Date V	_				
	Primary General	Ayyreyaid		P/R Deduction (\$25.00 Mon-				
	Other (specify)	0 0	300.00	thly)				
с.	Full Name (Last, First, Middle Initial) Mr. Bill Kimbrough			Date of Receipt				
	Mailing Address 5096 Cypress Lake Drive	9		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1409274				
	Lake Park	GA	31636-3140	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		300.00				
	Name of Employer New York Life InsuranceOccupation AgentCompanyAgengateReceipt For:Aggregate		1					
			Year-to-Date V					
	Primary General Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)			606.00				
Т	TOTAL This Period (last page this line number only)							

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 63 / 395 (check only one)					
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions					
Ν	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee						
A.	Full Name (Last, First, Middle Initial) Mr. Jon Sellers			Date of Receipt					
	Mailing Address 7756 J H Sellers Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1411274					
	River Falls	AL	36476	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:		e Year-to-Date 🔻	-					
	Primary General			P/R Deduction (\$26.00 Mon-					
	Other (specify)	0 0	312.00	thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Steven R. Kaneski			Date of Receipt					
	Mailing Address 9692 Sterling Point Cou	rt		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1412274					
	Loomis	CA	95650-7120	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		499.98					
	Name of Employer New York Life Insurance	Occupation	ı						
	Company Receipt For:	Agent	e Year-to-Date ▼	_					
	Primary General	Ayyreyale		P/R Deduction (\$83.33 Mon-					
	Other (specify)	0 0	999.96	thly)					
с.	Full Name (Last, First, Middle Initial) Mr. Horace Powell			Date of Receipt					
	Mailing Address 943 E Main Street			M M / D D / Y Y Y Y					
	City Drotty ile	State	Zip Code	Transaction ID: PR1413274					
	Prattvile	AL	36067-5654	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company Receipt For:	Agent	e Year-to-Date ▼	_					
	Primary General	riggrogate		P/R Deduction (\$26.00 Mon-					
	Other (specify)	0 0	312.00	thly)					
s	UBTOTAL of Receipts This Page (optional)			811.98					
т	TOTAL This Period (last page this line number only)								

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 64 / 395
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committee	
\angle				
^	Full Name (Last, First, Middle Initial) Mr. James E. Mason			Date of Receipt
А.	Mailing Address 3241 Circle Drive			
	Maining Address 3241 Officie Drive			
	City	State	Zip Code	Transaction ID: PR1414274
	Hopkinsville	KY	42240-4807	Amount of Each Receipt this Period
	FEC ID number of contributing	С		156.00
	federal political committee.			
	Name of Employer New York Life Insurance	Occupation	1	-
	Company	Agent		
	Receipt For:	Aggregate	Year-to-Date V	_
	Other (specify)		312.00	P/R Deduction (\$26.00 Mon- thly)
			0 0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial)			
В.	Mr. Lloyd R. Wilson			Date of Receipt
	Mailing Address 3148 Pine Ridge Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1416274
	Birmingham	AL	35213-3906	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.04
	Name of Employer	Occupation	1	_
	Name of Employer New York Life Insurance Company	Agent		
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General		1000.08	P/R Deduction (\$83.34 Mon-
	Other (specify)	0 0		thly)
	Full Name (Last, First, Middle Initial)			
C.	Mr. Ross-Morris Sims			Date of Receipt
	Mailing Address 91 Valley View Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1421274
	Cortlandt Manor	NY	10567-1235	Amount of Each Receipt this Period
	FEC ID number of contributing	0		325.00
	federal political committee.	C		323.00
	Name of Employer New York Life Insurance	Occupation	1	
	New York Life Insurance Company		sident	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General		650.00	P/R Deduction (\$25.00 Bi-
	Other (specify) v			Weekly)
s	UBTOTAL of Receipts This Page (optional)			981.04
T	OTAL This Period (last page this line number or	nly)		

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 395 (check only one) 11a 11b 11c 12 X 11a 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	/ not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politi	ical Action	Committee	
Δ.	Full Name (Last, First, Middle Initial) Mr. Michael A. Watson			Date of Receipt
	Mailing Address 790 Amsterdam Avenue	#3B		
	City	State	Zip Code	Transaction ID: PR1422274
	New York	NY	10025-5708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		780.00
	Name of Employer New York Life Insurance Company Receipt For: Primary General Other (specify) ▼		n & Deputy General Counsel e Year-to-Date ▼ 1407.76	P/R Deduction (\$60.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. R. Frank Avrett			Date of Receipt
	Mailing Address 4343 N Scottsdale Road Suite 220			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1423274
	<u>Scottsdale</u>	AZ	85251-3344	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		507.00
	Name of Employer New York Life Insurance	Occupation Managing		
	Company Receipt For:	. .	e Year-to-Date V	_
	Primary General Other (specify) ▼	0 0	916.00	P/R Deduction (\$39.00 Bi- Weekly)
<u></u> с.	Full Name (Last, First, Middle Initial) Mr. Tim Ellen			Date of Receipt
	Mailing Address 113 Highland Point Drive	9		M · M / D · D / Y · Y · Y · Y
	City	State	Zip Code	Transaction ID: PR1428274
	La Grange	GA	30240-3791	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		222.64
	Name of Employer New York Life Insurance Company	Occupation Agent		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0.0	430.60	P/R Deduction (\$42.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		b	1509.64
\vdash			•	

TOTAL This Period (last page this line number only)

FEC Schedule A (Form 3X) Rev. 02/2003

SI	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 66 / 395				
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)				
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
•								
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	ress of any political committee to	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
\rangle	New York Life Insurance Company Polit	ical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Wilmer S. Poynor, III, III			Date of Receipt				
	Mailing Address 419 Club Place			M M / D D / Y Y Y Y				
	City State Birmingham AL		Zip Code	Transaction ID: PR1434274				
			35223-1167	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		375.00				
	Name of Employer New York Life Insurance Company	Occupation Agent	1					
	Receipt For:	Ŭ	Year-to-Date V	_				
	Primary General Other (specify) ▼	0 0	500.00	P/R Deduction (\$375.00 Mo- nthly)				
— B	Full Name (Last, First, Middle Initial) Mr. Joe W. Donaldson			Date of Receipt				
	Mailing Address 106 Glynlakes Drive							
	City	State	Zip Code	Transaction ID: PR1437274				
	Pike Road	AL	36064-1766	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		181.26				
	Name of Employer New York Life Insurance Company	Occupation Agent	1					
	Receipt For:	Aggregate	Aggregate Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	243.78	P/R Deduction (\$50.00 Mon- thly)				
<u></u>	Full Name (Last, First, Middle Initial) Mr. Vernon Mott			Date of Receipt				
	Mailing Address 151 County Road #3400			M • M / D • D / Y • Y • Y • Y				
	City	State	Zip Code	Transaction ID: PR1440274				
	Haleyville	AL	35565-8517	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		156.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent						
	Receipt For: Primary General	Aggregate	Year-to-Date V					
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)			712.26				
Т	TOTAL This Period (last page this line number only)							

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 67 / 395				
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)				
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Polit	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Pat Ingram			Date of Receipt				
	Mailing Address PO Box 900			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1449274				
	Cleveland	MS	38732-0900	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		210.00				
	Name of Employer New York Life Insurance	Occupation Agent	n					
	Company Receipt For:		e Year-to-Date 🔻					
	Primary General		400.00	P/R Deduction (\$35.00 Mon-				
	Other (specify)	0 0	420.00	thly)				
в.	Full Name (Last, First, Middle Initial) Mr. Jerry Coats			Date of Receipt				
	Mailing Address 165 Pebble Beach Drive)		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1456274				
	Little Rock	AR	72212-2645	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		510.00				
	Name of Employer New York Life Insurance	Occupation						
	Company	Agent						
	Receipt For:	Aggregate	e Year-to-Date 🔻	_				
	Primary General Other (specify) ▼	0 0	1020.00	P/R Deduction (\$85.00 Mon- thly)				
<u></u>	Full Name (Last, First, Middle Initial) Mr. Timothy A. Martin			Date of Receipt				
	Mailing Address 106 Lake Shore Drive			M M / D D / Y Y Y				
	City	State	Zip Code	Transaction ID: PR1461274				
	Russellville	AR	72802-7910	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		124.98				
	Name of Employer New York Life Insurance	Occupation	n	7				
	Company	Agent	Veer to Dete	_				
	Receipt For: Agg		e Year-to-Date 🔻					
	Other (specify) ▼	0 0	249.96	P/R Deduction (\$20.83 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)			844.98				
	TOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 68 / 395 (check only one) X 11a 11b 11c 12
			Detailed Summary Page	
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Politie			
Α.	Full Name (Last, First, Middle Initial) Mr. Robert J. Ellwanger, Jr.			Date of Receipt
	Mailing Address 430 Dunham Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR146274
	Fairfield	CT	06824-2009	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		104.00
	Name of Employer Occ New York Life Insurance		n	
	New York Life Insurance Company	Cvp - Ma	irket Management	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)		208.00	P/R Deduction (\$8.00 Bi-W- eekly)
в.	Full Name (Last, First, Middle Initial) Mr. Robert Winston Fulmer			Date of Receipt
	Mailing Address 4315 S 35th Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1465274
	Fort Smith	AR	72903-6406	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		78.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company Receipt For:	Agent	e Year-to-Date V	
	Primary General	Ayyreyale		D/D Deduction (\$26.00 Mon
	Other (specify)	0 0	234.00	P/R Deduction (\$26.00 Mon- thly)
С.	Full Name (Last, First, Middle Initial) Mr. Thomas L. McConathy			Date of Receipt
	Mailing Address 11813 Towering Oaks Dr	ive		M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR1469274
	Baton Rouge	LA	70810-3162	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer New York Life Insurance	Occupation		7
	Company Ma Receipt For: Ag		g Partner	
			e Year-to-Date ▼	
	Primary General Other (specify) ▼		390.00	P/R Deduction (\$15.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		·····	377.00
	OTAL This Period (last page this line number onl			-

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 69 / 395							
			or each category of the	(check only one)						
••			Detailed Summary Page	X 11a 11b 11c 12						
A	winformation conied from such Departs and Cta	tomonto mo	, not be cold or used by only norge	13 14 15 16 17						
or	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.									
Ν	NAME OF COMMITTEE (In Full)									
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Mr. Dan Faulk			Date of Receipt						
	Mailing Address 12463 Coursey Bouleval	rd		M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1470274						
	Baton Rouge	LA	70816-4550	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		156.00						
	Name of Employer New York Life Insurance	Occupation	า	-						
	Company	Agent								
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	 Primary General Other (specify) ▼ 	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)						
в.	Full Name (Last, First, Middle Initial) Ms. Michele Guerin			Date of Receipt						
	Mailing Address 539 Little Farms Avenue	9		M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1489274						
	River Ridge	LA	70123-1311	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		150.00						
	Name of Employer New York Life Insurance	Occupation	1							
	Company	Agent	<u> </u>	_						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)						
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Charles Van Zile			Date of Receipt						
	Mailing Address 125 Westland Place			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1492274						
	West Monroe	LA	71291-5431	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		150.00						
	Name of Employer New York Life Insurance	Occupation	1	7						
	Company	Agent	<u> </u>							
			e Year-to-Date V							
	Other (specify)		300.00	P/R Deduction (\$25.00 Mon- thly)						
s	UBTOTAL of Receipts This Page (optional)		b	456.00						
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)									

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 395 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)					
\rangle	New York Life Insurance Company Politi	ical Action	Committee			
<u>́А</u> .	Full Name (Last, First, Middle Initial) Mr. John Wemple			Date of Receipt		
	Mailing Address 7774 Copperfield Court			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1493274		
	Baton Rouge	LA	70808-6770	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			156.00		
	Name of Employer New York Life Insurance	Occupation Agent	1			
	Company Receipt For:	- U	Year-to-Date 🔻	_		
	Primary General Other (specify) ▼		312.00	P/R Deduction (\$26.00 Mon- thly)		
в.	Full Name (Last, First, Middle Initial) Mr. Tim C. Fitzgerald			Date of Receipt		
	Mailing Address 12086 Ellerbe Road			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1494274		
	Shreveport	LA	71115-9568	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		433.36		
	Name of Employer New York Life Insurance Company	Occupation Agent	1			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼	0 0	733.36	P/R Deduction (\$83.34 Mon- thly)		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Michael McCann			Date of Receipt		
	Mailing Address 17510 Galmiche Court			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1502274		
	Chesterfield	MO	63005-4343	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		195.00		
	Name of Employer New York Life Insurance	Occupation Managing				
	Company		e Year-to-Date ▼	_		
	Primary General Other (specify)		390.00	P/R Deduction (\$15.00 Bi- Weekly)		
	UBTOTAL of Receipts This Page (optional)			784.36		
┢				-		
י ۱	TOTAL This Period (last page this line number only)					

5	CHEDULE A (FEC Form 3X)	[FOR LINE NUMBER: PAGE 71 / 395		
			Use separate schedule(s) or each category of the	(check only one)		
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
\rangle	New York Life Insurance Company Polit	tical Action	Committee			
́А.	Full Name (Last, First, Middle Initial) Mr. Dom V. Cianciotti			Date of Receipt		
	Mailing Address 3 Malcoms Landing			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR150274		
	Northport	NY	11768-1559	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.52		
	Name of Employer New York Life Insurance	Occupation	1			
	Company Receipt For:	Agent	Year-to-Date V	_		
	Primary General	Ayyreyale		P/P Doduction (\$92.94 Mon		
	Other (specify)	0 0	250.52	P/R Deduction (\$83.84 Mon- thly)		
в.	Full Name (Last, First, Middle Initial) Mr. Dan Madden			Date of Receipt		
	Mailing Address 3990 College Street			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1504274		
	Arcadia	LA	71001-3641	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		156.00		
	Name of Employer New York Life Insurance	Occupation	1			
	Company	Agent				
	Receipt For: Primary General	Aggregate				
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)		
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Maurice Springer			Date of Receipt		
	Mailing Address 25 Hickory Place E28					
	City	State	Zip Code	Transaction ID: PR1505274		
	Chatham	NJ	07928-1487	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		130.00		
	Name of Employer New York Life Insurance	Occupation		7		
	Company		Management Training	_		
	Receipt For:	Aggregate	Year-to-Date V			
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)		
s	UBTOTAL of Receipts This Page (optional)		······	536.52		
				-		
TOTAL This Period (last page this line number only)						

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	tements ma	Use separate schedule(s) or each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 72 / 395 (check only one) 11a X 11a 13 14 15 16 17					
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.					
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Polit	ical Action	Committee						
\backslash	New Tork Life insurance Company Fold		Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. John B. Stagg			Date of Receipt					
	Mailing Address 8816 S Lakewood Court			M · M / D · D / Y · Y · Y					
	City	State	Zip Code	Transaction ID: PR1507274					
	Tulsa	OK	74137-3124	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of Employer New York Life Insurance	Occupatio	n	-					
	Company	Managin	0						
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻						
	Other (specify)	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)					
	Full Name (Last, First, Middle Initial)			Date of Bessint					
ь.	Mr. Stephen N. Steinig Mailing Address 37 Westcliff Drive			Date of Receipt					
	City	State	Zip Code	Transaction ID: PR151274					
	Dix Hills	NY	11746-5627	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		260.00					
	Name of Employer New York Life Insurance	Occupatio							
	Company Receipt For:	Executive	e Officer e Year-to-Date ▼	_					
	Primary General	Ayyreyale		P/R Deduction (\$20.00 Bi-					
	Other (specify)	0 0	476.00	Weekly)					
с.	Full Name (Last, First, Middle Initial) Mr. Beaver Smith			Date of Receipt					
-	Mailing Address 3922 Patterson Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1515274					
	New Orleans	LA	70114-1809	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.02					
	Name of Employer New York Life Insurance	Occupatio	n	7					
	Company	Agent		_					
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/P Doduction (\$41.67 Mon					
	Other (specify) ▼	0 0	500.04	P/R Deduction (\$41.67 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)		·····	835.02					
	TOTAL This Period (last page this line number only)								
SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 73 / 395					
--------------------------	---------------------------------------------------------------------------------------------------	------------------------------	-----------------------------------------------------	-------------------------------------------------------------------------------------------	--	--	--	--	--
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)					
II EIVIIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12					
•									
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
\rangle	New York Life Insurance Company Politi	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Sidney A. Triche			Date of Receipt					
	Mailing Address 312 West 23rd PO Box 159			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1516274					
	Larose	LA	70373-0159	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		450.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	Ŭ	Year-to-Date V	_					
	Primary General		000.00	P/R Deduction (\$75.00 Mon-					
	Other (specify)	0 0	900.00	thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Larry S. Richardson			Date of Receipt					
	Mailing Address 8044 Highway 941			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1521274					
	Gonzales	LA	70737-8301	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent							
	Receipt For:	Aggregate	Year-to-Date V						
	Primary General Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)					
 C.	Full Name (Last, First, Middle Initial) Mr. Mac Mc Conathy			Date of Receipt					
	Mailing Address 67 McConathy Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1527274					
	Rayville	LA	71269-6460	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company	Agent							
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)					
s	LUBTOTAL of Receipts This Page (optional)			762.00					
Ĕ			•						
Т	OTAL This Period (last page this line number of	nly)							

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 74 / 395					
				(check only one)					
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12					
·									
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on tor the purpose of soliciting contributions					
$\overline{\mathbf{n}}$	NAME OF COMMITTEE (In Full)								
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committee						
\square									
Α.	Full Name (Last, First, Middle Initial) Mr. Joseph Sing Bonin			Date of Receipt					
-	Mailing Address 633 Gertrude Drive								
		.							
	City St. Mrtipulo	State LA	Zip Code	Transaction ID: PR1530274					
	St. Mrtinvle		70582-4935	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		228.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent	Veer te Dete 🖛	_					
	Receipt For: Primary General	Aggregate	Year-to-Date V						
	Other (specify) v	0 0	384.00	P/R Deduction (\$50.00 Mon- thly)					
	Full Name (Last, First, Middle Initial) Ms. Deborah Copeland			Date of Receipt					
D.	Mailing Address 6327 Zadlock Wds Drive								
	City	State	Zip Code	Transaction ID: PR153274					
	Austin	TX	78749-2609	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	1	-					
	Company	Agent							
	Receipt For:	Aggregate	Year-to-Date V						
	Other (specify)		312.00	P/R Deduction (\$26.00 Mon- thly)					
		0.0							
c.	Full Name (Last, First, Middle Initial) Mr. Christopher J. Prudhomme			Date of Receipt					
	Mailing Address 502 Princeton Woods Lo	оор		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1538274					
	Lafayette	LA	70508-6672	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.11					
	Name of Employer New York Life Insurance	Occupation							
	Company	Managin		_					
	Receipt For:		Year-to-Date V						
	Other (specify)		1000.22	P/R Deduction (\$38.47 Bi- Weekly)					
s	LUBTOTAL of Receipts This Page (optional)			884.11					
F									
Т	OTAL This Period (last page this line number or	nly)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS									
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Polit	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Samuel L. Hebert			Date of Receipt					
	Mailing Address 3307 Henderson Bayou	Road		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1540274					
	Lake Charles	LA	70605-2248	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		150.00					
	Name of Employer New York Life Insurance	Occupatio	n						
	Company Receipt For:	Agent	e Year-to-Date V	_					
	Primary General Other (specify)		300.00	P/R Deduction (\$25.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Jim Kihneman Jr Clu Chfc			Date of Receipt					
	Mailing Address 11175 Heritage Oaks			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1544274					
	Shreveport	LA	71106-8383	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		108.00					
	Name of Employer New York Life Insurance Company	Occupation Agent							
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 216.00	P/R Deduction (\$18.00 Mon- thly)					
с.	Full Name (Last, First, Middle Initial) Mr. Mike Delahaye			Date of Receipt					
	Mailing Address 6415 Sevenoaks			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1547274					
	Baton Rouge	LA	70806-7335	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.04					
	Name of Employer New York Life Insurance	Occupation Agent	n						
Company			e Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	1000.08	P/R Deduction (\$83.34 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)			758.04					
Т	OTAL This Period (last page this line number or	וy)	· · · · · · · · · · · · · · · · · · ·						

SCHEDIII E A (EEC Form 2V)				FOR LINE NUMBER: PAGE 76 / 395						
SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	(check only one)						
			Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 17						
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
$ \rangle$	New York Life Insurance Company Polit	ical Action	Committee							
\angle										
^	Full Name (Last, First, Middle Initial) Mr. Pak Ming Chiu			Date of Receipt						
А.	Mailing Address PO Box 154									
	City	State	Zip Code	Transaction ID: PR155274						
	East Setauket	NY	11733-0154	Amount of Each Receipt this Period						
	FEC ID number of contributing	С		156.00						
	federal political committee.									
	Name of Employer New York Life Insurance	Occupation	1	-						
	New York Life Insurance Company	Agent								
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	Primary General		312.00	P/R Deduction (\$26.00 Mon-						
	Other (specify)	1 1		thly)						
	Full Name (Last, First, Middle Initial)									
В.	Mr. Eric B. Campbell			Date of Receipt						
	Mailing Address 240 E 47th Street			M M / D D / Y Y Y Y						
	Apt. 22C	Charles	Zin Onde							
	City New York	State NY	Zip Code	Transaction ID: PR1563274						
			10017-2136	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		520.00						
	·									
	Name of Employer New York Life Insurance	Occupation	n Chief Distribution Officer							
	Company Receipt For:		Year-to-Date V	_						
	Primary General	, iggi ogaio		P/R Deduction (\$40.00 Bi-						
	Other (specify) 🔻		1040.00	Weekly)						
c	Full Name (Last, First, Middle Initial) Mr. Jerry R. Tinsley			Date of Receipt						
0.	Mailing Address 18724 Nautical Drive Ap	it 1								
	City	State	Zip Code	Transaction ID: PR1566274						
	Cornelius	NC	28031-4601	Amount of Each Receipt this Period						
	FEC ID number of contributing	С		650.00						
	federal political committee.									
	Name of Employer New York Life Insurance	Occupation								
	Company	Employe								
	Receipt For:		e Year-to-Date 🔻							
	Primary General Other (specify) ▼		1300.00	P/R Deduction (\$50.00 Bi- Weekly)						
		0 0	0 0 0 0 0 0 0							
s	UBTOTAL of Receipts This Page (optional)			1326.00						
F				-						
Т	OTAL This Period (last page this line number or	ıly)	····· Þ							

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 77 / 395 (check only one)						
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $						
An	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions						
$\overline{\}$	NAME OF COMMITTEE (In Full)									
	New York Life Insurance Company Poli	tical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Ms. Rose Denmark			Date of Receipt						
	Mailing Address 81 Knapp Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1567274						
	Port Allegany	PA	16743-6033	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		156.00						
	Name of Employer New York Life Insurance	Occupation	ı	—						
	Company Receipt For:	Agent	e Year-to-Date ▼							
	Primary General	Aggregate		P/R Deduction (\$26.00 Mon-						
	Other (specify)	0 0	312.00	thly)						
в.	Full Name (Last, First, Middle Initial) Mr. Michael Noland			Date of Receipt						
	Mailing Address 5933 S Knoxville			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1569274						
	Tulsa	OK	74135-7806	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		510.00						
	Name of Employer New York Life Insurance	Occupation	ı							
	Company Receipt For:	Agent	e Year-to-Date ▼	_						
	Primary General	Aggrogate		P/R Deduction (\$85.00 Mon-						
	Other (specify)	0 0	1020.00	thly)						
C.	Full Name (Last, First, Middle Initial) Mr. Randell T. Nichols			Date of Receipt						
	Mailing Address 5501 Royal Oak Drive N	Northeast		M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1576274						
	Albuquerque	NM	87111-7701	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		539.50						
	Name of Employer New York Life Insurance	Occupation Field Par								
	Company Receipt For:		e Year-to-Date V							
	Primary General			P/R Deduction (\$41.50 Bi-						
	Other (specify) v	0 0	1079.00	Weekly)						
s	UBTOTAL of Receipts This Page (optional)			1205.50						
	OTAL This Period (last page this line number o									

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 78 / 395 (check only one)							
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12							
Anniate and the second forms such Department		tomonto mo	, not be cold or used by only perce	13 14 15 16 17 on for the purpose of soliciting contributions							
	for commercial purposes, other than using the n										
	NAME OF COMMITTEE (In Full)										
\geq	New York Life Insurance Company Polit	tical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. Fred Bangasser			Date of Receipt							
	Mailing Address 2108 Key W Cove			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1579274							
	Austin	TX	78746-7256	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		498.00							
	Name of Employer New York Life Insurance	Occupation	1								
	Company Receipt For:	Agent	e Year-to-Date ▼								
	Primary General	Ayyreyale		P/R Deduction (\$83.00 Mon-							
	Other (specify)	0 0	996.00	thly)							
в.	Full Name (Last, First, Middle Initial) Mr. Larry Bernard			Date of Receipt							
	Mailing Address 10930 Beinhorn			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1580274							
	Houston	ТХ	77024-4518	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		199.98							
	Name of Employer New York Life Insurance	Occupation	1								
	Company	Agent									
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Doduction (\$20.00 Mar							
	Other (specify)	0 0	399.96	P/R Deduction (\$33.33 Mon- thly)							
с.	Full Name (Last, First, Middle Initial) Mr. Raymond Vitek, Jr.			Date of Receipt							
	Mailing Address 818 San Marino			M ' M / D D / Y ' Y ' Y ' Y							
	City	State	Zip Code	Transaction ID: PR1582274							
	Sugar Land	TX	77478-3328	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		300.00							
	Name of Employer New York Life Insurance	Occupation	1								
	Company	Agent	e Year-to-Date ▼								
	Receipt For: Age Primary General			P/R Deduction (\$50.00 Mon-							
	Other (specify)	0 0	600.00	thly)							
s	UBTOTAL of Receipts This Page (optional)		······	997.98							
	OTAL This Period (last page this line number or										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 79 / 395 (check only one)						
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$						
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions						
\sum	NAME OF COMMITTEE (In Full)									
	New York Life Insurance Company Poli	itical Action	Committee							
A.	Full Name (Last, First, Middle Initial) Mr. Robert C. Nowak			Date of Receipt						
	Mailing Address 98 Logwood Street			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR158274						
	South Burlington	VT	05403-6444	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		156.00						
	Name of Employer New York Life Insurance	Occupation	n							
	Company	Agent	Veer te Dete	_						
	Receipt For: Primary General	Ayyreyate	e Year-to-Date ▼	P/P Doduction (\$26.00 Mon						
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)						
в.	Full Name (Last, First, Middle Initial) Mr. Michael W. Reeves			Date of Receipt						
	Mailing Address 7227 Preston Country L	ane		M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1586274						
	Prosper	TX	75078-8903	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		250.12						
	Name of Employer New York Life Insurance	Occupation	n							
	Company Receipt For:	Agent	e Year-to-Date ▼							
	Primary General	Ayyreyate		P/R Deduction (\$19.24 Bi-						
	Other (specify)	0 0	500.24	Weekly)						
с.	Full Name (Last, First, Middle Initial) Mr. Stephen G. Ray			Date of Receipt						
	Mailing Address 6230 Stefani Drive									
	City	State	Zip Code	Transaction ID: PR1588274						
	Dallas	TX	75225-2121	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		455.00						
	Name of Employer New York Life Insurance	Occupation								
	Company Receipt For:		P West Central Agencies e Year-to-Date ▼	_						
	Primary General	Aggregate		P/P Doduction (\$25.00 Bi						
	Other (specify)	0 0	850.00	P/R Deduction (\$35.00 Bi- Weekly)						
s	UBTOTAL of Receipts This Page (optional)			861.12						
т	OTAL This Period (last page this line number c	only)								

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 80 / 395							
ITEMIZED RECEIPTS			or each category of the	(check only one)							
			Detailed Summary Page								
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
Ν	NAME OF COMMITTEE (In Full)										
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee								
A.	Full Name (Last, First, Middle Initial) Mr. Jim Erben			Date of Receipt							
	Mailing Address 302 Jack Nicklaus			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1591274							
	Austin	TX	78738-1714	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		210.00							
	Name of Employer New York Life Insurance Company	Occupation Agent	1								
	Receipt For:		Year-to-Date 🔻								
	Primary General Other (specify) ▼		360.00	P/R Deduction (\$40.00 Mon- thly)							
в.	Full Name (Last, First, Middle Initial) Mr. Leon A. Mahfouz			Date of Receipt							
	Mailing Address 15 Whisper Wind Place	l		M M / D D / Y Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1593274							
	the Woodlands	TX	77382-1038	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		195.00							
	Name of Employer New York Life Insurance	Occupation									
	Company	Vice Pres									
	Receipt For: Primary General	Aggregate	Year-to-Date V								
	Other (specify) ▼	0 0	390.00	P/R Deduction (\$15.00 Bi- Weekly)							
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Michael G. Morgan			Date of Receipt							
	Mailing Address 2791 Nightwind Court			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1597274							
	Frisco	ТХ	75034-4669	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		130.00							
	Name of Employer New York Life Insurance	Occupation		7							
	Company	· ·	ne Finance & Administration								
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)							
s	LUBTOTAL of Receipts This Page (optional)		•••••	535.00							
т	OTAL This Period (last page this line number o	nly)									

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 81 / 395							
		Lico conarato cohodulo(c)		(check only one)							
11	EMIZED RECEIPTS			X 11a 11b 11c 12							
Any information panied from such Departs and Otate											
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		0 III								
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. Mike Jones			Date of Receipt							
	Mailing Address 11232 Northview Drive			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1599274							
	Fort Worth	TX	76008-5219	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		156.00							
	Name of Employer New York Life Insurance	Occupation	1	_							
	Company	Agent									
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)							
в.	Full Name (Last, First, Middle Initial) Mr. Frank J. Ollari			Date of Receipt							
	Mailing Address 4430 Douglaston Parkw Apt. 6F	ay		M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR160274							
	Douglaston	NY	11363-1829	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		156.00							
	Name of Employer New York Life Insurance	Occupation	vice President								
	Company Receipt For:		Year-to-Date V								
	Primary General	, iggi ogalo		P/R Deduction (\$12.00 Bi-							
_	Other (specify)	0 0	312.00	Weekly)							
с.	Full Name (Last, First, Middle Initial) Mr. Tom Ball, III			Date of Receipt							
	Mailing Address 2200 Westlake Drive			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1608274							
	Austin	TX	78746-2933	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		480.00							
	Name of Employer New York Life Insurance	Occupation	1	7							
	New York Life Insurance Agent		Versite Det 💻	_							
			Year-to-Date ▼								
	Other (specify)	0 0	960.00	P/R Deduction (\$80.00 Mon- thly)							
s	UBTOTAL of Receipts This Page (optional)			792.00							
т	OTAL This Period (last page this line number or	nly)									

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 82/395					
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)					
			Detailed Summary Page	X 11a 11b 11c 12					
•	information and from such Decade 101			13 14 15 16 17					
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscillations solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)		· ·						
$\left \right\rangle$	New York Life Insurance Company Polit	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Ronald D. Vick			Date of Receipt					
	Mailing Address 1645 Harper Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1609274					
	Kerrville	TX	78028-2994	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	n						
	Company Receipt For:	Agent	e Year-to-Date V						
	Primary General	Ayyreyale		P/R Deduction (\$26.00 Mon-					
	Other (specify)	0 0	312.00	thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Lawson J. Schuford, Jr.			Date of Receipt					
	Mailing Address 201 Plano Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1610274					
	Shreveport	LA	71103-2056	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.20					
	Name of Employer New York Life Insurance	Occupation	n						
	Company	Agent							
	Receipt For: Primary General	Aggregate	e Year-to-Date V						
	Other (specify)	0 0	500.40	P/R Deduction (\$41.70 Mon- thly)					
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. John C. Ayers			Date of Receipt					
	Mailing Address 4655 Wisteria			M • M / D • D / Y • Y • Y • Y					
	City	State	Zip Code	Transaction ID: PR1611274					
	Dallas	ТХ	75116-8027	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	n						
	Company	Agent		_					
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)					
s	LUBTOTAL of Receipts This Page (optional)		······	562.20					
F									
Т	OTAL This Period (last page this line number or	nly)							

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		FOR LINE NUMBER: PAGE 83 / 395 (check only one)										
ITEMIZED RECEIPTS			or each category of the	Ì.	X 11a 11b 11c 12										
			Detailed Summary Page		13		14		15	H	16		7		
	y information copied from such Reports and Sta for commercial purposes, other than using the n														
\sum	NAME OF COMMITTEE (In Full)														
\rangle	New York Life Insurance Company Polit	tical Action	Committee												
Α.	Full Name (Last, First, Middle Initial) Mr. Dean Bogle				Date of	Rece	eipt								
	Mailing Address 8400 Northwest 101st S	treet			M M / D D / Y Y Y Y										
	City	State	Zip Code		Transa	ction	ID:	PR1	6142	274					
	Oklahoma City	OK	73162-5033		Amoun	t of E	ach I	Rece	ipt thi	s Pe	eriod				
	FEC ID number of contributing federal political committee.	C							<u> </u>	1:	35.0	0			
	Name of Employer New York Life Insurance	Occupation Agent	1												
	Company Receipt For:		Year-to-Date V												
	Primary General		255.00		P/R Dee thly)	ducti	on (\$25	5.00 Mon-						
	Other (specify)	0 0			uny)										
В.	Full Name (Last, First, Middle Initial) Mr. Frank Knox				Date of	Rece	eipt								
	Mailing Address 1904 Morning Star			M M / D D / Y Y Y Y											
	City	State		Transaction ID: PR1620274											
	Edmond	OK	73034-6541		Amoun	t of E	ach I	Rece	eipt thi	s Pe	eriod				
	FEC ID number of contributing federal political committee.	C			150.00										
	Name of Employer New York Life Insurance	Occupation Agent	1												
	Company Receipt For:	, v	Year-to-Date V												
	Primary General Other (specify) ▼		300.00		P/R Deduction (\$25.00 Mon- thly)										
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Eddie N. Chao				Date of	Bece	eint								
	Mailing Address 152 Citrus Ranch Road				MM			D /	Y	Y	Y	Y			
	City	State	Zip Code		Transa	ction	ID:	PR1	6252	274					
	<u>San Dimas</u>	CA	91773-3170		Amoun	t of E	ach I	Rece	ipt thi	s Pe	eriod				
	FEC ID number of contributing federal political committee.	C					1			1:	30.0	0			
	Primary General														
			Year-to-Date V	-											
			250.00		P/R Deduction (\$10.00 Bi- Weekly)										
	Other (specify)	0 0	0 0 0 0 0 0 0 0		TT CERTY	/									
s	UBTOTAL of Receipts This Page (optional)			►						41	15.0	0			
т	OTAL This Period (last page this line number or	nly)		•											

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 84 / 395 (check only one)							
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$							
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add				on for the purpose of soliciting contributions							
\sum	NAME OF COMMITTEE (In Full)										
\geq	New York Life Insurance Company Polit	ical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Mr. John Breedlove			Date of Receipt							
	Mailing Address 1227 Fisher			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1629274							
	Tyler	ТХ	75701-6929	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		156.00							
	Name of Employer New York Life Insurance	Occupation Agent	1								
	Company Receipt For:	, v	Year-to-Date V	_							
	Primary General	33 - 3		P/R Deduction (\$26.00 Mon-							
	Other (specify)	0 0	312.00	thly)							
В.	Full Name (Last, First, Middle Initial) Mr. Robert McKinley			Date of Receipt							
	Mailing Address 1277 Treat Boulevard Su	uite 600		M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1630274							
	Walnut Creek	CA	94597-7929	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		507.00							
	Name of Employer New York Life Insurance	Occupation	n ce President - Pacific Agenc								
	Company Receipt For:		Year-to-Date V								
	Primary General			P/R Deduction (\$39.00 Bi-							
	Other (specify)	0 0	986.00	Weekly)							
с.	Full Name (Last, First, Middle Initial) Mr. Lalit Jallan			Date of Receipt							
	Mailing Address 2114 Castleheath Court			M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR1631274							
	Katy	TX	77450-6072	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		325.00							
	Name of Employer New York Life Insurance	Occupatior Partner	1								
	Company Receipt For:		Year-to-Date V	_							
	Primary General	Aggregate		P/R Deduction (\$25.00 Bi-							
	Other (specify)	0 0	650.00	Weekly)							
s	UBTOTAL of Receipts This Page (optional)			988.00							
т	OTAL This Period (last page this line number or	ıly)									

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 85 / 395 (check only one)						
Π	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12						
A	v information copied from such Reports and Sta	tomonto moi		13 14 15 16 17						
	for commercial purposes, other than using the n									
\sum	NAME OF COMMITTEE (In Full)									
\mathbb{Z}	New York Life Insurance Company Polit									
Α.	Full Name (Last, First, Middle Initial) Ms. Louise Hobbs			Date of Receipt						
	Mailing Address 1444 Oak Grove Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1633274						
	Fort Worth	ТХ	76134-2354	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			150.00						
	Name of Employer New York Life Insurance	Occupation	1							
	Company Receipt For:	Agent	Year-to-Date V	_						
	Primary General	Aggregate		P/R Deduction (\$25.00 Mon-						
	Other (specify)	0 0	300.00	thly)						
в.	Full Name (Last, First, Middle Initial) Ms. Aurora Saenz			Date of Receipt						
	Mailing Address 2002 S Westgate Drive			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1640274						
	Weslaco	TX	78596-9310	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		499.98						
	Name of Employer New York Life Insurance	Occupation	1							
	Company Receipt For:	Agent	Year-to-Date V	-						
	Primary General	, iggi oguio		P/R Deduction (\$83.33 Mon-						
	Other (specify)	0 0	999.96	thly)						
C.	Full Name (Last, First, Middle Initial) Ms. Yuka Nakahara-Goven			Date of Receipt						
	Mailing Address 1209 Magnolia Drive			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1648274						
	Carrollton	TX	75007-4852	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		126.00						
	Name of Employer New York Life Insurance	Occupation	1							
	Company Receipt For:	Agent Aggregate	Year-to-Date V	-1						
	Primary General Other (specify) ▼		204.00	P/R Deduction (\$25.00 Mon- thly)						
Γ				775.00						
s	UBTOTAL of Receipts This Page (optional)		••••••	775.98						
Т	OTAL This Period (last page this line number or	nly)								

	CHEDULE A (FEC Form 3X)	Use separate schedule(s)		FOR LINE NUMBER: PAGE 86 / 395 (check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page		$\begin{array}{c c c c c c c c c c c c c c c c c c c $
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit			
Α.	Full Name (Last, First, Middle Initial) Mr. Maximo C. Muniz, Jr.			Date of Receipt
	Mailing Address 171 Hillside Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1654274
	Milford	CT	06460-7811	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance Company	Occupation		-
	Receipt For:	Aggregate	Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Joe Still			Date of Receipt
	Mailing Address 3717 Raguet Street			M · M / D · D / Y · Y · Y · Y
	City	State	Zip Code	Transaction ID: PR1658274
	Nacogdoches	TX	75965-2511	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		180.00
	Name of Employer New York Life Insurance Company	Occupation Agent	1	
	Receipt For:	l v	Year-to-Date V	_
	Primary General Other (specify) ▼	0 0	360.00	P/R Deduction (\$30.00 Mon- thly)
<u></u>	Full Name (Last, First, Middle Initial) Ms. Karen Watson			Date of Receipt
-	Mailing Address 3301 Riverway Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1659274
	Fort Worth	TX	76116-9561	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		170.84
	Name of Employer New York Life Insurance Company	Occupation Agent	1	
	Receipt For:		Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	233.36	P/R Deduction (\$10.42 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		······	480.84
\vdash	OTAL This Period (last page this line number or			-

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 395 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Polit			
Α.	Full Name (Last, First, Middle Initial) Ms. Elizabeth S. Gonzales			Date of Receipt
	Mailing Address 10309 Yellowstone Drive	e		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1667274
	Austin	ТХ	78747-3947	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupatio	n	
	Company	Agent	Veer te Dete 🖛	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	P/R Deduction (\$50.00 Mon-
	Other (specify)	0 0	600.00	thly)
в.	Full Name (Last, First, Middle Initial)			Data of Dessint
Б.	Mr. Michael D. Burson Mailing Address 22 Canterbury Lane			Date of Receipt
	City	State	Zip Code	Transaction ID: PR1668274
	Sandy Hook	CT	06482-1583	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		195.00
	Name of Employer New York Life Insurance	Occupatio		
	Company Receipt For:		e President e Year-to-Date ▼	
	Primary General Other (specify)		390.00	P/R Deduction (\$15.00 Bi- Weekly)
<u></u>	Full Name (Last, First, Middle Initial) Mr. Kevin R. Garman			Date of Receipt
	Mailing Address 5012 Avenue Avignon			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1673274
	Lutz	FL	33558-2825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		325.00
	Name of Employer New York Life Insurance	Occupatio		
	Company Receipt For:		g Partner e Year-to-Date ▼	_
	Primary General Other (specify)		650.00	P/R Deduction (\$25.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		······	820.00
	OTAL This Period (last page this line number or			

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 88 / 395					
ΙТ	EMIZED RECEIPTS		or each category of the	(check only one)					
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	y not be sold or used by any perso	n for the purpose of soliciting contributions					
			ress of any political committee to	solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
\square	New York Life Insurance Company Polit								
A.	Full Name (Last, First, Middle Initial) Mr. David M. Humbert			Date of Receipt					
	Mailing Address 6802 Canon Wren Drive			M · M / D · D / Y · Y · Y · Y					
	City	State	Zip Code	Transaction ID: PR1674274					
	Austin	TX	78746-3803	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		520.00					
	Name of Employer New York Life Insurance	Occupation	1	-					
	New York Life Insurance Company	Managing	g Partner						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	1040.00	P/R Deduction (\$40.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Rick Still			Date of Receipt					
	Mailing Address 3803 Buckingham			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1679274					
	Nacogdoches	ТХ	75965-5874	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent							
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)					
с.	Full Name (Last, First, Middle Initial) Mr. Paul B. Morris			Date of Receipt					
	Mailing Address 351 E 51st Street								
	City	State	Zip Code	Transaction ID: PR1681274					
	New York	NY	10022-6702	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.11					
	Name of Employer New York Life Insurance Company	Occupation Agent	1						
	Company		Year-to-Date 🔻	1					
	Primary General Other (specify) ▼		1000.22	P/R Deduction (\$38.47 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)		•••••	1176.11					
Т	TOTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 89 / 395 (check only one)
			Detailed Summary Page	X 11a 11b 11c 12
A				13 14 15 16 17
or	ny information copied from such Reports and Sta for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Pol	itical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Bill Solomon			Date of Receipt
	Mailing Address 13311 Glenwyck			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1685274
	Houston	TX	77045-3317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer O		า	
	New York Life Insurance Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		250.00	P/R Deduction (\$125.00 Mo- nthly)
в.	Full Name (Last, First, Middle Initial) Mr. Thomas Wesley Robinson, Jr.			Date of Receipt
	Mailing Address 12131 Broken Bough			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1690274
	Houston	TX	77024-4253	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		499.98
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	l v	Year-to-Date 🔻	—
	Primary General		000.00	P/R Deduction (\$83.33 Mon-
	Other (specify) 🔻	0 0	999.96	thly)
c.	Full Name (Last, First, Middle Initial) Mr. Steve Maus			Date of Receipt
	Mailing Address 4821 Augusta Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1702274
	Frisco	TX	75034-6841	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.04
	Name of Employer New York Life Insurance	Occupation	า	7
	Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼		1000.08	P/R Deduction (\$83.34 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			1250.02
\vdash				-
Т	OTAL This Period (last page this line number of	only)		

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 90 / 395						
· · ·		Use separate schedule(s) or each category of the		(check only one)						
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
_				13 14 15 16 17						
Ar or	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)									
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Mr. Richard H. Eppink, Jr.		Date of Receipt							
	Mailing Address 5079 Jasmine Way			M · M / D · D / Y · Y · Y · Y						
	City	State	Zip Code	Transaction ID: PR170274						
	Palm Harbor	FL	34685-5604	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		130.00						
	Name of Employer New York Life Insurance	Occupation	1							
	Company	Vice Pres	sident							
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)						
В.	Full Name (Last, First, Middle Initial) Mr. A. C. Tracy Wood, III			Date of Receipt						
	Mailing Address PO Box 12425			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1703274						
	Dallas	TX	75225-0425	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		499.98						
	Name of Employer New York Life Insurance	Occupation	1	7						
	Company	Agent	Maanda Data 🗮							
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻							
	Other (specify) ▼	0 0	999.96	P/R Deduction (\$83.33 Mon- thly)						
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Gilberto S. Pena			Date of Receipt						
	Mailing Address PO Box 8127			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR1706274						
	Weslaco	TX	78599-8127	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		156.00						
	Name of Employer New York Life Insurance	Occupation	1	7						
	Company	Agent								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)						
s	UBTOTAL of Receipts This Page (optional)		••••••	785.98						
Т	OTAL This Period (last page this line number or	ıly)	· · · ·							

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 395 (check only one)
			Detailed Currindiy Fage	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	rot be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
<u>,</u>	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Polit			
Α.	Full Name (Last, First, Middle Initial) Mr. Marcus J. Ham			Date of Receipt
	Mailing Address 8713 Maple Hollow Cou	rt		M • M / D • D / Y • Y • Y
	City	State	Zip Code	Transaction ID: PR1708274
	Granite Bay	CA	95746-6158	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		520.00
	Company		n	-
			g Partner	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	1040.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial)			Detection
в.	Ms. Patricia A. Doss Mailing Address 23717 Rockrose Drive			Date of Receipt
	City	State	Zip Code	Transaction ID: PR1709274
	Golden	CO	80401-9185	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.50
	Name of Employer New York Life Insurance	Occupation		
	Company	Managing	0	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	1001.00	P/R Deduction (\$38.50 Bi- Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Robert L. Barrett, Jr.			Date of Receipt
	Mailing Address 6916 Rabbit Creek Road	b		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1713274
	Anchorage	AK	99516-3737	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	n	7
	Company	Agent		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		······	1170.50
	OTAL This Period (last page this line number or			-

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 92/395	
· · · ·		Use separate schedule(s) or each category of the		(check only one)	
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12	
				13 14 15 16 17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
\mathbb{N}	NAME OF COMMITTEE (In Full)				
	New York Life Insurance Company Polit	ical Action	Committee		
A.	Full Name (Last, First, Middle Initial) Mr. Thomas D. Hegna			Date of Receipt	
	Mailing Address 16931 E Jacklin Drive			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR1716274	
	Fountain Hills	AZ	85268-5446	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		322.09	
	Name of Employer New York Life Insurance	Occupation			
	Company Receipt For:		Year-to-Date V	-	
	Primary General			P/R Deduction (\$38.47 Bi-	
	Other (specify)	0 0	387.09	Weekly)	
В.	Full Name (Last, First, Middle Initial) Mr. Ronald Karkela			Date of Receipt	
	Mailing Address 7214 Maple Lane			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR1720274	
	Horace	ND	58047-4711	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		325.00	
	Name of Employer New York Life Insurance Company	Occupation Managing			
	Receipt For:		e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)	
<u></u>	Full Name (Last, First, Middle Initial) Ms. Mangala K. Pai-Panandiker			Date of Receipt	
	Mailing Address 19425 Vineridge Road				
	City	State	Zip Code	Transaction ID: PR1722274	
	Excelsior	MN	55331-9173	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.04	
	Name of Employer New York Life Insurance	Occupation Agent	1		
	Company Receipt For:		Year-to-Date 🔻	-1	
	Primary General Other (specify) ▼		1375.08	P/R Deduction (\$83.34 Mon- thly)	
				1147.13	
\vdash	UBTOTAL of Receipts This Page (optional)		r		
т	OTAL This Period (last page this line number or	nly)			

50	CHEDULE A (FEC Form 3X)	[FOR LINE NUMBER: PAGE 93 / 395				
	ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)				
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)								
\rangle	New York Life Insurance Company Polit	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Jim Johnson			Date of Receipt				
	Mailing Address 1635 Cliff Avenue			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1726274				
	Duluth	MN	55811-2101	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		600.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	, v	Year-to-Date V	_				
	Primary General			P/R Deduction (\$100.00 Mo-				
	Other (specify)	0 0	1200.00	nthly)				
в.	Full Name (Last, First, Middle Initial) Mr. Paul Joseph Kageleiry			Date of Receipt				
	Mailing Address 35 Isaac Lucas Circle			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR17274				
	Dover	NH	03820-4915	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		120.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent						
	Receipt For: Primary General	Aggregate	Year-to-Date V					
	Other (specify) ▼	0 0	240.00	P/R Deduction (\$20.00 Mon- thly)				
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Terry K. Lewis			Date of Receipt				
	Mailing Address 5612 Dale Avenue			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1734274				
	Edina	MN	55436-2469	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		285.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent						
	Receipt For:	Aggregate	Year-to-Date V					
	Other (specify) ▼	0 0	375.00	P/R Deduction (\$80.00 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)		······	1005.00				
	OTAL This Period (last page this line number or			-				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 94 / 395 (check only one)					
IT	EMIZED RECEIPTS	or each category of the		X 11a 11b 11c 12					
			Detailed Summary Page						
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
\rangle	New York Life Insurance Company Poli	tical Action	Committee						
Á.	Full Name (Last, First, Middle Initial) Mr. Lanny N. Kuehl			Date of Receipt					
	Mailing Address Box 166			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1737274					
	Garnavillo	IA	52049-0166	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		120.00					
	Name of Employer New York Life Insurance		1						
	Company Receipt For:	Agent Aggregate	Year-to-Date 🔻						
	Primary General			P/R Deduction (\$20.00 Mon-					
	Other (specify)	0 0	240.00	thly)					
в.	Full Name (Last, First, Middle Initial) Ms. Martha Olmstead			Date of Receipt					
	Mailing Address 56 Divisadero			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1739274					
	San Francisco	CA	94117-3211	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		180.00					
	Name of Employer New York Life Insurance	Occupation Agent	ı						
	Company Receipt For:	l v	Year-to-Date 🔻	_					
	Primary General		260.00	P/R Deduction (\$30.00 Mon-					
	Other (specify)	0 0	360.00	thly)					
C.	Full Name (Last, First, Middle Initial) Mr. Craig Roslien			Date of Receipt					
	Mailing Address 4210 Queens Way			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1742274					
	Minnetonka	MN	55345-3033	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		240.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent		_					
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼						
	Other (specify) ▼		480.00	P/R Deduction (\$40.00 Mon- thly)					
s	LUBTOTAL of Receipts This Page (optional)			540.00					
Ĕ									
Т	TOTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 95/395 (check only one) X 11a 11b 11c 12			
			Detailed Summary Page				
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
Ν	NAME OF COMMITTEE (In Full)						
\mathbb{Z}	New York Life Insurance Company Polit						
Α.	Full Name (Last, First, Middle Initial) Mr. Jules Epstein			Date of Receipt			
	Mailing Address 2404 Northwest 63rd St	reet		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR174274			
	Boca Raton	FL	33496-3626	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		120.00			
	Name of Employer New York Life Insurance	Occupation	n				
	Company Receipt For:	Agent	e Year-to-Date ▼	_			
	Primary General	Ayyreyate		P/R Deduction (\$20.00 Mon-			
	Other (specify)	0 0	240.00	thly)			
в.	Full Name (Last, First, Middle Initial) Mr. Dennis J. Bell			Date of Receipt			
	Mailing Address 10576 Sunset Terrace			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR1757274			
	Clive	IA	50325-6554	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		480.00			
	Name of Employer New York Life Insurance	Occupation	n	-			
	Company Receipt For:	Agent	e Year-to-Date 🔻	-			
	Primary General Other (specify) ▼		960.00	P/R Deduction (\$80.00 Mon- thly)			
	Full Name (Last, First, Middle Initial) Mr. Gregory D. Jensen			Date of Receipt			
	Mailing Address 16850 Berkshire Court						
	City	State	Zip Code	Transaction ID: PR1760274			
	Sw Ranches	FL	33331-1332	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.11			
	Name of Employer New York Life Insurance	Occupation					
	Company		g Partner e Year-to-Date ▼	-1			
	Primary General Other (specify) ▼		1000.22	P/R Deduction (\$38.47 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)			1100.11			
			· · · · · · · · · · · · · · · · · · ·	-			
י ۱	TOTAL This Period (last page this line number only)						

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 / 395 (check only one) X X 11a
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	v not be sold or used by any perso	13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee
	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Polit	ical Action	Committee	
,́А.	Full Name (Last, First, Middle Initial) Ms. Linda L. Silver			Date of Receipt
	Mailing Address 4415 State Street Apt. 2			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1767274
	Bettendorf	IA	52722-6328	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupatio	า	
	Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	 Primary General Other (specify) ▼ 	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Brad L. Willson			Date of Receipt
	Mailing Address 4905 Elm Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1768274
	Bellaire	ТХ	77401-2810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer New York Life Insurance	Occupatio	1	
	Company	Managin		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	520.00	P/R Deduction (\$20.00 Bi- Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Howard Blank			Date of Receipt
	Mailing Address 68 E 86th Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR177274
	New York	NY	10028-1012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer New York Life Insurance Company	Occupation Agent		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		·····	566.00
	OTAL This Period (last page this line number or			-

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 97/395
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Clinton R. Vance			Date of Receipt
	Mailing Address 342 Sweetwater Drive PO Box 1804			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1781274
	Lake Ozark	MO	65049-1804	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	Ŭ	Year-to-Date 🔻	_
	Primary General		300.00	P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0		thly)
В.	Full Name (Last, First, Middle Initial) Mr. Glen Jones			Date of Receipt
	Mailing Address 4312 Shiloh Trace			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1787274
	Valdosta	GA	31602-2393	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	<u> </u>	Year-to-Date 🔻	_
	Primary General			P/R Deduction (\$26.00 Mon-
	Other (specify)	0 0	312.00	thly)
с.	Full Name (Last, First, Middle Initial) Mr. Troy G. Braswell			Date of Receipt
	Mailing Address 16843 Hghld Ridge Drive	e		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1790274
	Belton	MO	64012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		507.00
	Name of Employer New York Life Insurance	Occupation		
	Company	Managing	J	
	Receipt For: A		e Year-to-Date ▼	_
	Other (specify)	0 0	916.00	P/R Deduction (\$39.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		······	813.00
	OTAL This Period (last page this line number or			-
1 .		,,		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 98 / 395	
IT	EMIZED RECEIPTS	or each category of the		(check only one)	
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
Δr	y information copied from such Reports and Stat	tements may	not be sold or used by any perso		
or	for commercial purposes, other than using the na	ame and add	lress of any political committee to	solicit contributions from such committee.	
Ν	NAME OF COMMITTEE (In Full)				
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee		
Α.	Full Name (Last, First, Middle Initial) Mr. Galen D. Dody			Date of Receipt	
	Mailing Address 501 David Drive			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR1793274	
	Clinton	MO	64735-1948	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		186.00	
	Name of Employer New York Life Insurance	Occupatior Agent	1		
	Company Receipt For:		Year-to-Date V		
	Primary General	7.99.094.0		P/R Deduction (\$31.00 Mon-	
	Other (specify)	0 0	372.00	thly)	
в.	Full Name (Last, First, Middle Initial) Mr. David A. Lyons			Date of Receipt	
	Mailing Address 405 Barrett Road			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR1804274	
	Lawrence	NY	11559-2702	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		150.00	
	Name of Employer New York Life Insurance	Occupatior Agent	1		
	Company Receipt For:	Ŭ	Year-to-Date 🔻	—	
	Primary General			P/R Deduction (\$25.00 Mon-	
	Other (specify) v		300.00	thly)	
с.	Full Name (Last, First, Middle Initial) Mr. Richard Neameyer			Date of Receipt	
	Mailing Address 500 Jackson Avenue E PO Box 707			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR1812274	
	Lisbon	ND	58054-0707	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		120.00	
	Name of Employer New York Life Insurance	Occupation	1	7	
	Company	Agent			
	Receipt For:	Aggregate	Year-to-Date 🔻	_	
	Primary General Other (specify) ▼	0 0	240.00	P/R Deduction (\$20.00 Mon- thly)	
s	UBTOTAL of Receipts This Page (optional)		·····	456.00	
	OTAL This Period (last page this line number or				
1 1		• · · · · · · · · · · · · · · · · · · ·			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 99 / 395 (check only one)					
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12					
			Detailed Summary Page						
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.					
\sum	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Poli	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. James J. Cronin			Date of Receipt					
	Mailing Address 2604 W Nicole Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1818274					
	Sioux Falls	SD	57105-3330	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation Agent	n						
	Company Receipt For:		e Year-to-Date 🔻						
	Primary General			P/R Deduction (\$25.00 Mon-					
	Other (specify)	0 0	300.00	thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Joel P. Blanchard			Date of Receipt					
	Mailing Address 5608 S Deer Park Drive	•		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1822274					
	Sioux Falls	SD	57108-2013	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		520.00					
	Name of Employer New York Life Insurance	Occupation Managing							
	Company Receipt For:		e Year-to-Date V						
	Primary General	, iggi oguto		P/R Deduction (\$40.00 Bi-					
	Other (specify) v	0 0	1040.00	Weekly)					
с.	Full Name (Last, First, Middle Initial) Mr. Greg Blanchard Clu Chfc			Date of Receipt					
	Mailing Address 4720 W 127th Place			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1823274					
	Broomfield	CO	80020-5737	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.04					
	Name of Employer New York Life Insurance	Occupation	n						
	Company	Agent		_					
	Receipt For:		e Year-to-Date ▼						
	Other (specify) ▼	0 0	1000.06	P/R Deduction (\$83.34 Mon- thly)					
s	LUBTOTAL of Receipts This Page (optional)		······	1170.04					
F			•••••••						
Т	TOTAL This Period (last page this line number only)								

S	CHEDULE A (FEC Form 3X)		· · · · · · · · · · · · · · · · · · ·	FOR LINE NUMBER: PAGE 100 / 395			
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page		(check only one)			
				X 11a 11b 11c 12			
•							
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
$ \rangle$	New York Life Insurance Company Polit	ical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Vern O. Bills			Date of Receipt			
	Mailing Address 826 National			M M / D D / Y Y Y Y			
	<u></u>	Ctoto	Zin Code				
	City Belle Fourche	State SD	Zip Code 57717-2032	Transaction ID: PR1825274 Amount of Each Receipt this Period			
		C					
	FEC ID number of contributing federal political committee.			300.00			
	Name of Employer New York Life Insurance	Occupation	ı				
	Company	Agent	Veer to Deta	_			
	Receipt For: Primary General	Aggregate	Year-to-Date V				
	Other (specify)		600.00	P/R Deduction (\$50.00 Mon- thly)			
в	Full Name (Last, First, Middle Initial) Mr. Rich Garry			Date of Receipt			
	Mailing Address 805 Batcheller Lane						
	City	State	Zip Code	Transaction ID: PR1829274			
	Sioux Falls	SD	57105-6715	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		630.00			
				_			
	Name of Employer New York Life Insurance	Occupation Agent	1				
	Company Receipt For:	l v	Year-to-Date V	-1			
	Primary General			P/R Deduction (\$115.00 Mo-			
	Other (specify)		1230.00	nthly)			
	Full Name (Last, First, Middle Initial)						
C.	Mr. Steve Garry			Date of Receipt			
	Mailing Address 2600 East Orchard Trail			M · M / D · D / Y · Y · Y · Y			
	City	State	Zip Code	Transaction ID: PR1830274			
	Sioux Falls	SD	57103	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		1000.00			
	federal political committee.						
	Name of Employer New York Life Insurance	Occupation	1	7			
	Company	Agent	<u> </u>				
	Receipt For:		Year-to-Date V				
	Other (specify)		1000.00	P/R Deduction (\$166.67 Mo- nthly)			
_			<u> </u>	1			
	IIBTOTAL of Receipte This Page (antional)			1930.00			
P	UBTOTAL of Receipts This Page (optional)		••••••				
Т	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 101 / 395				
	EMIZED RECEIPTS		or each category of the	(check only one)				
			Detailed Summary Page					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Polit	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Joe Vlock			Date of Receipt				
	Mailing Address 3505 South 161 Street			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR1834274				
	Omaha	NE	68130-2134	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		300.00				
	Name of Employer New York Life Insurance	Occupation Agent	1	-				
	Company Receipt For:	, v	Year-to-Date V	_				
	Primary General Other (specify) ▼	0 0	500.00 P/R Deduction (\$500.00 Mo- nthly)					
В.	Full Name (Last, First, Middle Initial) Mr. Roger H. Morris			Date of Receipt				
	Mailing Address 2101 N Westwood Aven	iue						
	City	State	Zip Code	Transaction ID: PR1839274				
	Santa Ana	CA 92706-1943		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		480.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	<u> </u>	Year-to-Date V	_				
	Primary General Other (specify) ▼	0 0	960.00	P/R Deduction (\$80.00 Mon- thly)				
	Full Name (Last, First, Middle Initial) Mr. Edwin T. Underwood			Date of Receipt				
2.	Mailing Address 1921 Orchard Drive							
	City	State	Zip Code	Transaction ID: PR1845274				
	Denver	CO	80221-7730	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		110.16				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company		<u> </u>					
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻					
	Other (specify)	0 0	220.32	P/R Deduction (\$18.36 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)			890.16				
т	TOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 102 / 395 (check only one)						
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12					
			Detailed Summary Faye						
	y information copied from such Reports and Sta for commercial purposes, other than using the n								
Ν	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee						
A.	Full Name (Last, First, Middle Initial) Mr. Mike Norman			Date of Receipt					
	Mailing Address 5977 Blue Hills Court			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1846274					
	Reno	NV	89502-8708	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			300.00					
	Name of Employer New York Life Insurance	Occupation	ו	_					
	Company	Agent							
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Mark E. Holm			Date of Receipt					
	Mailing Address 482 Cross Road			M M / D D / Y Y Y Y					
	City		Zip Code	Transaction ID: PR1848274					
	Gurnee	IL	60031-3252	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		62.53					
	Name of Employer New York Life Insurance	Occupation							
	Company	Ltc Zone							
	Receipt For: Primary General	Aggregate	Year-to-Date V						
	Other (specify) ▼	0 0	125.39	P/R Deduction (\$4.81 Bi-W- eekly)					
С.	Full Name (Last, First, Middle Initial) Mr. Gary C. Schade			Date of Receipt					
	Mailing Address 9141 Granite Place			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR1852274					
	Anchorage	AK	99503-3946	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation Agent	ו						
	oompany		Year-to-Date V	-					
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)					
6	IRTOTAL of Receipts This Page (optional)			512.53					
	SUBTOTAL of Receipts This Page (optional) 512.00 TOTAL This Period (last page this line number only) •								

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 103 / 395 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions
$\left[\right]$	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Politi	cal Action	Committee	_
A.	Full Name (Last, First, Middle Initial) Mr. Shane M. Swanson			Date of Receipt
	Mailing Address 316 E Ranney Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1855274
	Vernon Hills	IL	60061-4132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer New York Life Insurance	Occupation		-
	Company	Managing	•	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	0 0	1300.00	P/R Deduction (\$50.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. John R. Meyer			Date of Receipt
	Mailing Address 996 Stafford Avenue			M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR186274
	Staten Island	NY	10309-2110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		302.38
	Name of Employer New York Life Insurance	Occupation	ו	
	Company	Svp	Veer te Dete	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D Deduction (#02.00 Di
	Other (specify)	0 0	604.76	P/R Deduction (\$23.26 Bi- Weekly)
С.	Full Name (Last, First, Middle Initial) Mr. Larry Buckner			Date of Receipt
	Mailing Address 4545 Circleview Bouleva	rd		M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR1864274
	Los Angeles	CA	90043-1151	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	U.S.	Year-to-Date V	-
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			1102.38
T	OTAL This Period (last page this line number on	ly)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 104 / 395 (check only one)			
ITEMIZED RECEIPTS			Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $		
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
\sum	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	New York Life Insurance Company Politi	cal Action	Committee			
A.	Full Name (Last, First, Middle Initial) Mr. Guy Richardson			Date of Receipt		
	Mailing Address 1151 Southwest Mission	Avenue		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1866274		
	Topeka	KS	66604-1856	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Occupation			210.00		
			n			
	Company Receipt For:	Agent Aggregate	e Year-to-Date 🔻	-		
	Primary General Other (specify)		420.00	P/R Deduction (\$35.00 Mon- thly)		
в.	Full Name (Last, First, Middle Initial) Mr. Royse J. Huff			Date of Receipt		
	Mailing Address 506 Fairway Place			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1867274		
	Fairfield	IA	52556-3630	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.04		
	Name of Employer New York Life Insurance	Occupation	n			
	Company Receipt For:	Agent Aggregate	e Year-to-Date 🔻	-		
	Primary General Other (specify) ▼		1000.08	P/R Deduction (\$83.34 Mon- thly)		
<u></u>	Full Name (Last, First, Middle Initial) Mr. R. Greg Scott			Date of Receipt		
	Mailing Address 1441 Southwest Campbe	ell		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1874274		
	Topeka	KS	66604-2657	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		150.00		
	Name of Employer New York Life Insurance	Occupation Agent	n			
	Company		e Year-to-Date V	-		
	Primary General Other (specify) \blacksquare		300.00	P/R Deduction (\$25.00 Mon- thly)		
s	UBTOTAL of Receipts This Page (optional)			860.04		
				-		
11	TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 105 / 395 (check only one)		
11	EMIZED RECEIPTS		Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions		
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Pol	itical Action	Committee			
<u>∠</u>	Full Name (Last, First, Middle Initial) Mr. O. Lee Elrick, Jr.			Date of Receipt		
	Mailing Address 1440 N Gatewood #51			M M / D D / Y Y Y Y		
	City Wichita	State KS	Zip Code	Transaction ID: PR1884274		
	FEC ID number of contributing federal political committee.	C	67206-1253	Amount of Each Receipt this Period 180.00		
	Name of Employer New York Life Insurance	Occupation Agent	n			
	Company Receipt For:		e Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	360.00	P/R Deduction (\$30.00 Mon- thly)		
в.	Full Name (Last, First, Middle Initial) Mr. C. L. Meigs			Date of Receipt		
	Mailing Address 20040 Southeast Grand	dvw Avenue	9	M M / D D / Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1887274		
	Pratt	KS	67124-2706	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		184.00		
	Name of Employer New York Life Insurance	Occupation Agent	n			
	Company Receipt For:	U U	e Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	340.00	P/R Deduction (\$40.00 Mon- thly)		
с.	Full Name (Last, First, Middle Initial) Mr. Rakesh Bansal			Date of Receipt		
	Mailing Address 5 Rutledge Court			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR189274		
	Plainsboro	NJ	08536-2307	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		399.99		
	Name of Employer New York Life Insurance	Occupation Agent	n			
	Company Receipt For:		e Year-to-Date 🔻			
	Primary General Other (specify) ▼		699.99	P/R Deduction (\$83.33 Mon- thly)		
s	UBTOTAL of Receipts This Page (optional)		·····	763.99		
	OTAL This Period (last page this line number of			-		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 106 / 395
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
•			and the rest of some states and the	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	New York Life Insurance Company Polit	ical Action	Committee	
	Full Name (Last, First, Middle Initial)			
Α.	Mr. John P. Schwan			Date of Receipt
	Mailing Address 1320 N Arch			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1897274
	Aberdeen	SD	57401-2147	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.04
	Name of Employer	Occupation	ı	
	New York Life Insurance	Agent		_
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify) ▼		1000.08	P/R Deduction (\$83.34 Mon- thly)
_		0.0		
R	Full Name (Last, First, Middle Initial) Ms. Janice L. Orton			Date of Receipt
Ъ.	Mailing Address 9032 Maple Hill Drive			
	City	State	Zip Code	Transaction ID: PR1906274
	Boise	ID	83709-0523	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		130.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		rative Manager li e Year-to-Date 🔻	-
	Primary General	Ayyreyale		P/R Deduction (\$10.00 Bi-
	Other (specify) 🔻	00	260.00	Weekly)
				-
C.	Full Name (Last, First, Middle Initial) Mr. Jeff Marsh			Date of Receipt
	Mailing Address 1749 W 15th Avenue			
		01-1	Zin Onde	
	City Torrington	State WY	Zip Code 82240-3706	Transaction ID: PR1917274
			02240-3700	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		499.98
	Name of Employer	Occupation	n	
	Name of Employer New York Life Insurance Company	Agent		
	Receipt For: Aggre		Year-to-Date 🔻	
			999.96	P/R Deduction (\$83.33 Mon-
	Other (specify) v			thly)
s	UBTOTAL of Receipts This Page (optional)			1130.02
		-1.)		
[T	OTAL This Period (last page this line number or	יייי)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 107 / 395 (check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions
Ν	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Frank J. Engraff			Date of Receipt
	Mailing Address 31381 Avenida Madrid			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1919274
	<u>San Juan Capo</u>	CA	92675-5391	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			650.00
	Name of Employer New York Life Insurance Company	Occupation Field Par		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	U U	1300.00	P/R Deduction (\$50.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. David R. Somerville, Jr.			Date of Receipt
	Mailing Address 725 Rosarita			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1926274
	Fullerton	CA	92835-1842	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		207.96
	Name of Employer New York Life Insurance Company	Occupation Agent	1	
	Receipt For:		Year-to-Date V	
	Primary General Other (specify) ▼	0 0	415.92	P/R Deduction (\$34.66 Mon- thly)
<u></u>	Full Name (Last, First, Middle Initial) Mr. Murray Pruetz			Date of Receipt
	Mailing Address 2626 W Walatowa			
	City	State	Zip Code	Transaction ID: PR1932274
	Phoenix	AZ	85041-9626	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of EmployerOccupatNew York Life InsuranceAgentCompanyAggregaReceipt For:Aggrega		1	
			e Year-to-Date 🔻	1
	Primary General Other (specify) ▼	U U U	312.00	P/R Deduction (\$26.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		·····	1013.96
	OTAL This Period (last page this line number or		•	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 108 / 395 (check only one) X 11a 11b 11c 12		
			Detailed Summary Page			
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and ado	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
Ν	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	New York Life Insurance Company Politi					
Α.	Full Name (Last, First, Middle Initial) Mr. James J. Killgore			Date of Receipt		
	Mailing Address 4123 Campus Green Lp			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1933274		
	Lacey	WA	98516-6241	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Company Occupatic Agent			300.00		
			1			
	Company Receipt For:	<u> </u>	Year-to-Date 🔻	_		
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$50.00 Mon- thly)		
В.	Full Name (Last, First, Middle Initial) Mr. Scott Maycock			Date of Receipt		
	Mailing Address 359 County Road 250			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1934274		
	Durango	CO	81301-6976	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		300.00		
	Name of Employer New York Life Insurance Company	Occupation Agent	1			
	Receipt For:	Aggregate	Year-to-Date 🔻	_		
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$50.00 Mon- thly)		
с.	Full Name (Last, First, Middle Initial) Mr. Joseph L. Tigert			Date of Receipt		
	Mailing Address 8620 Brentmoor Street			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1943274		
	Wichita	KS	67206-2404	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		507.00		
	Name of Employer New York Life Insurance Company	Occupation Managing				
	Receipt For:		Year-to-Date V	1		
	Primary General Other (specify) ▼	0 0	1014.00	P/R Deduction (\$39.00 Bi- Weekly)		
s	UBTOTAL of Receipts This Page (optional)			1107.00		
	OTAL This Period (last page this line number on			-		
S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 109/395		
---------------------	------------------------------------------------------------------------------------------------	---------------------	----------------------------------	------------------------------------------------		
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12		
			Detailed Summary Page			
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions		
$\overline{\nabla}$	NAME OF COMMITTEE (In Full)		,			
\rangle	New York Life Insurance Company Polit	ical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Ms. Kap-Sun Enders			Date of Receipt		
	Mailing Address 10620 Washington Circl	е		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1950274		
	Anchorage	AK	99515-2505	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		180.00		
	Name of Employer New York Life Insurance	Occupation Agent	1			
	Company Receipt For:	U U	Year-to-Date V			
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$40.00 Mon- thly)		
В.	Full Name (Last, First, Middle Initial) Mr. Steven T. Mindak			Date of Receipt		
	Mailing Address 9290 E Thompson Peak Lot 412	Parkway				
	City	State	Zip Code	Transaction ID: PR1952274		
	Scottsdale	AZ	85255-4514	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		450.00		
	Name of Employer New York Life Insurance	Occupation	1			
	Company Receipt For:	Agent	Year-to-Date ▼			
	Primary General	Ayyreyale		P/R Deduction (\$100.00 Mo-		
	Other (specify)	0 0	750.00	nthly)		
C.	Full Name (Last, First, Middle Initial) Ms. Carrie L. Hall			Date of Receipt		
	Mailing Address 4545 E Exeter Boulevard	b		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1953274		
	Phoenix	AZ	85018-2813	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		480.00		
	Name of Employer New York Life Insurance	Occupation	1			
	Company Receipt For:	Agent	Year-to-Date V			
	Primary General	riggiogaio		P/R Deduction (\$80.00 Mon-		
	Other (specify)		960.00	thly)		
s	UBTOTAL of Receipts This Page (optional)			1110.00		
т	OTAL This Period (last page this line number or	ıly)				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of or for commercial purposes, other than using the name and address of any political committee to solicit contributions NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial)	from such committee.
New York Life Insurance Company Political Action Committee	·
	·
Full Name (Last, First, Middle Initial)	·
A. Mr. Danny D. Taylor Date of Recei	D D / Y Y Y Y
Mailing Address 3409 S Johnson Street	
City State Zip Code Transaction I	D: PR1958274
Kennewick WA 99337-2482 Amount of Ea	ch Receipt this Period
FEC ID number of contributing federal political committee.	195.00
Name of Employer Occupation New York Life Insurance Field Partner	
Company Field Partner Receipt For: Aggregate Year-to-Date ▼	
	n (\$15.00 Bi-
Full Name (Last, First, Middle Initial) Date of Recei B. Mr. Phillip J. Hildebrand Date of Recei	pt
Mailing Address 12 Windsor Court	D D / Y Y Y Y
City State Zip Code Transaction I	D: PR1959274
Purchase NY 10577-1000 Amount of Ea	ch Receipt this Period
FEC ID number of contributing federal political committee.	473.85
Name of Employer Occupation New York Life Insurance Vice Chairman	
Company Vice Chainman Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ P/R Deductic	on (\$36.45 Bi-
Full Name (Last, First, Middle Initial) C. Mr. Roland Nebeker Date of Recei	pt
) D / Y Y Y Y
City State Zip Code Transaction I	D: PR1963274
Sandy UT 84092-4237 Amount of Ea	ch Receipt this Period
FEC ID number of contributing federal political committee.	100.02
Name of Employer Occupation New York Life Insurance Agent	
Company Agent Receipt For: Aggregate Year-to-Date ▼	
	n (\$16.67 Mon-
SUBTOTAL of Receipts This Page (optional)	768.87
TOTAL This Period (last page this line number only)	

S	CHEDULE A (FEC Form 3X)	[FOR LINE NUMBER: PAGE 111/395
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
Δr	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	13 14 15 16 17
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit	ical Action	Committee	
A.	Full Name (Last, First, Middle Initial) Mr. Stephen H. Holley			Date of Receipt
	Mailing Address 320 N 630 E			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1965274
	American Fork	UT	84003-2006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	Ŭ	Year-to-Date 🔻	-
	Primary General Other (specify) ▼		240.00	P/R Deduction (\$20.00 Mon- thly)
	Full Name (Last, First, Middle Initial)			
В.	Mr. Jan Christensen			Date of Receipt
	Mailing Address 2356 E Bearhills Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1971274
	Draper	UT	84020-9672	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	Name of Employer New York Life Insurance	Occupation	1	_
	Company Receipt For:	Agent	Year-to-Date V	_
	Primary General	, iggi oguto		P/R Deduction (\$50.00 Mon-
	Other (specify)	0 0	420.00	thly)
с.	Full Name (Last, First, Middle Initial) Ms. Donna L. Del Mastro			Date of Receipt
	Mailing Address 610 the Village #306			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1975274
	Redondo Beach	CA	90277-2708	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		207.96
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		415.92	P/R Deduction (\$34.66 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		······	567.96
	OTAL This Period (last page this line number or			-
Ľ.		,,		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 395 (check only one) 11a X 11a 11b 11c 12 10
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\mathbf{n}}$	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Politi	cal Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. John J. De Buono			Date of Receipt
	Mailing Address 1706 Siskiyou Drive			M • M / D • D / Y • Y • Y
	City	State	Zip Code	Transaction ID: PR1976274
	Walnut Creek	CA	94598-2121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		390.00
	Name of Employer New York Life Insurance	Occupation		
	Company		ne Chief Operating Officer	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D Deduction (#20.00 Di
	Other (specify)	0 0	780.00	P/R Deduction (\$30.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. William C. Gallagher			Date of Receipt
	Mailing Address 8991 S Cobble Canyon			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1979274
	Sandy	UT	84093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:	Managing	g Partner • Year-to-Date ▼	_
	Primary General	Aggregate		P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Michael J. Wallace			Date of Receipt
	Mailing Address 1654 Wheatgrass Court			M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR1980274
	Reno	NV	89509-6912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	U.S.	Year-to-Date V	_
	Primary General Other (specify) ▼		450.00	P/R Deduction (\$50.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		·····	760.00
\vdash	OTAL This Period (last page this line number on		•	

S	CHEDULE A (FEC Form 3X)	[Use separate schedule(s)	FOR LINE NUMBER: PAGE 113/395
			or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Bill Wallace			Date of Receipt
	Mailing Address 1248 Rose Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1981274
	Lafayette	CA	94549-3032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	Ŭ	Year-to-Date V	_
	Primary General Other (specify) ▼		1000.00	P/R Deduction (\$2000.00 Monthly)
	Full Name (Last, First, Middle Initial)			
В.	Mr. Gary Bacon			Date of Receipt
	Mailing Address 1099 Kentfield Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1984274
	Salinas	CA	93901-1067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupatior	1	
Company		Agent		
	Receipt For: Agg		Year-to-Date V	
	Other (specify)	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)
<u></u>	Full Name (Last, First, Middle Initial) Mr. Bob D. Hall			Date of Receipt
	Mailing Address 2015 Evergreen Court			M • M / D • D / Y • Y • Y
	City	State	Zip Code	Transaction ID: PR1986274
	Yakima	WA	98909-1200	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.04
	Name of Employer New York Life Insurance	Occupation	1	7
	Company	Agent		_
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify)	0 0	1000.08	P/R Deduction (\$83.34 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			1800.04
Т	OTAL This Period (last page this line number or	וy)	· · · · · ·	-

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 114 / 395 (check only one)		
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12	
				13 14 15 16 17	
	y information copied from such Reports and Sta for commercial purposes, other than using the n				
\sum	NAME OF COMMITTEE (In Full)				
	New York Life Insurance Company Polit	ical Action	Committee		
Α.	Full Name (Last, First, Middle Initial) Ms. Claire M. Nagel			Date of Receipt	
	Mailing Address 101 Shore Drive			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR199274	
	North Cape May	NJ	08204-2226	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		156.00	
	Name of Employer New York Life Insurance	Occupation	า		
	Company	Agent			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)	
в.	Full Name (Last, First, Middle Initial) Ms. Freda J. Zimmerman			Date of Receipt	
	Mailing Address 2295 120th Place South	ling Address 2295 120th Place Southeast			
	City	State	Zip Code	Transaction ID: PR1998274	
	Bellevue	WA	98005-4158	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		150.00	
	Name of Employer New York Life Insurance	Occupation	ı		
	Company Receipt For:	Agent	e Year-to-Date ▼	_	
	Primary General	Aggregate		P/R Deduction (\$25.00 Mon-	
	Other (specify)		300.00	thly)	
С.	Full Name (Last, First, Middle Initial) Mr. Warin J. Parker			Date of Receipt	
	Mailing Address 563 Leafhaven			M M / D D / Y Y Y	
	City	State	Zip Code	Transaction ID: PR1999274	
	Windsor	CA	95492-8159	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		150.00	
	Name of Employer New York Life Insurance	Occupation	1	7	
	Company Receipt For:	Agent	e Year-to-Date ▼	_	
	Primary General	, iggi oguio		P/R Deduction (\$25.00 Mon-	
	Other (specify)	0 0	300.00	thly)	
s	UBTOTAL of Receipts This Page (optional)			456.00	
Т	OTAL This Period (last page this line number or	nly)	· · · · · · · · · · · · · · · · · · ·		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115/395 (check only one) 11a X 11a 11b 13 14 15 16
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Stephen G. Bakke			Date of Receipt
	Mailing Address 3865 Welsh Pony Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2005274
	Yorba Linda	CA	92886-7929	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		507.00
	Name of Employer New York Life Insurance	Occupatio		
	Company Receipt For:		g Partner e Year-to-Date ▼	_
	Primary General	Aggregate	e Year-lo-Dale V	D/D Deduction (\$20.00 Bi
	Other (specify)	0 0	916.00	P/R Deduction (\$39.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. R. Michael Bren			Date of Receipt
	Mailing Address 1106 Missouri Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2010274
	Grandview	WA	98930-1409	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		156.00
	Name of Employer New York Life Insurance	Occupation Agent	n	
	Company Receipt For:	U U	e Year-to-Date V	
	Primary General	, iggi oguid		P/R Deduction (\$26.00 Mon-
	Other (specify)	0 0	312.00	thly)
с.	Full Name (Last, First, Middle Initial) Ms. Sharon A. Rockett			Date of Receipt
	Mailing Address 310 6th Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2011274
	Raymond	WA	98577-2503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupation	n	1
	Company Receipt For:	Agent	e Year-to-Date V	
	Primary General Other (specify)		600.00	P/R Deduction (\$50.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			963.00
	OTAL This Period (last page this line number or			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 116 / 395 (check only one)		
ΙТ	EMIZED RECEIPTS		or each category of the			
••			Detailed Summary Page			
Any information copied from such Reports and Stateme				13 14 15 16 17		
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.		
$\left \right\rangle$	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Mr. Melvin J. Feinberg			Date of Receipt		
	Mailing Address 1816 E 5th Street			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR203274		
	Brooklyn	NY	11223-2039	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		260.00		
	Name of Employer New York Life Insurance	Occupation	1	-		
	New York Life Insurance Company	Svp				
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General Other (specify)		520.00	P/R Deduction (\$20.00 Bi- Weekly)		
	Full Name (Last, First, Middle Initial)			-		
В.	Mr. Ralph Y. Morgan			Date of Receipt		
	Mailing Address 660 Dietz Avenue Northe	M · M / D · D / Y · Y · Y · Y				
	City	State	Zip Code	Transaction ID: PR2033274		
	Keizer	OR	97303-4616	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		156.00		
	Name of Employer Occupat New York Life Insurance Agent		1	-		
	Receipt For:	Aggregate	Year-to-Date V			
	Primary General Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)		
<u></u> .	Full Name (Last, First, Middle Initial) Mr. Jack Whitehead			Date of Receipt		
	Mailing Address 20782 Southwest Hillbor	o Hy		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR2035274		
	Newberg	OR	97132-9412	Amount of Each Receipt this Period		
	FEC ID number of contributing			180.00		
	federal political committee.	C				
	Name of Employer New York Life Insurance	Occupation	ı			
	Company	Agent	Veer te Dete	-1		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	360.00	P/R Deduction (\$30.00 Mon- thly)		
	UBTOTAL of Receipts This Page (optional)			596.00		
\vdash						
т	OTAL This Period (last page this line number or	ıly)				

ITEMIZED DECEIDTO	heck only one)
Any information copied from such Reports and Statements may not be sold or used by any person for or for commercial purposes, other than using the name and address of any political committee to solid NAME OF COMMITTEE (In Full)	
or for commercial purposes, other than using the name and address of any political committee to solic NAME OF COMMITTEE (In Full)	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
or for commercial purposes, other than using the name and address of any political committee to solic NAME OF COMMITTEE (In Full)	13 14 15 16 17
	cit contributions from such committee.
> New York Life Insurance Company Political Action Committee	
Full Name (Last, First, Middle Initial) A. Mr. Robert L. Cannon, III	Date of Receipt
Mailing Address 30700 19th Avenue S	M M / D D / Y Y Y Y
City State Zip Code	Transaction ID: PR2039274
Federal Way WA 98003-5103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	433.32
Name of Employer Occupation New York Life Insurance Agent	
Company Agent Receipt For: Aggregate Year-to-Date ▼	
Primary General 733.32	P/R Deduction (\$83.33 Mon-
Other (specify)	thly)
Full Name (Last, First, Middle Initial) B. Mr. Robert J. Fincham, Jr.	Date of Receipt
Mailing Address 19333 Soda Springs Drive	M M / D D / Y Y Y Y
City State Zip Code	Transaction ID: PR2042274
Bend OR 97702-1091	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	499.98
Name of Employer Occupation New York Life Insurance	
Company Agent	
Receipt For: Aggregate Year-to-Date ▼	
	P/R Deduction (\$83.33 Mon- thly)
Full Name (Last, First, Middle Initial) C. Mr. Thomas E. Beck	Date of Receipt
Mailing Address 679 Lincoln Street	M M / D D / Y Y Y Y
City State Zip Code	Transaction ID: PR2044274
Santa Clara CA 95050-5318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	300.00
Name of Employer Occupation New York Life Insurance	
Company Agent	
Receipt For: Aggregate Year-to-Date ▼	
	P/R Deduction (\$50.00 Mon- thly)
SUBTOTAL of Receipts This Page (optional)	1233.30
TOTAL This Period (last page this line number only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 395 (check only one) 11a X 11a 12 14 15 16
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	/ y not be sold or used by any perso dress of any political committee to	13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\nabla}$	NAME OF COMMITTEE (In Full)		,	
\rangle	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Steve Patterson			Date of Receipt
	Mailing Address 3229 Southwest Mawcre	est Place		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2045274
	Gresham	OR	97080	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	D/D Deduction (#05.00 Man
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Nathan E. Engstrom			Date of Receipt
	Mailing Address 17140 Southwest HIsbo	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR2047274
	Sherwood	OR	97140-8622	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company Receipt For:	Agent	e Year-to-Date ▼	_
	Primary General	Ayyreyale		P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0	300.00	thly)
с.	Full Name (Last, First, Middle Initial) Ms. Victoria Simmaly			Date of Receipt
	Mailing Address 235 Flournoy Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2053274
	San Franisco	CA	94112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company Receipt For:	Agent	e Year-to-Date V	_
	Primary General Other (specify) ▼		312.00	P/R Deduction (\$26.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		·····	456.00
	OTAL This Period (last page this line number or			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 119 / 395 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
•				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
$\left[\right]$	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Timothy D. Crumbaker			Date of Receipt
	Mailing Address 5051 Lomas Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2057274
	Rch Cucamonga	CA	91737-1542	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation Managing		
	Company Receipt For:		e Year-to-Date ▼	_
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Yoshio Kinjo			Date of Receipt
	Mailing Address 241 S Peralta Hills Drive	e	M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR2060274
	Anaheim	CA	92807-3425	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		499.98
	Name of Employer New York Life Insurance	Occupatio	n	
	Company		e Year-to-Date V	
	Primary General	Ayyreyale		P/R Deduction (\$83.33 Mon-
	Other (specify)	0 0	999.96	thly)
с.	Full Name (Last, First, Middle Initial) Ms. Michael J. J. Kraft			Date of Receipt
	Mailing Address 59A Saddle Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2066274
	Walnut Creek	CA	94595-2743	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.11
	Name of Employer New York Life Insurance	Occupatio		
	Company Receipt For:	Managin	g Partner e Year-to-Date ▼	
	Primary General	Aggregate		P/R Deduction (\$38.47 Bi-
	Other (specify)	0 0	1000.22	Weekly)
s	UBTOTAL of Receipts This Page (optional)			1130.09
т	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 120 / 395 (check only one)	
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Ν	NAME OF COMMITTEE (In Full)			
\angle	New York Life Insurance Company Politi	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Jack Acomb			Date of Receipt
	Mailing Address 1762 Vista Del Lago			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2067274
	Fallbrook	CA	92028-1748	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		180.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Year-to-Date V	
	Primary General	Ayyreyale		P/R Deduction (\$30.00 Mon-
	Other (specify)	0 0	360.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. John H. Horstmann			Date of Receipt
	Mailing Address 804 Country View Circle	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR2069274
	Fresno	CA	93720-0725	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer New York Life Insurance	Occupation	ו	
	Company Receipt For:	Agent	Year-to-Date V	_
	Primary General	Aggregate		P/R Deduction (\$35.00 Mon-
	Other (specify)	0 0	420.00	thly)
C.	Full Name (Last, First, Middle Initial) Ms. Katherine Huebert			Date of Receipt
	Mailing Address 294 Robinwood Circle			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2070274
	Reedley	CA	93654-2767	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	, ,	Year-to-Date V	-
	Primary General Other (specify) ▼		420.00	P/R Deduction (\$35.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			600.00
Т	OTAL This Period (last page this line number on	ly)	· · · · · · · · · · · · · · · · · · ·	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 395 (check only one) X X 11a 11b 11c
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	not be sold or used by any perso	13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee
$\overline{\nabla}$	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Politi	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Hong N. Pham			Date of Receipt
	Mailing Address 22 Shade Tree			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2072274
	Irvine	CA	92603-0137	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		104.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Voor to Data	_
	Primary General	Ayyreyale	e Year-to-Date ▼	P/P Doduction (\$104.00 Mo
	Other (specify)	0 0	208.00	P/R Deduction (\$104.00 Mo- nthly)
в.	Full Name (Last, First, Middle Initial) Mr. Warren Fendrich			Date of Receipt
	Mailing Address 14721 72nd Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR207274
	Flushing	NY	11367-2545	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		104.00
	Name of Employer New York Life Insurance	Occupation		
	Company		es Analysis Year-to-Date ▼	
	Receipt For: Primary General	Aggregate		P/P Doduction (\$9.00 Pi W/
	Other (specify)	0 0	208.00	P/R Deduction (\$8.00 Bi-W- eekly)
с.	Full Name (Last, First, Middle Initial) Mr. Denis Hollwedel			Date of Receipt
	Mailing Address 12360 Priscilla Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2073274
	Los Altos Hills	CA	94022-5116	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	, v	Year-to-Date V	-
	Primary General Other (specify) ▼		312.00	P/R Deduction (\$26.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		·····	364.00
	OTAL This Period (last page this line number on			

S	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 122/395
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
			Detailed Summary Page	
٨	y information copied from such Reports and Sta	tomonto ma	unot be cold or used by only a series	13 14 15 16 17
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\geq	New York Life Insurance Company Poli	tical Action	Committee	_
Α.	Full Name (Last, First, Middle Initial) Mr. William V. Brody			Date of Receipt
	Mailing Address 19 Corte Miguel			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2078274
	San Rafael	CA	94903-1810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		510.00
	Name of Employer New York Life Insurance	Occupation Agent	n	
	Company Receipt For:		e Year-to-Date 🔻	
	Primary General		1000.000	P/R Deduction (\$85.00 Mon-
	Other (specify)	0 0	1020.00	thly)
В.	Full Name (Last, First, Middle Initial) Mr. Michael C. Hettenbach			Date of Receipt
	Mailing Address 43294 Corte Argento			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2080274
	Temecula	CA	92592-3817	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation		
	Company	Ltc Zone		
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
С.	Full Name (Last, First, Middle Initial) Mr. Stanley F. Goodin			Date of Receipt
	Mailing Address 6117 Carriage Hse Way	/		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2082274
	Reno	NV	89519-7324	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		108.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent		_
	Receipt For:		e Year-to-Date 🔻	
	Other (specify)	0 0	216.00	P/R Deduction (\$18.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	748.00
F				
Т	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 123 / 395 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
\mathbb{N}	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee	
A.	Full Name (Last, First, Middle Initial) Mr. Alan Smith			Date of Receipt
	Mailing Address 12775 Saratga Creek Dr	ive		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2095274
	Saratoga	CA	95070-3540	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Jerry Karr			Date of Receipt
	Mailing Address 7504 Kimberly Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2096274
	Bakersfield	CA	93308-3701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	<u> </u>	
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	D/D Dathertian (\$20.00 Mar
	Other (specify)	0 0	240.00	P/R Deduction (\$20.00 Mon- thly)
С.	Full Name (Last, First, Middle Initial) Mr. Stephen C. Dill			Date of Receipt
	Mailing Address 4082 Prestwick Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2102274
	Palmdale	CA	93551-5381	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:		Year-to-Date V	
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$50.00 Mon- thly)
				576.00
\vdash	UBTOTAL of Receipts This Page (optional)		•	
т	OTAL This Period (last page this line number or	ıly)	Þ	

S	CHEDULE A (FEC Form 3X)		Lipp concrete achartula (a)	FOR LINE NUMBER: PAGE 124 / 395			
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)			
11			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
Ar	y information copied from such Reports and Sta	tements may	not be sold or used by any perso				
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee				
A.	Full Name (Last, First, Middle Initial) Mr. Richard S. Ragus			Date of Receipt			
	Mailing Address 3149 Dragonfly Street			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR2103274			
	Glendale	CA	91206-4802	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		156.00			
	Name of Employer New York Life Insurance	Occupation Agent	1				
	Company Receipt For:	, v	Year-to-Date V	-			
	Primary General		212.00	P/R Deduction (\$26.00 Mon-			
	Other (specify)	0 0	312.00	thly)			
в.	Full Name (Last, First, Middle Initial) Mr. Robert Hinckley Perry			Date of Receipt			
	Mailing Address 1227 E Meadow Ridge F	Road		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR2104274			
	Sandy	UT	84094-5713	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer New York Life Insurance	Occupation	1	7			
	Company	Agent		_			
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻				
	Other (specify) ▼	0 0	500.00	P/R Deduction (\$83.34 Mon- thly)			
<u></u>	Full Name (Last, First, Middle Initial) Mr. Edwin S. Ige			Date of Receipt			
	Mailing Address 1632 S Range Court			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR2111274			
	Diamond Bar	CA	91765-4318	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		207.96			
	Name of Employer New York Life Insurance	Occupation	1				
	Company	Agent		_			
			Year-to-Date V				
	Other (specify)	0 0	415.92	P/R Deduction (\$34.66 Mon- thly)			
s	UBTOTAL of Receipts This Page (optional)		······	863.96			
\vdash	OTAL This Period (last page this line number or						
1		,,					

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 125/395
	· · · ·		Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Politi			
Α.	Full Name (Last, First, Middle Initial) Mr. Seymour Sternberg			Date of Receipt
	Mailing Address 9 Stoneleigh Manor Lane	e		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR211274
	Purchase	NY	10577-2232	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.11
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Chairma	n & Chief Executive Officer	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	1000.22	P/R Deduction (\$38.47 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Robert C Brown			Date of Receipt
	Mailing Address 6414 E Willow	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR2114274
	Long Beach	CA	90815-2317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		104.00
	Name of Employer New York Life Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Agent Aggregate	n e Year-to-Date ▼ 260.00	P/R Deduction (\$26.00 Mon- thly)
	Full Name (Last, First, Middle Initial)			
υ.	Mr. Louis L. Murray, Jr. Mailing Address 71 Manthon Road Apt. 2			Date of Receipt
	And Apl. 2			
	City	State	Zip Code	Transaction ID: PR21144274
	West Roxbury	MA	02132-4426	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		·····•	754.11
Т	OTAL This Period (last page this line number on	ıly)		

S	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 126/395
	EMIZED RECEIPTS	Use separate schedule(s) or each category of the		(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
٨	y information copied from such Reports and Sta	tomonto ma	unot be cold or used by only a series	13 14 15 16 17
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\geq	New York Life Insurance Company Poli	tical Action	Committee	_
Α.	Full Name (Last, First, Middle Initial) Mr. Bill Neville			Date of Receipt
	Mailing Address 62 Cheyenne Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21145274
	Nashua	NH	03063-3527	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation Agent	n	-
	Company Receipt For:		e Year-to-Date 🔻	_
	Primary General	1 1	200.00	P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0	300.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. Peter J. Johnson			Date of Receipt
	Mailing Address 19 Elsom Parkway			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21149274
	South Burlington	VT	05403-6606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	<u> </u>	
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Mr. Dennis M. Chant			Date of Receipt
	Mailing Address 2230 Terraza Place			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2115274
	Fullerton	CA	92835-3312	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent		
			e Year-to-Date ▼	
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	456.00
F				
Т	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 395 (check only one) X X 11a
Ar	y information copied from such Reports and Stat	tements may	not be sold or used by any pers	13 14 15 16 17 on for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	ame and add	lress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politi	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Don Vigliotti			Date of Receipt
	Mailing Address 4 Brandon Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21167274
	Commack	NY	11725-1943	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer New York Life Insurance Company	Occupatior Agent	1	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Narottam Narandas Patel			Date of Receipt
	Mailing Address 10 B Ashwood Mall			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21172274
	Old Bridge	NJ	08857-4517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		400.02
	Name of Employer New York Life Insurance Company	Occupatior Agent	1	
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼	0 0	700.02	P/R Deduction (\$83.34 Mon- thly)
<u>с.</u>	Full Name (Last, First, Middle Initial) Ms. Deborah Lewis			Date of Receipt
	Mailing Address 1300 S Arlington Ridge #314			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21173274
	Arlington	VA	22202-1964	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Veer te Dete	
	Receipt For: Primary General	Aggregale	Year-to-Date V	D/D Deduction (\$25.00 Man
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		······	700.02
т	OTAL This Period (last page this line number on	ıly)		

S	CHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 128 / 395		
	ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)		
11			Detailed Summary Page		X 11a 11b 11c 12		
٨	winformation conied from such Departs and Stat	tomonto mo	unot be cold or used by		13 14 15 16 17		
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	lress of any political co	mmittee to so	olicit contributions from such committee.		
$\overline{\mathbf{N}}$	NAME OF COMMITTEE (In Full)						
\mathbb{Z}	New York Life Insurance Company Politi	ical Action	Committee				
A.	Full Name (Last, First, Middle Initial) Ms. Rosie Franklin				Date of Receipt		
	Mailing Address 7019 Rock Dove Court				M M / D D / Y Y Y Y		
	City	State	Zip Code		Transaction ID: PR21178274		
	Charlotte	NC	28277-1002		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			150.00		
	Name of Employer New York Life Insurance	Occupation	1				
	Company	Agent					
	Receipt For:	Aggregate	Year-to-Date V				
	Primary General Other (specify) ▼	0 0	3	00.00	P/R Deduction (\$25.00 Mon- thly)		
в.	Full Name (Last, First, Middle Initial) Mr. Mark Heinemann				Date of Receipt		
	Mailing Address 1 Hanford Street				M M / D D / Y Y Y Y		
	City	State	Zip Code		Transaction ID: PR21189274		
	Melville	NY	11747-1323		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			150.00		
	Name of Employer New York Life Insurance	Occupation	ו		1		
	Company Receipt For:	Agent	Year-to-Date V		4		
	Primary General	Ayyreyale			P/R Deduction (\$25.00 Mon-		
	Other (specify)	0 0	3	00.00	thly)		
с.	Full Name (Last, First, Middle Initial) Mr. John A. Forte				Date of Receipt		
	Mailing Address 5 York Place				M M / D D / Y Y Y Y		
	City	State	Zip Code		Transaction ID: PR21192274		
	Latham	NY	12110-3135		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			200.00		
	Name of Employer New York Life Insurance	Occupation	1				
	Company				4		
			Year-to-Date 🔻		D/D Doduction (#50.00 Mar		
	Other (specify) T	3	50.00	P/R Deduction (\$50.00 Mon- thly)			
s	UBTOTAL of Receipts This Page (optional)			🕨	500.00		
т	OTAL This Period (last page this line number on	ıly)		<u>.</u>			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 129 / 395 (check only one)
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\langle	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Mitchell R. Owen			Date of Receipt
	Mailing Address 708 Preston Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21193274
	Erdenheim	PA	19038-7327	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation Agent	n	
	Company Receipt For:		e Year-to-Date V	
	Primary General			P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0	300.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. Memo Morantes			Date of Receipt
	Mailing Address 2019 Menalto Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2120274
	Menlo Park	CA	94025-2658	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation Agent	n	
	Company Receipt For:	I V	e Year-to-Date V	
	Primary General			P/R Deduction (\$26.00 Mon-
	Other (specify) v	0 0	312.00	thly)
с.	Full Name (Last, First, Middle Initial) Mr. Ronnie D. Weller			Date of Receipt
	Mailing Address Hc#2 Box 146E			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21213274
	Tionesta	PA	16353-9208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.27
	Name of Employer New York Life Insurance	Occupation	n	7
	Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Other (specify)	0 0	218.79	P/R Deduction (\$41.67 Mon- thly)
6	LUBTOTAL of Receipts This Page (optional)			462.27
F				
Т	OTAL This Period (last page this line number o	nly)		

S	CHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 130 / 395			
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page		(check only one)			
11					X 11a 11b 11c 12			
Δ	winformation applied from such Deserts and Ot-	tomonto mo	not be cold or used but		13 14 15 16 17			
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	Iress of any political com	imittee to so	olicit contributions from such committee.			
$\left \right $	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Richard L. Dietz				Date of Receipt			
	Mailing Address 14 Cardinal Drive				M M / D D / Y Y Y Y			
	City	State	Zip Code		Transaction ID: PR21215274			
	Poughkeepsie	NY	12601-5719		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			120.00			
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent			1			
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Other (specify)	0 0	21(0.00	P/R Deduction (\$25.00 Mon- thly)			
в.	Full Name (Last, First, Middle Initial) Mr. Thomas B. Ryan				Date of Receipt			
	Mailing Address 1303 Moadow Lane				M M / D D / Y Y Y Y			
	City	State	Zip Code		Transaction ID: PR21222274			
	Berwyn	PA	19312-1971		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			150.00			
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	l v	Year-to-Date V		-			
	Primary General			0.00	P/R Deduction (\$25.00 Mon-			
	Other (specify)	0 0	300	0.00	thly)			
C.	Full Name (Last, First, Middle Initial) Mr. John E. Horstmann				Date of Receipt			
	Mailing Address 7684 Kincaid				M M / D D / Y Y Y Y			
	City	State	Zip Code		Transaction ID: PR2122274			
	Fresno	CA	93711-0363		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			540.00			
	Name of Employer New York Life Insurance	Occupation	1					
	<u>Company</u> Agent		Voor to Data 🗮		4			
			Year-to-Date ▼		B/B Doduction (\$00.00 Mar			
	Other (specify)	1080	0.00	P/R Deduction (\$90.00 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)				810.00			
т	OTAL This Period (last page this line number or	חly)		🕨				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 131 / 395 (check only one) (Check only one) X 11a 11b 11c 12
			Detailed Summary Page	
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
$\overline{\mathbf{n}}$	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit	ical Action	n Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. John D. Begley			Date of Receipt
	Mailing Address 108 Summerrules Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR212274
	Clarks Summit	PA	18411-1004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer New York Life Insurance	Occupatio		
	Company Receipt For:	Field Par	rtner e Year-to-Date 🔻	_
	Primary General	Aggrogate		P/R Deduction (\$20.00 Bi-
	Other (specify)	0 0	520.00	Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. John T. Alexander			Date of Receipt
	Mailing Address 372 Baymount Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21234274
	Statesville	NC	28625-9548	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer New York Life Insurance	Occupation Agent	n	
	Company Receipt For:	l v	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼		350.00	P/R Deduction (\$50.00 Mon- thly)
<u> </u>	Full Name (Last, First, Middle Initial) Ms. Nancy Takano			Date of Receipt
0.	Mailing Address 15549 Prairie Way			
	City	State	Zip Code	Transaction ID: PR2124274
	Riverside	CA	92508-8976	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		207.96
	Name of Employer New York Life Insurance	Occupation	n	-
	Company Receipt For:	Agent	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼		415.92	P/R Deduction (\$34.66 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		······	667.96
	OTAL This Period (last page this line number or			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 395 (check only one) 11c X 11a 11b 11c 12
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\mathbf{\nabla}}$	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Politi	cal Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Michael P. Daly			Date of Receipt
	Mailing Address 1426 State Route 125			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21249274
	Hamersville	OH	45130-9509	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		499.98
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Voor to Data	_
	Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$83.33 Mon-
	Other (specify)	0 0	999.96	thly)
в.	Full Name (Last, First, Middle Initial) Mr. Robert Westberg			Date of Receipt
	Mailing Address 300 S Brainard			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21257274
	La Grange	IL	60525-2117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer New York Life Insurance	Occupation	ו	7
	Company Receipt For:	Agent	Year-to-Date ▼	_
	Primary General	Aggregate		P/R Deduction (\$20.00 Mon-
	Other (specify)	0 0	240.00	thly)
с.	Full Name (Last, First, Middle Initial) Mr. David K. Anderson			Date of Receipt
	Mailing Address 920 Milwaukee Avenue Apt.2015			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21262274
	Lubbock	ТХ	79416-5983	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation]
	<u>Company</u> ASSC		e Sales Development Manag Year-to-Date ▼	
	Primary General Other (specify) ▼	, iggi egute	260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		••••••	749.98
Т	OTAL This Period (last page this line number on	ly)		

9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 133/395
	ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EINIZED RECEIPIS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements main name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , , ,	
$ \rangle$	New York Life Insurance Company Po	litical Actior	n Committee	
\angle				
Δ	Full Name (Last, First, Middle Initial) Mr. Jack Der Kacy			Date of Receipt
д.	Mailing Address 13637 S Ishnala Drive			
	City	State	Zip Code	Transaction ID: PR21265274
	Orland Park	IL	60462-1886	Amount of Each Receipt this Period
	FEC ID number of contributing	С		120.00
	federal political committee.			
	Name of Employer New York Life Insurance	Occupatio	n	
	Company	Agent	Versie Data 🖛	_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)		240.00	P/R Deduction (\$20.00 Mon- thly)
		0 0	<u> </u>	
	Full Name (Last, First, Middle Initial)			
в.	Mr. Todd Olig			Date of Receipt
	Mailing Address 1006 Dewey Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21273274
	Kiel	WI	53042-1242	Amount of Each Receipt this Period
	FEC ID number of contributing	С		200.00
	federal political committee.			
	Name of Employer	Occupatio	n	
	Name of Employer New York Life Insurance Company	Agent		
	Company Receipt For:	Agent	n e Year-to-Date ▼	
	Company Receipt For: Primary General	Agent		P/R Deduction (\$50.00 Mon-
	Company Receipt For:	Agent	e Year-to-Date 🔻	P/R Deduction (\$50.00 Mon- thly)
	Company Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Agent	e Year-to-Date 🔻	thly)
	Company Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo	Agent	e Year-to-Date 🔻	thly) Date of Receipt
C .	Company Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Agent	e Year-to-Date 🔻	thly)
C .	Company Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo	Agent	e Year-to-Date 🔻	Date of Receipt
 C.	Company Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook	Agent	e Year-to-Date ▼ 350.00	thly) Date of Receipt
 C.	Company Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton FEC ID number of contributing	Agent Aggregate State CA	e Year-to-Date ▼ 350.00 Zip Code	thly) Date of Receipt M / D / Y Y Transaction ID: PR2128274 Amount of Each Receipt this Period
 C.	Company Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton	Agent Aggregate	e Year-to-Date ▼ 350.00 Zip Code	thly) Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR2128274
 C.	Company Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton FEC ID number of contributing federal political committee.	Agent Aggregate State CA	e Year-to-Date ▼ 350.00 Zip Code 95207-1308	thly) Date of Receipt M / D / Y Y Transaction ID: PR2128274 Amount of Each Receipt this Period
 C.	Company Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton FEC ID number of contributing federal political committee. Name of Employer New York Life Insurance Company	Agent Aggregate State CA C Occupatio Agent	e Year-to-Date ▼ 350.00 Zip Code 95207-1308	thly) Date of Receipt M / D / Y Y Transaction ID: PR2128274 Amount of Each Receipt this Period
 C.	Company Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton FEC ID number of contributing federal political committee. Name of Employer New York Life Insurance Company Receipt For:	Agent Aggregate State CA C Occupatio Agent	e Year-to-Date ▼ 350.00 Zip Code 95207-1308	thly) Date of Receipt M / D / Y Y Transaction ID: PR2128274 Amount of Each Receipt this Period
 C.	Company Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton FEC ID number of contributing federal political committee. Name of Employer New York Life Insurance Company Receipt For: Primary General	Agent Aggregate State CA C Occupatio Agent	e Year-to-Date ▼ 350.00 Zip Code 95207-1308	thly) Date of Receipt M M / D D / Y Y Y Transaction ID: PR2128274 Amount of Each Receipt this Period 150.00 P/R Deduction (\$25.00 Mon-
 C.	Company Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton FEC ID number of contributing federal political committee. Name of Employer New York Life Insurance Company Receipt For:	Agent Aggregate State CA C Occupatio Agent	e Year-to-Date ▼ 350.00 Zip Code 95207-1308 n e Year-to-Date ▼	thly) Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR2128274 Amount of Each Receipt this Period 150.00
 c.	Company Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton FEC ID number of contributing federal political committee. Name of Employer New York Life Insurance Company Receipt For: Primary General	Agent Aggregate State CA C Occupatio Agent	e Year-to-Date ▼ 350.00 Zip Code 95207-1308 n e Year-to-Date ▼	thly) Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR2128274 Amount of Each Receipt this Period 150.00 P/R Deduction (\$25.00 Mon-thly)
	Company Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton FEC ID number of contributing federal political committee. Name of Employer New York Life Insurance Company Receipt For: Primary General	Agent Aggregate State CA C Occupatio Agent Aggregate	e Year-to-Date ▼ Zip Code 95207-1308 n e Year-to-Date ▼ 300.00	thly) Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR2128274 Amount of Each Receipt this Period 150.00 P/R Deduction (\$25.00 Mon-thly) 470.00
	Company Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Oscar A. Anzaldo Mailing Address 2704 Bonniebrook City Stockton FEC ID number of contributing federal political committee. Name of Employer New York Life Insurance Company Receipt For: Primary General Other (specify)	Agent Aggregate State CA C Occupatio Agent Aggregate	e Year-to-Date ▼ Zip Code 95207-1308 n e Year-to-Date ▼ 300.00	thly) Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR2128274 Amount of Each Receipt this Period 150.00 P/R Deduction (\$25.00 Mon-thly) 470.00

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 134/395				
	EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page		(check only one)				
	EMIZED RECEIPTS			X 11a 11b 11c 12				
	Any information conied from such Beports and Sta			13 14 15 16 17				
Ar or	y information copied from such Reports and Stai for commercial purposes, other than using the na	tements may ame and add	r not be sold or used by any pers lress of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.				
$\left \right\rangle$	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Joe Littlejohn			Date of Receipt				
	Mailing Address 100 Robert E Lee Place			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR21295274				
	Bossier City	LA	71111-5026	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			150.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company Receipt For:	Agent	Year-to-Date V					
	Primary General	riggiogato		P/R Deduction (\$25.00 Mon-				
	Other (specify)	0 0	300.00	thly)				
в.	Full Name (Last, First, Middle Initial) Mr. Zerbe Mac Mellish			Date of Receipt				
	Mailing Address 2503 Valleyfield			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR21311274				
	Houston	ТХ	77080-4406	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	, v	Year-to-Date V					
	Primary General	riggiogaio		P/R Deduction (\$25.00 Mon-				
	Other (specify)	0 0	300.00	thly)				
с.	Full Name (Last, First, Middle Initial) Mr. Jerry M. Fish			Date of Receipt				
	Mailing Address 55 Winding River Trail			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR2131274				
	Bentleyville	OH	44022-3607	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		325.00				
	Name of Employer New York Life Insurance	Occupation						
	<u>Company</u> INanagin		Year-to-Date V					
			520.50	P/R Deduction (\$25.00 Bi-				
	Other (specify) ▼	Weekly)						
s	UBTOTAL of Receipts This Page (optional)			625.00				
т	TOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 135 / 395 (check only one)			
ITEMIZED RECEIPTS			or each category of the	\overline{X} 11a $\overline{11b}$ 11c $\overline{12}$			
			Detailed Summary Page		7		
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	r not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
∇	NAME OF COMMITTEE (In Full)						
	New York Life Insurance Company Polit	ical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Ms. Sue Zwiener			Date of Receipt			
	Mailing Address 10630 Dodge Mower Road			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR21324274			
	Blooming Prairie	MN	55917-6934	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		349.98			
	Name of Employer New York Life Insurance	Occupation	1				
	Company Receipt For:	Agent	Year-to-Date 🔻	-			
	Primary General	riggiogaio		P/R Deduction (\$58.33 Mon-			
	Other (specify)	0 0	699.96	thly)			
в.	Full Name (Last, First, Middle Initial) Mr. Mark A. Wiskus			Date of Receipt			
	Mailing Address 1005 Edgewater Drive			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR21334274			
	Pella	IA	50219-7669	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00]		
	Name of Employer New York Life Insurance	Occupation	1	7			
	Company Receipt For:	Agent	Year-to-Date V	-			
	Primary General	, iggi oguio		P/R Deduction (\$25.00 Mon-			
	Other (specify) v	0 0	300.00	thly)			
с.	Full Name (Last, First, Middle Initial) Mr. Michael Brown			Date of Receipt			
	Mailing Address 8976 Northeast Patton F	load		M M / D D / Y Y Y			
	City	State	Zip Code	Transaction ID: PR21341274			
	Hamilton	MO	64644-9166	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		199.98			
	Name of Employer New York Life Insurance	Occupation	1	1			
	Company	Agent	Year-to-Date V	-			
	Receipt For: Aggrega		rear-lo-Dale V	D/D Deduction (#22.22 Man			
	Other (specify)	0 0	399.96	P/R Deduction (\$33.33 Mon- thly)			
s	UBTOTAL of Receipts This Page (optional)		·····	699.96]		
\vdash	OTAL This Period (last page this line number or		· · · ·]		
1'	e	···, · · · · · · · · · · · · · · · · ·	••••••				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 395 (check only one) X X 11a 11b 11c
		Detailed Summary Page		13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
\mathbb{N}	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	_
Α.	Full Name (Last, First, Middle Initial) Mr. Ron Meeker			Date of Receipt
	Mailing Address 804 N Dubuque			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21343274
	Sioux Falls	SD	57110-5825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer	Occupation	n	
	New York Life Insurance Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Grant Baugh			Date of Receipt
	Mailing Address 1046 Morgan Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21347274
	Ontario	OR	97914-8662	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	<u> </u>	
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Mr. Anthony J. Taylor			Date of Receipt
	Mailing Address 4672 Country Club Drive	e		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21354274
	Highland	UT	84003-9593	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Other (specify) ▼	0 0	125.00	P/R Deduction (\$125.00 Mo- nthly)
s	LUBTOTAL of Receipts This Page (optional)		······	550.00
	OTAL This Period (last page this line number of			-

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 137/395 (check only one)			
			Detailed Summary Page	X 11a 11b 11c 12		
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	v not be sold or used by any perso dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee.		
\sum	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	New York Life Insurance Company Politi	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Richard S. Wallace			Date of Receipt		
	Mailing Address 1640 Northeast 156th Avenue			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21360274		
	Portland	OR	97230-5323	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		180.00		
	Name of Employer New York Life Insurance	Occupation	ı			
	Company Receipt For:	Agent	e Year-to-Date 🔻	_		
	Primary General	, iggi oguio		P/R Deduction (\$30.00 Mon-		
	Other (specify)	0 0	360.00	thíy)		
в.	Full Name (Last, First, Middle Initial) Mr. Richard J. Werner			Date of Receipt		
	Mailing Address 1380 King James Court					
	City	State	Zip Code	Transaction ID: PR2136274		
	Oak Park	CA	91377-4738	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		420.00		
	Name of Employer New York Life Insurance	Occupation	1			
	Company Receipt For:	9	e Year-to-Date ▼	_		
	Primary General Other (specify) ▼		720.00	P/R Deduction (\$80.00 Mon- thly)		
<u></u>	Full Name (Last, First, Middle Initial) Ms. Terry Merlo			Date of Receipt		
	Mailing Address 1213 San Sorrento Cour	t		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21372274		
	Grover Beach	CA	93433-3246	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		150.00		
	Name of Employer New York Life Insurance	Occupation	1			
	Company Receipt For:	Agent Aggregate	e Year-to-Date ▼	_		
	Primary General		300.00	P/R Deduction (\$25.00 Mon-		
	Other (specify)			thly)		
s	UBTOTAL of Receipts This Page (optional)		•	750.00		
т	TOTAL This Period (last page this line number only)					

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 138 / 395
				(check only one)
				X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may ame and add	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee	_
Α.	Full Name (Last, First, Middle Initial) Mr. Fred A. Donati			Date of Receipt
	Mailing Address 404 El Portal			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21373274
	Shell Beach	CA	93449-1508	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:		Year-to-Date 🔻	_
	Primary General	33 - 3		P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0	300.00	thly)
В.	Full Name (Last, First, Middle Initial) Mr. Alan Silver			Date of Receipt
	Mailing Address 201 Mission Street Suite	e 1940		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21375274
	San Francisco	CA	94105-1880	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		540.00
	Name of Employer New York Life Insurance Company	Occupation Agent	1	
	Receipt For:	, v	Year-to-Date V	
	Primary General Other (specify) v	0 0	1080.00	P/R Deduction (\$90.00 Mon- thly)
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Andrew Peters			Date of Receipt
	Mailing Address 6200 Leona Street			
	City	State	Zip Code	Transaction ID: PR21379274
	Oakland	CA	94605-1229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		_
	Receipt For:	Aggregate	Year-to-Date V	_
	Other (specify)	0 0	220.00	P/R Deduction (\$20.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		······	890.00
т	OTAL This Period (last page this line number or	nly)		-

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 139 / 395 (check only one)				
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions				
$\overline{\mathbb{N}}$	NAME OF COMMITTEE (In Full)							
\angle	New York Life Insurance Company Poli	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Ms. Cohinta Alzate			Date of Receipt				
	Mailing Address 13976 Southwest 42nd	Street		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR21380274				
	Davie	FL	33330-5733	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		100.02				
	Name of Employer New York Life Insurance	Occupation Agent	n					
	Company Receipt For:	, v	e Year-to-Date 🔻	-1				
	Primary General Other (specify) ▼		200.04	P/R Deduction (\$16.67 Mon- thly)				
в.	Full Name (Last, First, Middle Initial) Mr. Forrest Giles Hindley			Date of Receipt				
	Mailing Address 17609 White Marble Dri	ve		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR2138274				
	Monument	CO	80132-7445	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		499.98				
	Name of Employer New York Life Insurance	Occupation Agent	n					
	Company Receipt For:	9	e Year-to-Date V	_				
	Primary General Other (specify) ▼		999.96	P/R Deduction (\$83.33 Mon- thly)				
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Eric K. Takao			Date of Receipt				
	Mailing Address 752 Pahumele Place			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR21386274				
	Kailua	HI	96734-3513	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		600.00				
	Name of Employer New York Life Insurance	Occupation Agent	n					
	oompany		e Year-to-Date V	_				
	Primary General Other (specify) ▼		1200.00	P/R Deduction (\$100.00 Mo- nthly)				
s	UBTOTAL of Receipts This Page (optional)		·····	1200.00				
	TOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 140 / 395 (check only one)		
IT	EMIZED RECEIPTS		or each category of the			
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	⊥ y not be sold or used by any perso dress of any political committee to	pn for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)					
\rangle	New York Life Insurance Company Polit	tical Action	Committee			
,́	Full Name (Last, First, Middle Initial) Mr. Rajesh Ratilal Sanchala			Date of Receipt		
	Mailing Address 305 Highland Meadows	Drive		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21394274		
	Wylie	ТХ	75098-5074	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		150.00		
	Name of Employer New York Life Insurance	Occupation	n			
	Company	Agent				
	Receipt For:	Aggregate	e Year-to-Date 🔻	_		
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)		
в.	Full Name (Last, First, Middle Initial) Mr. Jaydev Patel			Date of Receipt		
	Mailing Address 17 Fawn Drive			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21401274		
	Livingston	NJ	07039-1905	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer New York Life Insurance Company	Occupation Agent	n			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	500.00	P/R Deduction (\$1000.00 Monthly)		
 c.	Full Name (Last, First, Middle Initial) Ms. Leslie Coddington			Date of Receipt		
	Mailing Address 522 West 112th Street Unit 54			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21416274		
	New York	NY	10025-1689	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		130.00		
	Name of Employer New York Life Insurance Company	Occupation	n Information Systems			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)		
s	LUBTOTAL of Receipts This Page (optional)			780.00		
	OTAL This Period (last page this line number of					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 395 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Politi	cal Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Paul Howard Rhodes			Date of Receipt
	Mailing Address 210 Meadow Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21422274
	Maysville	MO	64469-8212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Year-to-Date V	_
	Primary General	Ayyreyale		P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0	210.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. William T. Kyle			Date of Receipt
	Mailing Address 4596 Hicks Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2142274
	Chico	CA	95973-8912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer New York Life Insurance	Occupation	ו	
	Company Receipt For:	Agent	Year-to-Date V	_
	Primary General Other (specify)		240.00	P/R Deduction (\$20.00 Mon- thly)
 c.	Full Name (Last, First, Middle Initial) Ms. Jeanne M. Carbone			Date of Receipt
	Mailing Address 669 Pelham Road Apt. C2			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR214274
	New Rochelle	NY	10805-1113	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance Company	Occupation First Vice	President	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		······	370.00
T	OTAL This Period (last page this line number on	ly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 142 / 395 (check only one)		
11		Detailed Summary Page		X 11a 11b 11c 12		
	y information copied from such Reports and Stat					
or	for commercial purposes, other than using the na	ame and add	tress of any political committee to	solicit contributions from such committee.		
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Polit	ical Action	Committee			
\square						
Α.	Full Name (Last, First, Middle Initial) Mr. Jerry Macias			Date of Receipt		
	Mailing Address 1530 Avenida Quintas			M M / D D / Y Y Y		
	City	State	Zip Code	Transaction ID: PR2143274		
	Las Cruces	NM	88001-3509	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		300.00		
	Name of Employer New York Life Insurance	Occupation	า	-		
	Company	Agent		_		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)		
в.	Full Name (Last, First, Middle Initial) Mr. Angelo A. Haddad			Date of Receipt		
	Mailing Address 354 Garnsey Avenue			M M / D D / Y Y Y		
	City	State	Zip Code	Transaction ID: PR2145274		
	Bakersfield	CA	93309-1849	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		350.00		
	Name of Employer New York Life Insurance	Occupation	1			
	Company Receipt For:	Agent	e Year-to-Date ▼	_		
	Primary General	, igg. ogaio	650.00	P/R Deduction (\$75.00 Mon-		
	Other (specify)	0 0	650.00	thly)		
с.	Full Name (Last, First, Middle Initial) Mr. Patrick D. Miller			Date of Receipt		
	Mailing Address 265 Mountaincrest Road			M M / D D / Y Y Y		
	City	State	Zip Code	Transaction ID: PR2147274		
	Duarte	CA	91010-1537	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		150.00		
	Name of Employer New York Life Insurance	Occupation	1	7		
	Company Receipt For:	Agent	e Year-to-Date ▼			
	Primary General Other (specify) ▼			P/R Deduction (\$25.00 Mon-		
			300.00	thly)		
s	UBTOTAL of Receipts This Page (optional)		······	800.00		
\vdash	OTAL This Period (last page this line number or					

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 143 / 395 (check only one)	
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	/ not be sold or used by any perso dress of any political committee to	13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		···· , , ,	
\geq	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Philip A. Vignola			Date of Receipt
	Mailing Address 3 Strawberry Knoll Court	t		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR215274
	Fort Salonga	NY	11768-2646	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date ▼	D/D Deduction (#00.00 Man
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Kevin Choi			Date of Receipt
	Mailing Address 4442 Saint Clair Avenue	!		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21531274
	Studio City	CA	91604-1207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:	Managing	g Partner • Year-to-Date V	
	Primary General	Aggregate		P/R Deduction (\$76.93 Bi-
	Other (specify)	0 0	300.00	Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Robert A. Zaniewski			Date of Receipt
	Mailing Address 4196 Pacifico Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21533274
	Las Vegas	NV	89135-2524	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer New York Life Insurance Company	Occupation Life Prod	n uct Consultant	
	Receipt For: Aggregate		e Year-to-Date 🔻	
	Other (specify)	0 0	390.00	P/R Deduction (\$15.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		·····	651.00
Т	OTAL This Period (last page this line number or	ıly)		

50	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 144/395				
	· · · ·	Use separate schedule(s) or each category of the Detailed Summary Page		(check only one)				
11	EMIZED RECEIPTS			X 11a 11b 11c 12				
				13 14 15 16 17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee					
A.	Full Name (Last, First, Middle Initial) Ms. Jeannette L. Smith			Date of Receipt				
	Mailing Address 3734 Vancouver Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR21534274				
	Reno	NV	89511-6048	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			325.00				
	Name of Employer New York Life Insurance	Occupation Manager	ו - Life Sales	_				
	Company Receipt For:		Year-to-Date V	-				
	Primary General		CE0.00	P/R Deduction (\$25.00 Bi-				
	Other (specify)	0 0	650.00	Weekly)				
в.	Full Name (Last, First, Middle Initial) Mr. Glenn A. Condos			Date of Receipt				
	Mailing Address 15108 Majorca Street			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR21536274				
	Dallas	TX	75248-6422	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		130.00				
	Name of Employer New York Life Insurance Company	Occupation Regional	n Manager - Life Product Sale	s				
	Receipt For:		Year-to-Date V					
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)				
<u></u>	Full Name (Last, First, Middle Initial) Mr. Rick K. Stivers			Date of Receipt				
0.	Mailing Address 7564 Linidisfarne Lane							
	City	State	Zip Code	Transaction ID: PR2154274				
	Franklin	TN	37064-6256	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.04				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company		Year-to-Date 🔻	-				
	Primary General	7.99.094.0		P/R Deduction (\$83.34 Mon-				
	Other (specify)	1000.08	thly)					
s	UBTOTAL of Receipts This Page (optional)		•	955.04				
т	TOTAL This Period (last page this line number only)							
S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 145 / 395 (check only one)				
-----------	-------------------------------------------------------------------------------------------------	--------------------------------------------------	---------------------------------------------------------------------------	-------------------------------------------------------------------------------------------	--			
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		\overline{X} 11a 11b 11c 12				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements may name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
\rangle	New York Life Insurance Company Poli	itical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Robert J. Polilli			Date of Receipt				
	Mailing Address 4522 Perdita Lane			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR21545274				
	Lutz	FL	33558-9079	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		130.00				
	Name of Employer New York Life Insurance Company	Occupation Vice Pres	n sident & Actuary					
	Receipt For:		Year-to-Date V					
	Primary General Other (specify) ▼	U U U	223.67	P/R Deduction (\$5.19 Bi-W- eekly)				
В.	Full Name (Last, First, Middle Initial) Mr. Darrell N. Robertson			Date of Receipt				
	Mailing Address 17933 Patterson Road							
	City	State	Zip Code	Transaction ID: PR21546274				
	Odessa	FL	33556-2205	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		130.00				
	Name of Employer New York Life Insurance Company	Occupation Vice Pres						
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General Other (specify) ▼	U U U	260.00	P/R Deduction (\$10.00 Bi- Weekly)				
 C.	Full Name (Last, First, Middle Initial) Mr. Larry Tover			Date of Receipt				
	Mailing Address 4839 Hermano Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR2155274				
	Tarzana	CA	91356-4517	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		156.00				
	Name of Employer New York Life Insurance	Occupation	า	7				
	Company	Agent						
	Receipt For:		e Year-to-Date 🔻	_				
	Primary General Other (specify) ▼		312.00	P/R Deduction (\$26.00 Mon- thly)				
s	LUBTOTAL of Receipts This Page (optional)		······	416.00				
Ĕ								
Т	OTAL This Period (last page this line number c	only)						

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 395 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Politi	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas A. Morel			Date of Receipt
	Mailing Address 6101 Long Praire Road #744-129			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21553274
	Flower Mound	TX	75028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation		
	Company		Agency Training	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	D/D Deduction (#10.00 Di
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
B	Full Name (Last, First, Middle Initial) Ms. Debra A. Bronzo			Date of Receipt
Ь.	Mailing Address 21 Di Rubbo Drive			
	City	State	Zip Code	Transaction ID: PR21555274
	Cortlandt Manor	NY	10567-2613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:	Vice Pres	e Year-to-Date V	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Yisheng V. Fan			Date of Receipt
	Mailing Address 84-25 Elmhurst Avenue Apt. 3B			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21556274
	Elmhurst	NY	11373-3326	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.10
	Name of Employer New York Life Insurance	Occupation		
	Company		ons Engineer	
			e Year-to-Date 🔻	
	Other (specify) ▼	0 0	200.20	P/R Deduction (\$7.70 Bi-W- eekly)
s	UBTOTAL of Receipts This Page (optional)		······	360.10
	OTAL This Period (last page this line number on			-

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 147 / 395 (check only one)
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		$\begin{array}{c c c c c c c c c c c c c c c c c c c $
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	v not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
$\left[\right]$	NAME OF COMMITTEE (In Full)		O	
\bigvee	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Lane Kent			Date of Receipt
	Mailing Address 13138 Halsell Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21558274
	Austin	TX	78732-2166	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:	Vice Pres	sident e Year-to-Date V	
	Primary General	Ayyreyale		P/R Deduction (\$25.00 Bi-
	Other (specify)	0 0	525.00	Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Albert J. Schiff			Date of Receipt
	Mailing Address 11 Mohawk Lane			M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR21559274
	Greenwich	СТ	06831-3125	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		ecutive Officer	
	Primary General	Ayyreyate		P/R Deduction (\$76.93 Bi-
	Other (specify)		1000.00	Weekly)
с.	Full Name (Last, First, Middle Initial) Ms. Marlene I. Noguera			Date of Receipt
	Mailing Address 18531 Southwest 44th S	Street		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR21562274
	Miramar	FL	33029-6215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life InsuranceOccup PartnCompanyPartnReceipt For:AggreePrimaryGeneral		n	
			e Year-to-Date V	
				P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
s	LUBTOTAL of Receipts This Page (optional)			1330.00
\vdash	OTAL This Period (last page this line number o			
L'		··· ;) ·····	·····	

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 148 / 395					
			or each category of the	(check only one)					
••			Detailed Summary Page	X 11a 11b 11c 12					
^	winformation canied from such Departs and Ctat	amanta mai	, not be cold or used by only norge	13 14 15 16 17					
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.					
Ν	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Politi								
Α.	Full Name (Last, First, Middle Initial) Ms. Suzanne Wuepper Sanford			Date of Receipt					
	Mailing Address 32055 Southwest Arbor I	Lake Drive	9	M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2156274					
	Wilsonville	OR	97070-9415	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			156.00					
	Name of Employer New York Life Insurance	Occupation	ı	-					
	New York Life Insurance Company	Agent							
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Tony Bolado			Date of Receipt					
	Mailing Address 698 N Helena			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2168274					
	Anaheim	CA	92805-2620	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		207.96					
	Name of Employer New York Life Insurance	Occupation	ı	-					
	Company	Agent	<u> </u>	_					
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻						
	Other (specify) ▼	0 0	415.92	P/R Deduction (\$34.66 Mon- thly)					
с.	Full Name (Last, First, Middle Initial) Mr. Ray Triplett			Date of Receipt					
	Mailing Address 16171 Hillvale Avenue			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2172274					
	Monte Sereno	CA	95030-4159	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation	ı	7					
	Company	Agent	Voor to Data						
	Receipt For: Aggreg		e Year-to-Date 🔻	D/D Daduatian (#05.00 Mar					
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)			513.96					
Т	TOTAL This Period (last page this line number only)								

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 149 / 395 (check only one)					
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12					
			Delalled Summary Page						
	y information copied from such Reports and Stat for commercial purposes, other than using the na								
Ν	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. William S. Anders			Date of Receipt					
	Mailing Address 15 Grand Place			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2176274					
	Newtown	СТ	06470-2113	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			220.82					
	Name of Employer New York Life Insurance	Occupation	n nagement Training						
	Company Receipt For:		Year-to-Date V	_					
	Primary General			P/R Deduction (\$20.00 Bi-					
	Other (specify)	0 0	311.04	Weekly)					
В.	Full Name (Last, First, Middle Initial) Mr. Nicholas J. Smaldino			Data of Respirat					
Б.	Mailing Address 1804 E Chelsea			Date of Receipt					
	City	State	Zip Code	Transaction ID: PR2181274					
	Fresno	CA	93720-4213	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupatior Agent	1						
	Company Receipt For:	J	Year-to-Date V	_					
	Primary General	1.99.094.0		P/R Deduction (\$26.00 Mon-					
	Other (specify)	0 0	312.00	thly)					
с.	Full Name (Last, First, Middle Initial) Mr. Douglas G. Sawicki			Date of Receipt					
	Mailing Address 114 Bushwick Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR218274					
	Poughkeepsie	NY	12603-3813	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	Name of Employer New York Life Insurance	Occupation	n prmation Systems						
	Company CVP - Ini		Year-to-Date V	-1					
				P/R Deduction (\$15.00 Bi-					
	Other (specify)	0 0	390.00	Weekly)					
s	UBTOTAL of Receipts This Page (optional)			571.82					
т	FOTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedul or each category of the	e(s)	FOR LINE NUMBER: PAGE 1 (check only one)				
••			Detailed Summary Pag	ge	X 11a 11b 11c 13 14 15	$12 \\ 16 \ \Box 17$			
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may	not be sold or used by an lress of any political comr	ny person f mittee to so	or the purpose of soliciting contribu	tions			
$\overline{\Lambda}$	NAME OF COMMITTEE (In Full)								
\geq	New York Life Insurance Company Politi								
Α.	Full Name (Last, First, Middle Initial) Mr. Nick Ameli, Jr.				Date of Receipt				
	Mailing Address 4113 Coal Heritge Road				M M / D D / Y Y	ΥΥ			
	City	State	Zip Code		Transaction ID: PR21881274	1			
	Bluewell	WV	24701-9193		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.]	1	50.00			
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent	Veer te Dete						
	Receipt For: Primary General	Aggregate	Year-to-Date V		P/R Deduction (\$25.00 Mon-				
	Other (specify)	0 0	300	0.00	thly)				
в.	Full Name (Last, First, Middle Initial) Mr. Afiz Hudani				Date of Receipt				
	Mailing Address 5009 Westgrove Circle				M M / D D / Y Y Y Y				
	City	State	Zip Code		Transaction ID: PR21882274				
	Colleyville	TX	76034-5176		Amount of Each Receipt this Pe	eriod			
	FEC ID number of contributing federal political committee.	C			1	50.00			
	Name of Employer New York Life Insurance	Occupation	ו						
	Company Receipt For:	Agent	Year-to-Date V						
	Primary General	Ayyreyale			P/R Deduction (\$25.00 Mon-				
	Other (specify)	0 0	300	0.00	thly)				
C.	Full Name (Last, First, Middle Initial) Mr. Salim R. Kassam				Date of Receipt				
	Mailing Address 4930 Plantation Clny				M M / D D / Y Y	YY			
	City	State	Zip Code		Transaction ID: PR21883274				
	Sugar Land	TX	77478-5430		Amount of Each Receipt this Pe	eriod			
	FEC ID number of contributing federal political committee.	C			1	50.00			
	Name of Employer New York Life Insurance	Occupation	1						
	Company Receipt For:	Agent	Year-to-Date V						
	Primary General Other (specify)	300	0.00	P/R Deduction (\$25.00 Mon- thly)					
		0 0	<u> </u>	0					
s	UBTOTAL of Receipts This Page (optional)			. 🕨	45	50.00			
т	TOTAL This Period (last page this line number only)								

c	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 151 / 395		
	· · ·	Use separate schedule(s) or each category of the Detailed Summary Page		(check only one)		
11	EMIZED RECEIPTS			X 11a 11b 11c 12		
				13 14 15 16 17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	New York Life Insurance Company Polit	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Sean M. Mc Cann			Date of Receipt		
	Mailing Address 7155 S Hudson Circle			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21884274		
	Littleton	CO	80122-2541	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			150.00		
	Name of Employer Occup. New York Life Insurance		1	_		
	Company	Agent				
	Receipt For:	Aggregate	Year-to-Date V	_		
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)		
в.	Full Name (Last, First, Middle Initial) Mr. Jerome A. Timmermann			Date of Receipt		
	Mailing Address 64 Windsor Lane			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21885274		
	Breeze	IL	62230-3512	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		300.00		
	Name of Employer New York Life Insurance Company	Occupation Agent	1			
	Receipt For:	Aggregate	Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	0.00	P/R Deduction (\$300.00 Mo- nthly)		
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Doug Wills			Date of Receipt		
	Mailing Address 12410 W Auburn Avenu	е		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21891274		
	Lakewood	CO	80228-4986	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		150.00		
	Name of Employer New York Life Insurance	Occupation Agent	1			
			Year-to-Date 🔻	-		
Primary General Other (specify) ▼			300.00	P/R Deduction (\$25.00 Mon- thly)		
6	UBTOTAL of Receipts This Page (optional)			600.00		
\vdash				-		
Ľ	OTAL This Period (last page this line number or	ııy)	····· •			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 152 / 395 (check only one)			
IT	EMIZED RECEIPTS		or each category of the	\overline{X} 11a 11b 11c 12		
			Detailed Summary Page			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
\sum	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Mr. Bryan Buzzard			Date of Receipt		
	Mailing Address 3311 E Dartmouth			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21892274		
	Mesa	AZ	85213-7046	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			300.00		
	Name of Employer New York Life Insurance	Occupation Agent	n			
	Company Receipt For:		e Year-to-Date 🔻	-		
	Primary General Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)		
в.	Full Name (Last, First, Middle Initial) Mr. David L. Aguirre			Date of Receipt		
	Mailing Address 7518 South 240 E			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21893274		
	Midvale	UT	84047-2169	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		360.00		
	Name of Employer New York Life Insurance Company	Occupation Agent	n			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	720.00	P/R Deduction (\$60.00 Mon- thly)		
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Duane Allred			Date of Receipt		
	Mailing Address 731 Greenview Trail			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR21904274		
	Brookhaven	MS	39601-8760	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		150.00		
	Name of Employer New York Life Insurance	Occupation Agent	n			
	Company Receipt For:	, v	e Year-to-Date 🔻	_		
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)		
				810.00		
	UBTOTAL of Receipts This Page (optional)		· · ·			
Т	OTAL This Period (last page this line number or	nly)				

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 153 / 395	
			Use separate schedule(s) or each category of the	(check only one)	
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12	
				13 14 15 16 17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
	New York Life Insurance Company Polit	tical Action	Committee		
<u>́</u> А.	Full Name (Last, First, Middle Initial) Mr. Lon G. Wilson			Date of Receipt	
	Mailing Address 4240 Tahoe Drive			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR21908274	
	Anchorage	AK	99502-1460	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			499.98	
	Name of Employer New York Life Insurance	Occupation Agent	1		
	Company Receipt For:	Ŭ	Year-to-Date 🔻	_	
	Primary General		000.000	P/R Deduction (\$83.33 Mon-	
	Other (specify)	0 0	999.96	thly)	
в.	Full Name (Last, First, Middle Initial) Mr. Richard Gimelli			Date of Receipt	
	Mailing Address 510 Osage Lane			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR2191274	
	Auburn	CA	95602-9672	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		156.00	
	Name of Employer New York Life Insurance	Occupation	l		
	Company	Agent			
	Receipt For:	Aggregate	Year-to-Date V	_	
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)	
<u></u>	Full Name (Last, First, Middle Initial) Ms. Christine Young			Date of Receipt	
	Mailing Address 55 Berryessa Way				
	City	State	Zip Code	Transaction ID: PR2194274	
	Hillsborough	CA	94010-7301	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		210.00	
	Name of Employer New York Life Insurance	Occupation	1	7	
	Company Agent Receipt For: Aggre				
			Year-to-Date 🔻	_	
	Other (specify)	0 0	420.00	P/R Deduction (\$35.00 Mon- thly)	
s	UBTOTAL of Receipts This Page (optional)		······	865.98	
\vdash	OTAL This Period (last page this line number of			-	
L.		··· · ································	••••••		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the		FOR LINE NUMBER: PAGE 154 / 395 (check only one)					
	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12					
Δr	y information copied from such Reports and Sta	tomonte may	y not be sold or used by any pers	13 14 15 16 17					
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	o solicit contributions from such committee.					
\sum	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Art Kess			Date of Receipt					
	Mailing Address 12740 Fieldcreek Lane			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2195274					
	Reno	NV	89511-6658	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	ו						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)					
В.	Full Name (Last, First, Middle Initial) Mr. George E. Carr			Date of Receipt					
	Mailing Address 2791 Leo Circle			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2202274					
	Riverside	CA	92503-6050	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		210.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	1						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Other (specify)	0 0	420.00	P/R Deduction (\$35.00 Mon- thly)					
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Russell A. Curtiss			Date of Receipt					
	Mailing Address 4118 E 14th Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2203274					
	Long Beach	CA	90604-3005	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent	<u> </u>						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D Dadwatian (#00.00 Mar					
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)			516.00					
т	TOTAL This Period (last page this line number only)								

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 155/395				
			or each category of the	(check only one)				
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions				
$\overline{\nabla}$	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Politi	cal Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. L. Bruce Nole			Date of Receipt				
	Mailing Address 3170 Viaduct Ponciana # 6			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR2207274				
	Lake Worth	FL	33467-3303	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		600.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent		_				
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻					
	Other (specify) ▼	0 0	1200.00	P/R Deduction (\$100.00 Mo- nthly)				
в.	Full Name (Last, First, Middle Initial) Mr. David A. Teitelbaum			Date of Receipt				
	Mailing Address 1418 Avon Lane Building 2 Apt. 14			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR22096274				
	North Lauderdale	FL	33068-5532	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation	ו	7				
	Company Receipt For:	Agent	Year-to-Date V	_				
	Primary General	Aggregate		P/P Doduction (\$25.00 Mon				
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)				
с.	Full Name (Last, First, Middle Initial) Ms. Barbara J. Norman			Date of Receipt				
	Mailing Address 13672 Orchard Gate Roa	ad		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR2219274				
	Poway	CA	92064-2126	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation	1	7				
	<u>Company</u> Age		<u> </u>	_				
			Year-to-Date V					
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)			900.00				
\vdash	TOTAL This Period (last page this line number only)							

S	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 156 / 395
		Use separate schedule(s) or each category of the		(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
•				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may ame and add	I not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committee	
	Full Name (Last, First, Middle Initial)			
Α.	Ms. Bassie Lee			Date of Receipt
	Mailing Address 1210 Dana Avenue			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR2220274
	Palo Alto	CA	94301-3111	Amount of Each Receipt this Period
	FEC ID number of contributing	С		120.00
	federal political committee.			
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	Voar to Dato	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/P Doduction (\$20.00 Man
	Other (specify) v		240.00	P/R Deduction (\$20.00 Mon- thly)
В.	Full Name (Last, First, Middle Initial) Mr. John J. Englert			Date of Receipt
	Mailing Address 4948 Saratoga			
	City	Stata	Zin Codo	
	City Redding	State CA	Zip Code 96002-9419	Transaction ID: PR2223274
			<u> </u>	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		204.00
	Name of Employer	Occupation	n	
	Name of Employer New York Life Insurance Company	Agent		
	Receipt For:	, v	e Year-to-Date 🔻	
	Primary General		360.00	P/R Deduction (\$50.00 Mon-
	Other (specify) v			thly)
	Full Name (Last, First, Middle Initial)			
C.	Mr. Rex Inglis			Date of Receipt
	Mailing Address 2528 Tamarisk Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2227274
	Stockton	CA	95207-1343	Amount of Each Receipt this Period
	FEC ID number of contributing	С		156.00
	federal political committee.			
	Name of Employer New York Life Insurance	Occupation	n	
	Company 70		e Year-to-Date ▼	
				P/R Deduction (\$26.00 Mon-
	Other (specify) \bigtriangledown		312.00	thly)
_				
•	UBTOTAL of Receipts This Page (optional)			480.00
Ľ	CETTE OF TECEIPIS THIS Fage (optional)		••••••	
Т	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 157 / 395 (check only one)
11	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	13 14 15 16 17 on for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		0	
	New York Life Insurance Company Politi	tical Action	Committee	
۲ <u>ــــــــــــــــــــــــــــــــــــ</u>	Full Name (Last, First, Middle Initial) Mr. James A. Allen			Date of Receipt
	Mailing Address 710 Avery Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR22274
	South Windsor	СТ	06074-2303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance Company		1	
			<u> </u>	
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Kulbhusan L. Sareen			Date of Receipt
	Mailing Address 405 Darrell Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2228274
	Hillsborough	CA	94010-6709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1040.00
	Name of Employer New York Life Insurance	Occupation		
	Company	Managin		
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify) ▼	0 0	1940.00	P/R Deduction (\$80.00 Bi- Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Jim Rutledge			Date of Receipt
	Mailing Address 10484 Janice Lynn Circ	le		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2234274
	Cypress	CA	90630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		207.96
	Name of Employer New York Life Insurance	Occupation	<u></u>	
	Company	Agent		_
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify) ▼	0 0	415.92	P/R Deduction (\$34.66 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	1397.96
F			••••••	-
Т	OTAL This Period (last page this line number of	nly)		

50	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 158 / 395
		Use separate schedule(s) or each category of the		(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
$ \rangle$	New York Life Insurance Company Polit			
	New Tork Life insurance company Fom		Oommaee	
	Full Name (Last, First, Middle Initial)			,
Α.	Ms. Neelam Salmen			Date of Receipt
	Mailing Address 10350 East Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2238274
	Redwood Valley	CA	95470-6102	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		145.02
	Name of Employer	Occupation	n	-
	New York Life Insurance Company	Agent		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)		290.04	P/R Deduction (\$24.17 Mon- thly)
		0 0	0 0 0 0 0 0 0	
	Full Name (Last, First, Middle Initial)			
В.	Mr. Gideon A. Pell			Date of Receipt
	Mailing Address 61 Holbrook Drive			M M / D D / Y Y Y Y
	City		Zip Code	Transaction ID: PR224274
	Stamford	СТ	06906-1514	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		520.00
	Name of Employer	Occupation	n	_
	Name of Employer New York Life Insurance Company	Svp		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		1040.00	P/R Deduction (\$40.00 Bi-
	Other (specify)			Weekly)
	Full Name (Last, First, Middle Initial)			
C.	Mr. Peter S. Ince			Date of Receipt
	Mailing Address 253 Jennings Avenue			M M / D D / Y Y Y Y
		Stata	Zin Codo	
	City Patchogue	State NY	Zip Code 11772-2558	Transaction ID: PR225274 Amount of Each Receipt this Period
	•		11772-2338	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer New York Life Insurance	Occupation Agent	n	
	Company Receipt For:	•	e Year-to-Date 🔻	
	Primary General			P/R Deduction (\$25.00 Mon-
	Other (specify) 🔻		300.00	thly)
5	UBTOTAL of Receipts This Page (optional)			815.02
F			······	
Т	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 159 / 395 (check only one)
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		X 11a 11b 11c 12
Δ <i>r</i>	y information copied from such Reports and Sta	tomonto mo	, not be cold or used by any perce	13 14 15 16 17
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	o solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	_
A.	Full Name (Last, First, Middle Initial) Mr. Gary N. Laurin			Date of Receipt
	Mailing Address 721 Hearst Way			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2253274
	Corona	CA	92882-6397	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		207.96
	Name of Employer O New York Life Insurance A Company		1	
			<u> </u>	
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify) ▼		415.92	P/R Deduction (\$34.66 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Donald G. Presley			Date of Receipt
	Mailing Address 4502 Obispo Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2257274
	Lakewood	CA	90712-3647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.04
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		uct Consultant Year-to-Date ▼	
	Primary General	Ayyreyale		P/R Deduction (\$23.08 Bi-
	Other (specify)		600.08	Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Scott V. Spickler			Date of Receipt
	Mailing Address 10754 Horizon Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR2259274
	Juneau	AK	99801-7625	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		·····	658.00
Ľ	OTAL This Period (last page this line number o	(iiiy)		

S	CHEDULE A (FEC Form 3X)	[FOR LINE NUMBER: PAGE 160 / 395					
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)					
	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12					
•									
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Polit	tical Action	Committee						
<u>А.</u>	Full Name (Last, First, Middle Initial) Mr. Charlie Finegan			Date of Receipt					
	Mailing Address 6996 Cr 242			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2283274					
	Dublin	TX	76446-4143	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee. Image: Committee federal political committee. Name of Employer New York Life Insurance Committee federal political committee.			150.00					
			1						
	Company Receipt For:	Agent Aggregate	Year-to-Date V	_					
	Primary General Other (specify) v	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)					
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Mark Koskovich			Date of Receipt					
	Mailing Address 5717 Cavender Drive								
	City	State	Zip Code	Transaction ID: PR2284274					
	Plano	TX	75093-5966	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of Employer New York Life Insurance	Occupation Managing							
	Company Receipt For:		Year-to-Date V	_					
	Primary General Other (specify) ▼	0 0	508.67	P/R Deduction (\$25.00 Bi- Weekly)					
<u></u>	Full Name (Last, First, Middle Initial) Mr. Jack L. Doverspike			Date of Receipt					
	Mailing Address PO Box 159			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2287274					
	Larose	LA	70373-0159	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		120.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent		_					
	Receipt For:		Year-to-Date V	_					
	Other (specify)	0 0	240.00	P/R Deduction (\$20.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)			595.00					
т	TOTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 161 / 395 (check only one)					
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page		X 11a 11b 11c 12					
	y information copied from such Reports and Sta								
or	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and add	iress of any political committee to	solicit contributions from such committee.					
	New York Life Insurance Company Polit								
Α.	Full Name (Last, First, Middle Initial) Mr. Jonathan R. Jaramillo			Date of Receipt					
	Mailing Address 11 Turtle Ridge Court			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2290274					
	Ridgefield	CT	06877-1060	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			520.00					
	Name of Employer New York Life Insurance Company	Occupation Managing		-					
	Receipt For:		Year-to-Date V						
	Other (specify)	0 0	1040.00	P/R Deduction (\$40.00 Bi- Weekly)					
В.	Full Name (Last, First, Middle Initial) Mr. John G. Morris			Date of Receipt					
	Mailing Address 27 Noelle Court			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR229274					
	Amityville	NY	11701-3097	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		208.00					
	Name of Employer New York Life Insurance	Occupation							
	Company Receipt For:		Accountant Year-to-Date ▼						
	Primary General	Ayyreyale		P/R Deduction (\$16.00 Bi-					
	Other (specify)	0 0	416.00	Weekly)					
с.	Full Name (Last, First, Middle Initial) Mr. Son Van Nguyen			Date of Receipt					
	Mailing Address 6474 Marigayle Circle			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR2298274					
	Huntington Beach	CA	92648-6728	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		164.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company Receipt For:	Agent	Year-to-Date V	_					
Primary General Other (specify) ▼			320.00	P/R Deduction (\$30.00 Mon- thly)					
6	UBTOTAL of Receipts This Page (optional)			892.00					
\vdash									
Т	TOTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 162 / 395 (check only one)					
			or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
\mathbb{N}	NAME OF COMMITTEE (In Full)		0						
	New York Life Insurance Company Poli	tical Action	Committee						
́А.	Full Name (Last, First, Middle Initial) Mr. Jim Cama		Date of Receipt						
	Mailing Address 19 Crestwood Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR230274					
	East Hampton	СТ	06424-1322	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:		Year-to-Date V	_					
	Primary General Other (specify) ▼	U U U	312.00	P/R Deduction (\$26.00 Mon- thly)					
В.	Full Name (Last, First, Middle Initial) Mr. Floyd W. Franks			Date of Receipt					
	Mailing Address 425 Blue Water Pointe I	Drive							
	City	State	Zip Code	Transaction ID: PR2304274					
	Jasper	AL	35504-4067	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			195.00					
	Name of Employer New York Life Insurance	Occupation Managing							
	Company Receipt For:		Year-to-Date V						
	Primary General Other (specify) ▼	1 I 1 I	318.67	P/R Deduction (\$10.19 Bi- Weekly)					
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Peter P. Chan			Date of Receipt					
	Mailing Address 7805 E Starbright Court								
	City	State	Zip Code	Transaction ID: PR2314274					
	Tucson	AZ	85750-7048	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation Agent	ו						
	Company Receipt For:		Year-to-Date V						
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)					
				501.00					
	UBTOTAL of Receipts This Page (optional)		······						
Т	TOTAL This Period (last page this line number only)								

SCI	HEDULE A (FEC Form 3X)	[FOR LINE NUMBER: PAGE 163 / 395						
• •		Use separate schedule(s) or each category of the		(check only one)						
IIE	MIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 17						
Any or fo	nformation copied from such Reports and Star r commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)									
	lew York Life Insurance Company Poli	tical Action	Committee							
	ull Name (Last, First, Middle Initial) Is. Gayle A. Yeomans			Date of Receipt						
N	ailing Address 777 W End Avenue			M M / D D / Y Y Y Y						
С	ity	State	Zip Code	Transaction ID: PR2342274						
<u> </u>	lew York	NY	10025-5551	Amount of Each Receipt this Period						
	EC ID number of contributing deral political committee.	C		260.00						
	ame of Employer lew York Life Insurance	Occupation								
	company eceipt For:		Year-to-Date V	_						
	Primary General		F00.00	P/R Deduction (\$20.00 Bi-						
	Other (specify)	0 0	520.00	Weekly)						
	ull Name (Last, First, Middle Initial) Is. Joan M. Cronin			Date of Receipt						
N	Mailing Address 15 Steven Drive Apt. 7			M M / D D / Y Y Y Y						
С			Zip Code	Transaction ID: PR236274						
<u>C</u>	Dssining	NY	10562-1977	Amount of Each Receipt this Period						
	EC ID number of contributing deral political committee.	C		325.00						
N	ame of Employer lew York Life Insurance	Occupation								
<u>C</u>	ompany	Vice Pres								
R	eceipt For:	Aggregate	Year-to-Date V	_						
	Primary General Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)						
	ull Name (Last, First, Middle Initial) Ir. Ignacio A. Meneses			Date of Receipt						
	lailing Address 2 Earl Road			M M / D D / Y Y Y Y						
C	ity	State	Zip Code	Transaction ID: PR237274						
N	lelville	NY	11747-1314	Amount of Each Receipt this Period						
	EC ID number of contributing deral political committee.	C		156.00						
N	ame of Employer lew York Life Insurance	Occupation	1							
<u>C</u>	ompany	Agent								
R	eceipt For:	Aggregate	Year-to-Date V	_						
	Primary General Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)						
SUE	I BTOTAL of Receipts This Page (optional)		······	741.00						
	FAL This Period (last page this line number of			-						

¢/	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 164 / 395					
			Use separate schedule(s) or each category of the	(check only one)					
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.					
$\left \right\rangle$	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	_					
Α.	Full Name (Last, First, Middle Initial) Mr. Jean-Marie Fontan			Date of Receipt					
	Mailing Address 33-14 76th Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR239274					
	Jackson Heights	NY	11372-1152	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	, v	Year-to-Date V						
	Primary General			P/R Deduction (\$26.00 Mon-					
	Other (specify)	0 0	312.00	thly)					
в.	Full Name (Last, First, Middle Initial) Mr. George R. Gordon			Date of Receipt					
	Mailing Address 3807 Coventry Lane			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR240274					
	Boca Raton	FL	33496-4062	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		650.00					
	Name of Employer New York Life Insurance	Occupation Managing							
	Company Receipt For:		Year-to-Date V						
	Primary General		1000.00	P/R Deduction (\$50.00 Bi-					
	Other (specify)	0 0	1300.00	Weekly)					
С.	Full Name (Last, First, Middle Initial) Mr. Michael J. Falabella			Date of Receipt					
	Mailing Address 25503 147th Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR242274					
	Rosedale	NY	11422-2827	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		130.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company	Director		_					
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	223.67	P/R Deduction (\$5.19 Bi-W- eekly)					
s	LUBTOTAL of Receipts This Page (optional)		•	936.00					
F			······						
Т	TOTAL This Period (last page this line number only)								

5	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 165/395						
		Use separate schedule(s) or each category of the		(check only one)						
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 17						
	y information copied from such Reports and Sta for commercial purposes, other than using the n									
	NAME OF COMMITTEE (In Full)									
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committee							
\square										
Δ.	Full Name (Last, First, Middle Initial) Mr. Jayanti M. Patel			Date of Receipt						
	Mailing Address 23 Arcadian Drive									
	City	State	Zip Code	Transaction ID: PR244274						
	Wesley Hills	NY	10977-1100	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			156.00						
	Name of Employer New York Life Insurance	Occupation	1							
	Company Receipt For:	Agent	Year-to-Date V	_						
	Primary General	Aggregate		P/R Deduction (\$26.00 Mon-						
	Other (specify)		312.00	thly)						
				-						
R	Full Name (Last, First, Middle Initial) Mr. Wally Sims			Date of Receipt						
υ.	Mailing Address 3 Harborview Place									
	City	State	Zip Code	Transaction ID: PR247274						
	Center Moriches	NY	11934-3432	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		156.00						
	Name of Employer New York Life Insurance	Occupation	1							
	Company Receipt For:	Agent	Year-to-Date V	_						
	Primary General	Ayyreyale		P/R Deduction (\$26.00 Mon-						
	Other (specify)		312.00	thly)						
C	Full Name (Last, First, Middle Initial) Ms. Veronica E. McCarthy			Date of Receipt						
0.	Mailing Address 67118 Dartmouth Street									
		•								
	City	State	Zip Code	Transaction ID: PR250274						
	Forest Hills	NY	11375-4148	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		169.00						
	Name of Employer New York Life Insurance	Occupation	۱ Vice President - Claims							
	Company Receipt For:	1	Year-to-Date V	_						
	Primary General			P/R Deduction (\$13.00 Bi-						
	Other (specify) 🔻		338.00	Weekly)						
_										
				481.00						
	UBTOTAL of Receipts This Page (optional)									
Т	OTAL This Period (last page this line number or	nly)								
L		**	-							

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 166 / 395 (check only one)
ITEMIZED RECEIPTS		Detailed Summary Page		$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
\rangle	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Maryann L. Ingenito			Date of Receipt
	Mailing Address 305 Edinboro Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR252274
	Staten Island	NY	10306-1204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Company Occup Svp			260.00
			n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	395.44	P/R Deduction (\$20.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. Michael G. Gallo			Date of Receipt
	Mailing Address 4 Red Mill Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR258274
	Darien	CT	06820-3612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.12
	Name of Employer New York Life Insurance	Occupation		
	Company		tirement Income	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	D/D Deduction (\$10.24 Bi
	Other (specify)	0 0	500.24	P/R Deduction (\$19.24 Bi- Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Cordell Hoffer			Date of Receipt
	Mailing Address 65 Otterkill Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR259274
	New Windsor	NY	12533-8830	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company Receipt For:	Agent	e Year-to-Date 🔻	
	Primary General	Aygregate		P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0	300.00	thly)
s	UBTOTAL of Receipts This Page (optional)			660.12
	OTAL This Period (last page this line number o			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 167/395					
			or each category of the	(check only one)					
			Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
	y information copied from such Reports and Stat for commercial purposes, other than using the na								
\mathbb{N}	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Enrico R. Sorrentino			Date of Receipt					
	Mailing Address 1256 Turnbury Lane			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR262274					
	North Wales	PA	19454-3658	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	New York Life Insurance Company	Managing	g Partner						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Dan King			Date of Receipt					
	Mailing Address 2000 Mountainview Drive Suite 403	Э		M M / D D / Y Y Y Y 					
	City	State	Zip Code	Transaction ID: PR26274					
	Colchester	VT	05446-1905	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation	1	-					
	Company	Agent	<u> </u>						
	Receipt For: Primary General	Aggregate	Year-to-Date V						
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)					
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. James F. Nee			Date of Receipt					
	Mailing Address 19 Sidney School Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR263274					
	Annandale	NJ	08801-3510	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		104.00					
	Name of Employer New York Life Insurance	Occupation	n nformation Systems						
	Company Receipt For:		Year-to-Date V	-1					
	Primary General Other (specify) ▼		208.00	P/R Deduction (\$8.00 Bi-W- eekly)					
				585.00					
	UBTOTAL of Receipts This Page (optional)		•						
т	TOTAL This Period (last page this line number only)								

50	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 168 / 395					
		Use separate schedule(s) or each category of the		(check only one)					
11	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12					
				13 14 15 16 17					
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
$ \rangle$	New York Life Insurance Company Polit								
	New York Life insurance company For		Oommillee						
	Full Name (Last, First, Middle Initial)			,					
Α.	Ms. Jacqueline A. O'Leary			Date of Receipt					
	Mailing Address 52 Clyde Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR264274					
	New Hyde Park	NY	11040-2433	Amount of Each Receipt this Period					
	FEC ID number of contributing	С							
	federal political committee.			119.99					
	Name of Employer	Occupation	1	-					
	New York Life Insurance		sident						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Other (specify)		239.98	P/R Deduction (\$9.23 Bi-W- eekly)					
		0 0							
	Full Name (Last, First, Middle Initial)								
В.	Mr. Solomon Goldfinger			Date of Receipt					
	Mailing Address 14719 70th Avenue			M M / D D / Y Y Y Y					
	City		Zip Code	Transaction ID: PR267274					
	Flushing	State NY	11367-1715	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	C		440.05					
	Name of Employer	Occupation	1	_					
	Name of Employer New York Life Insurance Company	· ·	nior Advisor To the C.O.O.						
	Receipt For:		Year-to-Date 🔻						
	Primary General		P/R Deduction (\$33.85 Bi-						
	Other (specify)	0 0	880.10	Weekly)					
	Full Name (Last First Middle Initial)								
C.	Full Name (Last, First, Middle Initial) Ms. Recia L. Lord			Date of Receipt					
	Mailing Address 131 Saint Pauls Avenue	!		M M / D D / Y Y Y Y					
		Otels	Zin Oada						
	City Staten Island	State NY	Zip Code	Transaction ID: PR268274					
			10301-3232	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		130.00					
	Name of Employer New York Life Insurance	Occupation Vice Pres							
	Company		Year-to-Date V						
				P/R Deduction (\$10.00 Bi-					
	Other (specify)	0 0	260.00	Weekly)					
_									
				690.04					
	UBTOTAL of Receipts This Page (optional)		•						
Т	TOTAL This Period (last page this line number only)								

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 169 / 395				
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)				
			Detailed Summary Page	X 11a 11b 11c 12				
٨٢	y information copied from such Reports and Sta	tomonte moi	unot be sold or used by any pore	13 14 15 16 17				
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.				
$\left[\right]$	NAME OF COMMITTEE (In Full)							
$\left \right\rangle$	New York Life Insurance Company Polit	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Kevin J. Mulqueen			Date of Receipt				
	Mailing Address 41 Silo Lane			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR269274				
	Middletown	NY	10940-2603	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		102.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:		Year-to-Date V	-				
	Primary General		204.00	P/R Deduction (\$17.00 Mon-				
	Other (specify)	0 0		thly)				
В.	Full Name (Last, First, Middle Initial) Mr. Robert D. Rock			Date of Receipt				
	Mailing Address 8 Park Place			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR279274				
	Short Hills	NJ	07078-2826	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.12				
	Name of Employer New York Life Insurance	Occupation		7				
	Company		Chief Investment Officer - La	<u>&a</u>				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼	0.0	500.24	P/R Deduction (\$19.24 Bi- Weekly)				
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Marat Gakyman			Date of Receipt				
	Mailing Address 340 Travis Avenue							
	City	State	Zip Code	Transaction ID: PR281274				
	Staten Island	NY	10314-6129	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		208.02				
			1	7				
				_				
			Year-to-Date ▼					
	Other (specify)	0 0	416.04	P/R Deduction (\$34.67 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)			560.14				
Ĕ								
Т	TOTAL This Period (last page this line number only)							

50	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 170/395
		Use separate schedule(s) or each category of the		(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committee	
\angle				
Δ	Full Name (Last, First, Middle Initial) Mr. Ted R. Young			Date of Receipt
	Mailing Address 7360 Sierra Drive			
	City	State	Zip Code	Transaction ID: PR282274
	Granite Bay	CA	95746-6957	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		138.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Year-to-Date V	_
	Primary General	, iggi oguio		P/R Deduction (\$23.00 Mon-
	Other (specify) 🔻		276.00	thly)
				-
B.	Full Name (Last, First, Middle Initial) Mr. Patrick G. Boyle			Date of Receipt
	Mailing Address 7 Holmes Court			
	City	State	Zip Code	Transaction ID: PR285274
	Morristown	NJ	07960-2776	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		390.00
	· · · · · · · · · · · · · · · · · · ·			
	Name of Employer New York Life Insurance	Occupation	י Vice President	
	Company Receipt For:		Year-to-Date V	
	Primary General			P/R Deduction (\$30.00 Bi-
	Other (specify) 🔻	0 0	660.00	Weekly)
	Full Nome (Leet First Middle 1-91-1)			
C.	Full Name (Last, First, Middle Initial) Ms. Eileen T. Slevin			Date of Receipt
	Mailing Address 32 Dykers Farm Road			M M / D D / Y Y Y
			7. 0. 1	
	City North Haledon	State NJ	Zip Code 07508-2649	Transaction ID: PR289274
			07306-2049	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.12
	Name of Employer	Occupatior		_
	Name of Employer New York Life Insurance	Svp	I	
	Receipt For: Aggree Primary General		Year-to-Date V	_
			500.24	P/R Deduction (\$19.24 Bi-
	Other (specify)			Weekly)
s	UBTOTAL of Receipts This Page (optional)			778.12
\vdash	,			-
т	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 171 / 395 (check only one) X X 11a
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
$\overline{\mathbf{\nabla}}$	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit			
Α.	Full Name (Last, First, Middle Initial) Mr. Joel A. Shapiro			Date of Receipt
	Mailing Address 200 E 66th Street #302E)		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR293274
	New York	NY	10021-9188	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		240.00
	Name of Employer New York Life Insurance	Occupatio	n	
	Company Receipt For:	Agent	Veer te Dete	_
	Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (\$40.00 Mon
	Other (specify)	0 0	480.00	P/R Deduction (\$40.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Paul Delisio			Date of Receipt
	Mailing Address 99 Wildflower Lane	M · M / D · D / Y · Y · Y		
	City	State	Zip Code	Transaction ID: PR304274
	Shokan	NY	12481-5322	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer New York Life Insurance	Occupatio Agent	n	
	Company Receipt For:	, v	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$25.00 Mon- thly)
<u>с.</u>	Full Name (Last, First, Middle Initial) Ms. Lenora Wilson			Date of Receipt
	Mailing Address 9817 Hadrians Way			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR314274
	Shreveport	LA	71118-4843	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		132.72
	Name of Employer New York Life Insurance Company	Occupatio Agent	n	
			e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	250.08	P/R Deduction (\$20.84 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	512.72
	OTAL This Period (last page this line number or			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 395 (check only one) X X 11a 11b 11c 12
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	v not be sold or used by any perso	13 14 15 16 17
or	NAME OF COMMITTEE (In Full)	solicit contributions from such committee.		
	New York Life Insurance Company Politi	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Kenneth H. Hower			Date of Receipt
	Mailing Address 123 W Houston Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR319274
	Clovis	CA	93611-3537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer New York Life Insurance	Occupation		
	Company	Managing	5	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	B/B Doduction (\$20.00 Bi
	Other (specify)	0 0	380.00	P/R Deduction (\$20.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. John H. O'Byrne			Date of Receipt
	Mailing Address 18 Crowne Pond Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327274
	Wilton	СТ	06897-3029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:	Vice Pres	sident • Year-to-Date ▼	_
	Primary General	Aggregate		P/R Deduction (\$25.00 Bi-
	Other (specify)	0 0	650.00	Weekly)
c.	Full Name (Last, First, Middle Initial) Mr. Steven Archer			Date of Receipt
	Mailing Address 122 Woods Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR334274
	Malverne	NY	11565-1045	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		320.00
	Name of Employer New York Life Insurance	Occupation		7
	New Fork Life insulative Managing Company Managing Receipt For: Aggregate Primary General		-	_
			e Year-to-Date V	D/D Deduction (#40.00 Di
	Other (specify) ▼	0 0	840.00	P/R Deduction (\$40.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		·····	905.00
T	OTAL This Period (last page this line number on	ly)		

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 173/395					
ITEMIZED RECEIPTS		or each category of the		(check only one) X 11a 11b 11c 12					
-			Detailed Summary Page	13 14 15 16 17					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
\rangle	New York Life Insurance Company Polit	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Carl E. Roberts			Date of Receipt					
	Mailing Address 1339 Carroll Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR336274					
	Brooklyn NY		11213-4301	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:		Year-to-Date V	_					
	Primary General Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)					
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Gerard A. Rocchi			Date of Receipt					
Б.	Mailing Address 789 Mountain Laurel Ro	ad							
	City	State	Zip Code	Transaction ID: PR351274					
	Fairfield	СТ	06824-2426	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.12					
	Name of Employer New York Life Insurance	Occupation	ı	-					
	Company	Svp							
	Receipt For: Primary General	Aggregate	Year-to-Date V						
	Other (specify) ▼	0 0	500.24	P/R Deduction (\$19.24 Bi- Weekly)					
<u>с.</u>	Full Name (Last, First, Middle Initial) Ms. Kornelia Seyfried-Caulo			Date of Receipt					
	Mailing Address 303 Frederick Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR361274					
	Dix Hills	NY	11746-7009	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			208.02					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company		Veer to Data 🖛						
			Year-to-Date V	B/B Doduction (\$24.67 Mon					
	Other (specify)	0 0	416.04	P/R Deduction (\$34.67 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)			614.14					
т	TOTAL This Period (last page this line number only)								

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 174/395		
ITEMIZED RECEIPTS		or each category of the		(check only one)		
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Δr	y information copied from such Reports and Sta	tomonte may				
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.		
\sum	NAME OF COMMITTEE (In Full)					
\geq	New York Life Insurance Company Poli	tical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Mr. Richard W. Zuccaro			Date of Receipt		
	Mailing Address 55 Marina Road			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR364274		
	Island Park	NY	11558-1006	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		130.00		
	Name of Employer New York Life Insurance Company	Occupation				
	Receipt For:	Aggregate	e Year-to-Date 🔻	_		
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)		
	Full Name (Last, First, Middle Initial)					
В.	Mr. Robert J. Smith			Date of Receipt		
	Mailing Address 39-856 Morningside Driv	ve		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR366274		
	Rancho Mirage	CA	92270-3016	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer New York Life Insurance	Occupation	n			
	Company	Agent				
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify) ▼	0 0	500.00	P/R Deduction (\$80.00 Mon- thly)		
с.	Full Name (Last, First, Middle Initial) Ms. Elaine Ashworth			Date of Receipt		
	Mailing Address 300 East 85th Street Apt. 1404			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR372274		
	New York	NY	10028-4594	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		180.00		
	Name of Employer New York Life Insurance	Occupatio	n	7		
	Company	Agent	Veer to Dete	_		
	Receipt For: Aggr		e Year-to-Date 🔻			
	Other (specify) ▼	0 0	360.00	P/R Deduction (\$30.00 Mon- thly)		
s	LUBTOTAL of Receipts This Page (optional)			810.00		
	OTAL This Period (last page this line number o			-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 175 / 395 (check only one)
11			Detailed Summary Page	
	y information copied from such Reports and Stat for commercial purposes, other than using the na			
\mathbb{N}	NAME OF COMMITTEE (In Full)			
\sum	New York Life Insurance Company Politi			
Α.	Full Name (Last, First, Middle Initial) Ms. Susan Kenney Reeves			Date of Receipt
	Mailing Address 21482 Montbury Drive			M M / D D / Y Y Y
	City		Zip Code	Transaction ID: PR376274
	Lake Forrest	CA	92630-6551	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For: Primary General	Aggregate	Year-to-Date V	D/D Deduction (#00.00 Man
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Jules DelVecchio			Date of Receipt
	Mailing Address 4 Sackett Circle			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR379274
	Larchmont	NY	10538-1002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		President Year-to-Date ▼	
	Primary General	Aggregate		P/R Deduction (\$25.00 Bi-
	Other (specify)	0 0	650.00	Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Joseph A. Nebgen			Date of Receipt
	Mailing Address 17290 Highland Avenue Apt. 4M			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR383274
	Jamaica	NY	11432-2826	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation Assistant	Vice President - Complianc	e .
	Company Receipt For:		Year-to-Date V	
	Primary General Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	611.00
Т	OTAL This Period (last page this line number on	ly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 176 / 395 (check only one)				
۸~	y information copied from such Reports and Sta	tomonto mo	, ,	13 14 15 16 17				
	for commercial purposes, other than using the n							
$\left \right $	NAME OF COMMITTEE (In Full)		0					
\mathbb{Z}	New York Life Insurance Company Polit							
Α.	Full Name (Last, First, Middle Initial) Mr. Salvatore F. Farina			Date of Receipt				
	Mailing Address 5 Sir Kenneth Court			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR385274				
	Northport	NY	11768-1554	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		572.65				
	Name of Employer New York Life Insurance	Occupatio	n					
	Company	Managin	•	_				
	Receipt For: Primary General	Aggregate	e Year-to-Date V					
	Other (specify)	0 0	1145.30	P/R Deduction (\$44.05 Bi- Weekly)				
в.	Full Name (Last, First, Middle Initial) Mr. James M. Lauzon			Date of Receipt				
	Mailing Address 8 New Castle Drive	M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR39274				
	Avon	СТ	06001-3151	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		520.00				
	Name of Employer New York Life Insurance	Occupatio						
	Company	Managin	•					
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	D/D Deduction (\$40.00 Di				
	Other (specify)	0 0	1040.00	P/R Deduction (\$40.00 Bi- Weekly)				
с.	Full Name (Last, First, Middle Initial) Mr. Frank M. Boccio			Date of Receipt				
	Mailing Address 18 Williamson Street			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR394274				
	East Rockaway	NY	11518-1919	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		439.27				
	Name of Employer New York Life Insurance Company	York Life Insurance						
	Receipt For:		e Year-to-Date 🔻					
	Other (specify)		878.54	P/R Deduction (\$33.79 Bi- Weekly)				
s	UBTOTAL of Receipts This Page (optional)		·····	1531.92				
Т	TOTAL This Period (last page this line number only)							

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 177/395			
	ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)			
11			Detailed Summary Page	X 11a 11b 11c 12			
·							
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
$ \rangle$	New York Life Insurance Company Polit	ical Action	Committee				
Ľ	Full Nome (Lept. First Middle Initial)						
Α.	Full Name (Last, First, Middle Initial) Mr. Piero V. Silvestri			Date of Receipt			
	Mailing Address 808 Preston Road			M · M / D · D / Y · Y · Y · Y			
	<u></u>	Ctoto	Zip Code				
	City East Meadow	State NY	11554-4530	Transaction ID: PR400274 Amount of Each Receipt this Period			
	federal political committee.	C		150.00			
	Name of Employer New York Life Insurance	Occupation	1				
	Company	Agent	Veer to Deta	_			
	Receipt For: Primary General	Aggregate	Year-to-Date V	D/D Dathering (#05.00 Mar			
	Other (specify)		300.00	P/R Deduction (\$25.00 Mon- thly)			
		<u> </u>		4			
B	Full Name (Last, First, Middle Initial) Mr. Joseph Castro			Date of Receipt			
	Mailing Address 110-21 55th Avenue						
	City	State	Zip Code	Transaction ID: PR404274			
	Corona	NY	11368-3309	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		156.00			
	Name of Employer	Occupation					
	Name of Employer New York Life Insurance Company	Agent					
	Receipt For:		Year-to-Date V				
	Primary General		312.00	P/R Deduction (\$26.00 Mon-			
	Other (specify)		512.00	thly)			
С.	Full Name (Last, First, Middle Initial) Mr. Richard A. Wadsworth			Date of Receipt			
0.	Mailing Address 2211 Chardonnay Terrad	ce					
	City	State	Zip Code	Transaction ID: PR406274			
	Parrish	FL	34219-1208	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		300.00			
	Name of Employer	Occupation]				
	Name of Employer New York Life Insurance Company	Agent					
	Receipt For: Aggrega		Year-to-Date V				
			600.00	P/R Deduction (\$50.00 Mon-			
	Other (specify)	1 1		thly)			
Γ				606.00			
S	UBTOTAL of Receipts This Page (optional)						
т	TOTAL This Period (last page this line number only)						

S	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 178/395
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
11			Detailed Summary Page	X 11a 11b 11c 12
Δ	vinformation conied from each Departs and Ot-	tomonte er -		13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	riou be sold or used by any perso ress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\left \right\rangle$	New York Life Insurance Company Politi			
Α.	Full Name (Last, First, Middle Initial) Ms. Alison Flaum Souksamlane			Date of Receipt
	Mailing Address 15506 Clover Ridge			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR409274
	San Antonio	TX	78248-1333	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			500.04
	Name of Employer New York Life Insurance	Occupation	1	
	<u>Company</u> Agent			_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	1000.08	P/R Deduction (\$83.34 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Ms. Kathleen A. Donnelly			Date of Receipt
	Mailing Address 47 Southview Circle			M • M / D • D / Y • Y • Y • Y
	City	State	Zip Code	Transaction ID: PR410274
	Lake Grove	NY 11755-2244		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			260.00
	Name of Employer New York Life Insurance	Occupation		
	Company	Vice Pres		
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify) ▼		443.00	P/R Deduction (\$20.00 Bi- Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Eric S. Rubin			Date of Receipt
	Mailing Address 419 Freeman Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR416274
	Oceanside	NY	11572-4506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Svp Receipt For: Aggre			_
			Year-to-Date V	
	Other (specify) ▼		1300.00	P/R Deduction (\$50.00 Bi- Weekly)
s	LUBTOTAL of Receipts This Page (optional)		·····	1410.04
F				
Т	OTAL This Period (last page this line number of	nly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 179 / 395 (check only one)					
			Detailed Summary Page						
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.					
Ν	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Edward J. Kaminski			Date of Receipt					
	Mailing Address 63 Fern Street			M M / D D / Y Y Y Y					
	City Stat Floral Park NY		Zip Code	Transaction ID: PR423274					
			11001-3207	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		130.00					
	Name of Employer New York Life Insurance Company	Occupation Vice Pres							
	Receipt For:	Aggregate	Year-to-Date V						
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Lenny Marotta			Date of Receipt					
	Mailing Address 6 Fair Oaks Lane			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR424274					
	Smithtown	NY	11787-4016	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		52.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	1						
	Receipt For:	l v	Year-to-Date V	_					
	Primary General Other (specify) ▼	0 0	208.00	P/R Deduction (\$26.00 Mon- thly)					
— C.	Full Name (Last, First, Middle Initial) Mr. George C. Vatore			Date of Receipt					
	Mailing Address 3748 Wildwood Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR428274					
	Yorktown Heights	NY	10598-1131	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Partner							
			Year-to-Date V						
	Other (specify) ▼		390.00	P/R Deduction (\$15.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)			377.00					
т	TOTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 180 / 395 (check only one) X 11a 11b 11c 12				
			Detailed Summary Page					
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Politi							
Α.	Full Name (Last, First, Middle Initial) Mr. John Bravata			Date of Receipt				
	Mailing Address 9354 Amherst Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR44861274				
	Brighton	MI	48114-4992	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		100.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent						
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (#05.00 Di				
	Other (specify)	0 0	425.00	P/R Deduction (\$25.00 Bi- Weekly)				
в.	Full Name (Last, First, Middle Initial) Mr. James O. DeVito			Date of Receipt				
	Mailing Address 3 Fiske Pond Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR44864274				
	Holliston	MA	01746-2051	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		520.00				
	Name of Employer New York Life Insurance	Occupation						
	Company Receipt For:	Senior Pa	artner • Year-to-Date 🔻	_				
	Primary General	Aggregate		P/P Doduction (\$40.00 Pi				
	Other (specify)	0 0	1040.00	P/R Deduction (\$40.00 Bi- Weekly)				
C.	Full Name (Last, First, Middle Initial) Mr. Kinh-Huu Lam			Date of Receipt				
	Mailing Address 991 Lurline Drive			M M / D D / Y Y Y				
	City	State	Zip Code	Transaction ID: PR44872274				
	Foster City	CA	94404-1832	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		325.00				
	Name of EmployerOccupatiNew York Life InsuranceSenior ICompanyReceipt For:Aggrega							
			e Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)				
s	UBTOTAL of Receipts This Page (optional)			945.00				
Т	TOTAL This Period (last page this line number only)							
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 181 / 395 (check only one)					
-----------------------------------------------	-----------------------------------------------------------------------------------------------------	--------------------------------------------------	-------------------------------------------------------------------------	--------------------------------------------------------				
			Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $				
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions				
$\overline{\mathbf{N}}$	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Politi	cal Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Darin Fass			Date of Receipt				
	Mailing Address 30 Carlton Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR44873274				
	Mount Kisco	NY	10549-4756	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		260.00				
	Name of Employer New York Life Insurance	Occupation						
	Company	Managing	•	_				
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻					
	Other (specify)	0 0	413.67	P/R Deduction (\$15.19 Bi- Weekly)				
в.	Full Name (Last, First, Middle Initial) Mr. Steven J. Kramer			Date of Receipt				
	Mailing Address 111 W Ravine Court			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR44874274				
	Mequon	WI	53092-5861	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		325.00				
	Name of Employer New York Life Insurance	Occupation						
	Company	Managing						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D Daduation (#05.00 Di				
	Other (specify)	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)				
с.	Full Name (Last, First, Middle Initial) Mr. David Skinner			Date of Receipt				
	Mailing Address 22 Stoneymeade Walk			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR44877274				
	Acton	MA	01720-5676	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		350.88				
	Name of Employer New York Life Insurance Company	Occupation Chief Exe	n ecutive Officer - Asia Region					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Other (specify) ▼	0 0	731.00	P/R Deduction (\$29.24 Bi- Weekly)				
s	UBTOTAL of Receipts This Page (optional)			935.88				
Т	OTAL This Period (last page this line number on	ly)	·					

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 182 / 395 (check only one)		
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12		
•						
	y information copied from such Reports and Sta for commercial purposes, other than using the n					
\sum	NAME OF COMMITTEE (In Full)					
\geq	New York Life Insurance Company Polit	tical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Mr. Gregory D. Tyson			Date of Receipt		
	Mailing Address 1122 Garden Street			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR44878274		
	Hoboken	NJ	07030-4305	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			250.12		
	Name of Employer New York Life Insurance	Occupation	ı			
	Company Receipt For:	Svp	e Year-to-Date ▼	_		
	Primary General	, iggi ogaio		P/R Deduction (\$19.24 Bi-		
	Other (specify) v	0 0	500.24	Weekly)		
в.	Full Name (Last, First, Middle Initial) Ms. Amelia Scott			Date of Receipt		
	Mailing Address 3920 Arkwright Road Suite 160			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR44880274		
	Macon	GA	31210-1744	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		195.00		
	Name of Employer New York Life Insurance	Occupation				
	Company	Managing				
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/P Doduction (\$15.00 Pi		
	Other (specify)	0 0	390.00	P/R Deduction (\$15.00 Bi- Weekly)		
с.	Full Name (Last, First, Middle Initial) Mr. Romany S. Abraham			Date of Receipt		
	Mailing Address 3350 Hampshire Road			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR44881274		
	Furlong	PA	18925-1254	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		325.00		
	Name of Employer New York Life Insurance	Occupation				
	Company	Managin	-	_		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (#05.00 Di		
	Other (specify)	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)		
s	UBTOTAL of Receipts This Page (optional)			770.12		
т	OTAL This Period (last page this line number or	nly)				

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 183 / 395			
ITEMIZED RECEIPTS			or each category of the	(check only one)			
			Detailed Summary Page				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full)						
\rangle	New York Life Insurance Company Polit	tical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Brett Bargery			Date of Receipt			
	Mailing Address 505 Liberty Court			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR44884274			
	Colleyville	TX	76034-7619	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		130.00			
	Name of Employer New York Life Insurance	Occupation	1				
	Company	Managing	-				
	Receipt For:	Aggregate	Year-to-Date V				
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)			
в.	Full Name (Last, First, Middle Initial) Mr. Robert J. Blake			Date of Receipt			
	Mailing Address 105 Meadow Ridge Roa	d		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR44885274			
	Warwick	NY	10990-2569	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		195.00			
	Name of Employer New York Life Insurance	Occupation		-			
	Company		e President	_			
	Receipt For:	Aggregate	Year-to-Date V				
	Other (specify)		390.00	P/R Deduction (\$15.00 Bi- Weekly)			
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Stanley M. Friedman			Date of Receipt			
	Mailing Address 25 Round Tree Drive			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR44888274			
	Melville	NY	11747-3314	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		520.00			
	Name of Employer New York Life Insurance	Occupation		7			
	Company	Managing	,				
	Receipt For:	Aggregate	Year-to-Date V				
	Other (specify)	0 0	1040.00	P/R Deduction (\$40.00 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)		·····	845.00			
\vdash	OTAL This Period (last page this line number only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 184/395
ITEMIZED RECEIPTS		or each category of the		(check only one)
			Detailed Summary Page	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	not be sold or used by any personners of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		-	
\geq	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. David A. Harland			Date of Receipt
	Mailing Address 200 E 66th Street Apt. A-1903			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR44890274
	New York	NY	10021-9179	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			260.00
	Name of Employer New York Life Insurance Company	Occupation First V.P.	ո . & Dep Gen Counsel & Dep	Sec
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	520.00	P/R Deduction (\$20.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Robert A. Hodgkiss			Date of Receipt
	Mailing Address 5824 Fairmount Avenue	•		M M / D D / Y Y Y Y
	City		Zip Code	Transaction ID: PR44891274
	Downers Grove	IL	60516-1411	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		325.00
	Name of Employer New York Life Insurance	Occupation		_
	Company	Managing		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/R Deduction (\$25.00 Pi
	Other (specify)		650.00	P/R Deduction (\$25.00 Bi- Weekly)
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. George M. Kay			Date of Receipt
	Mailing Address 8930 Colonial Place			M • M / D • D / Y • Y • Y • Y
	City	State	Zip Code	Transaction ID: PR44892274
	Duluth	GA	30097-6650	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer New York Life Insurance	Occupation		
	Company		g Partner e Year-to-Date ▼	_
				P/R Deduction (\$20.00 Bi-
	Other (specify)		520.00	Weekly)
s	UBTOTAL of Receipts This Page (optional)			845.00
т	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 185/395 (check only one)			
IT	EMIZED RECEIPTS		or each category of the	X 11a $11b$ 11c 12			
			Detailed Summary Page				
	y information copied from such Reports and Sta for commercial purposes, other than using the na						
	NAME OF COMMITTEE (In Full)						
\rangle	New York Life Insurance Company Polit						
Α.	Full Name (Last, First, Middle Initial) Mr. Joseph J. La Pietra			Date of Receipt			
	Mailing Address 12601 Split Creek Court			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR44893274			
	North Potomac	MD	20878-3999	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			325.00			
	Name of Employer New York Life Insurance	Occupation	n				
	Company	Managing	g Partner				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)			
в.	Full Name (Last, First, Middle Initial) Mr. Mark J. Madgett			Date of Receipt			
	Mailing Address 24634 Southeast 9th Pla	M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR44895274			
	<u>Sammamish</u>	WA	98074-3447	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		325.00			
	Name of Employer New York Life Insurance	Occupation Managing					
	Company Receipt For:		e Year-to-Date V				
	Primary General Other (specify) ▼		650.00	P/R Deduction (\$25.00 Bi- Weekly)			
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Jerry B. McKinney			Date of Receipt			
0.	Mailing Address 2601 25th Street Southe Suite 350	ast					
	City	State	Zip Code	Transaction ID: PR44896274			
	Salem	OR	97302-1283	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		325.00			
	Name of Employer New York Life Insurance	Occupatio	n				
	New York Life Insurance Company	Managing	g Partner				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼	0 0 0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)			975.00			
	OTAL This Period (last page this line number or			· · · · · · · · · · · · · · · · · · ·			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		FOR LINE NUMBER: PAGE 186 / 395 (check only one)
••		Detailed Summary Page		
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	_
Α.	Full Name (Last, First, Middle Initial) Mr. Roland Ghazal			Date of Receipt
	Mailing Address 3111 Danielle Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR44897274
	Livermore	CA	94550-6888	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Occupa			195.00
	Company	Managin	•	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	390.00	P/R Deduction (\$15.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Ms. Joyce B. Russell			Date of Receipt
	Mailing Address 1005 Fraser Avenue So	utheast		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR44898274
	Huntsville	AL	35801-3138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer New York Life Insurance	Occupatio	n	
	Company		.O. Agency Standards Cons	ullan
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)
С.	Full Name (Last, First, Middle Initial) Mr. Kenneth N. Savoie			Date of Receipt
	Mailing Address 5383 Chaucers Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR44899274
	Roanoke	VA	24018-4600	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupatio		
	Company	-	g Partner	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	LUBTOTAL of Receipts This Page (optional)		······	650.00
	OTAL This Period (last page this line number o			

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 187/395			
IT	EMIZED RECEIPTS		or each category of the		(check only one)			
			Detailed Summary Page					
	y information copied from such Reports and Sta for commercial purposes, other than using the n							
\sum	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee					
A.	Full Name (Last, First, Middle Initial) Mr. Michael F. Scovel			Date of Receipt				
	Mailing Address 20 W Mundhank Road				M M / D D / Y Y Y Y			
	City	State	Zip Code		Transaction ID: PR44900274			
	South Barrington	IL	60010-9557		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.				325.00			
	Name of Employer New York Life Insurance Company	Occupation Managing						
	Receipt For:		e Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	650.00		P/R Deduction (\$25.00 Bi- Weekly)			
в.	Full Name (Last, First, Middle Initial) Mr. Dave Tomlin				Date of Receipt			
υ.	Mailing Address 4003 Granada Drive So	utheast						
	City		Zip Code		Transaction ID: PR44902274			
	Huntsville	AL	35802-1209		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			250.00			
	Name of Employer New York Life Insurance Company	Occupation Agent	n					
	Receipt For:	U U	e Year-to-Date 🔻					
	Primary General Other (specify) ▼	U U U	900.00		P/R Deduction (\$50.00 Bi- Weekly)			
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Jeff Bacchas				Date of Receipt			
	Mailing Address 8 Gregory Court				M M / D D / Y Y Y Y			
	City	State	Zip Code		Transaction ID: PR44904274			
	Farmingvlle	NY	11738		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			195.00			
	Name of Employer New York Life Insurance	Occupatio						
	Company	Senior P						
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Other (specify) ▼	318.67	0	P/R Deduction (\$15.00 Bi- Weekly)				
s	UBTOTAL of Receipts This Page (optional)			•	770.00			
т	OTAL This Period (last page this line number or	רוץ)		•				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the		FOR LINE NUMBER: PAGE 188 / 395 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
Δr	ny information copied from such Reports and Sta	atements may	not be sold or used by any perce	13 14 15 16 17 16 17
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\mathbb{N}}$	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	itical Action	Committee	
A.	Full Name (Last, First, Middle Initial) Mr. Mehmood N. Daya			Date of Receipt
	Mailing Address 22106 Grand Cove Cou	urt		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR44905274
	Katy	TX	77450-8097	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Senior Pa		
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	510.00	P/R Deduction (\$25.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Troy K. Holman			Date of Receipt
	Mailing Address 210 Quisset Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR44907274
	Wayne	PA	19087-2185	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		455.00
	Name of Employer New York Life Insurance	Occupation Managing		
	Company Receipt For:		e Year-to-Date V	_
	Primary General Other (specify) ▼		840.00	P/R Deduction (\$35.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. William P. Horton, III			Date of Receipt
0.	Mailing Address 2243 Vaughn Lane			
	City	State	Zip Code	Transaction ID: PR44908274
	Montgomery	AL	36106-3204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		.O. Agency Standards Cons e Year-to-Date ▼	ullan
	Primary General	Ayyreyate		P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
s	UBTOTAL of Receipts This Page (optional)			910.00
	OTAL This Period (last page this line number c			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 189 / 395 (check only one) X X 11a 11b 11c 12
	y information copied from such Reports and Sta		y not be sold or used by any perso	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Polit			
Α.	Full Name (Last, First, Middle Initial) Mr. Kyle T. Williamson			Date of Receipt
	Mailing Address 6805 Beckworth Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR44912274
	Plano	ТХ	75024-7536	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		e President e Year-to-Date ▼	_
	Primary General Other (specify) ▼	Aggregate	520.00	P/R Deduction (\$20.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Robert P. Mason			Date of Receipt
	Mailing Address 7 Glarus Court			M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR44914274
	Fairport	NY	14450-4641	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		585.00
	Name of Employer New York Life Insurance	Occupation Managing		
	Company Receipt For:		e Year-to-Date V	_
	Primary General Other (specify) ▼		1170.00	P/R Deduction (\$45.00 Bi- Weekly)
<u></u>	Full Name (Last, First, Middle Initial) Mr. Mark A. Heck			Date of Receipt
	Mailing Address 500 Cliffwood Avenue Apt. #D-9			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR44922274
	Matawan	NJ	07747-2825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer New York Life Insurance Company		inancial Analysis Consultant	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 650.00	P/R Deduction (\$25.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1170.00
Т	OTAL This Period (last page this line number or	ıly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		FOR LINE NUMBER: PAGE 190 / 395 (check only one)
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
	y information copied from such Reports and Stai for commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full)			
\geq	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Andrew S. Hajducek			Date of Receipt
	Mailing Address 10 Penrose Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR454274
	Princeton Junction	NJ	08550-3534	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			130.00
	Name of Employer New York Life Insurance Company	Occupation First Vice	n e President	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. David M. Stewart			Date of Receipt
	Mailing Address 108 Hickory Road			M M / D D / Y Y Y Y
	City		Zip Code	Transaction ID: PR45542274
	Bullard	TX	75757-5064	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation Senior Pa		_
	Company Receipt For:		e Year-to-Date ▼	_
	Primary General Other (specify) ▼		223.67	P/R Deduction (\$5.19 Bi-W- eekly)
<u></u>	Full Name (Last, First, Middle Initial) Mr. William P. Tate			Date of Receipt
	Mailing Address 29355 Regency Circle			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR45557274
	Westlake	OH	44145-6705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer New York Life Insurance Company	Occupation Service C	n Center Vice President	
	Receipt For:	Aggregate	Year-to-Date 🔻	
Primary General Other (specify) ▼			390.00	P/R Deduction (\$15.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		······	455.00
	OTAL This Period (last page this line number or			-

5	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 191/395		
· · · · ·		Use separate schedule(s) or each category of the		(check only one)		
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee			
A.	Full Name (Last, First, Middle Initial) Ms. Patrice M. Cortelli			Date of Receipt		
	Mailing Address 17 Crescent Court			M · M / D · D / Y · Y · Y · Y		
	City	State	Zip Code	Transaction ID: PR457274		
	Peekskill	NY	10566-3902	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			130.00		
	Name of Employer New York Life Insurance Company	Occupation Assistant	ار Vice President - Service			
	Receipt For:	Aggregate	Year-to-Date V	_		
	Primary General Other (specify) v		260.00	P/R Deduction (\$10.00 Bi- Weekly)		
в.	Full Name (Last, First, Middle Initial) Ms. Betty Virgili			Date of Receipt		
υ.	Mailing Address 10310 Saint Ives Court					
	City		Zip Code	Transaction ID: PR459274		
	Orlando	FL	32817-3291	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		150.00		
	Name of Employer New York Life Insurance Company	Occupation Agent	1			
	Receipt For:	Aggregate	Year-to-Date 🔻			
	Primary General Other (specify) The second seco	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Raymond J. Scott Clu Chfc			Date of Receipt		
	Mailing Address 321 West 14th Street					
	City	State	Zip Code	Transaction ID: PR461274		
	New York	NY	10014-5019	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		150.00		
	Name of Employer New York Life Insurance Company	Occupation Agent	1			
	Receipt For:		Year-to-Date 🔻	-		
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)		
s	UBTOTAL of Receipts This Page (optional)		······	430.00		
\vdash	OTAL This Period (last page this line number or			-		
	UTAL THIS FERIOU (last page this line number of	"y)	·····			

9	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 192/395		
			Use separate schedule(s) or each category of the	(check only one)		
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso litess of any political committee to	on for the purpose of soliciting contributions		
$\overline{\nabla}$	NAME OF COMMITTEE (In Full)					
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committee			
\square						
Δ	Full Name (Last, First, Middle Initial) Mr. James P. McNicholas			Date of Receipt		
	Mailing Address 32 Kinzley Street					
	City State		Zip Code	Transaction ID: PR46768274		
	Little Ferry	NJ	07643-1006	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		325.00		
	Name of Employer New York Life Insurance	Occupation				
	Company Receipt For:		g Director year-to-Date ▼	_		
	Primary General	Aggregate		P/P Doduction (\$25.00 Pi		
	Other (specify) \bigtriangledown		650.00	P/R Deduction (\$25.00 Bi- Weekly)		
				4		
D	Full Name (Last, First, Middle Initial)			Data of Reasint		
D.	Mr. Joseph M. Franklin Mailing Address 33 Round Hll Road			Date of Receipt		
	City	State	Zip Code	Transaction ID: PR476274		
	Washingtonvle	NY	10992-2020	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		150.00		
	federal political committee.					
	Name of Employer New York Life Insurance	Occupation	ı			
	Company	Agent	<u> </u>	_		
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻			
	Other (specify)		300.00	P/R Deduction (\$25.00 Mon- thly)		
_		L00				
~	Full Name (Last, First, Middle Initial)					
U.	Mr. Raymond J. Sander	vord		Date of Receipt		
	Mailing Address 4422 Washington Boule	varu		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR480274		
	Arlington	VA	22201-4777	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		500.11		
	federal political committee.					
	Name of Employer New York Life Insurance	Occupation				
	Company	Vice Pres		_		
	Receipt For: Aggreg Primary General Other (specify) ▼		Year-to-Date V			
			1000.22	P/R Deduction (\$38.47 Bi- Weekly)		
		<u> </u>	0 0 0 0 0 0 0			
	•			075 14		
s	UBTOTAL of Receipts This Page (optional)		•••••••	975.11		
		-1.)				
Ľ	OTAL This Period (last page this line number or	niy)				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 193 / 395 (check only one)							
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and S or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full)										
New York Life Insurance Company Po	litical Actior	n Committee								
Full Name (Last, First, Middle Initial) A. Mr. Richard J. Pinkos										
Mailing Address 16 Carolyn Terrace			M M / D D / Y Y Y Y							
City	State	Zip Code	Transaction ID: PR48274							
Chicopee	MA	01020-3543	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		156.00							
Name of Employer New York Life Insurance Company	Occupatio Agent	n								
Receipt For:		e Year-to-Date 🔻								
Primary General Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)							
Full Name (Last, First, Middle Initial) B. Ms. Judith E. Campbell			Date of Receipt							
Mailing Address 54 Samson Avenue			M M / D D / Y Y Y Y							
City	State	Zip Code	Transaction ID: PR491274							
Madison	NJ	07940-2840	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		500.11							
Name of Employer New York Life Insurance Company	Occupatio Svp & Cl	n nief Information Officer								
Receipt For:	<u> </u>	e Year-to-Date 🔻								
Other (specify)	0 0	1000.22	P/R Deduction (\$38.47 Bi- Weekly)							
Full Name (Last, First, Middle Initial) C. Mr. Vishnu Patel			Date of Receipt							
Mailing Address 108-28 63 Drive			M M / D D / Y Y Y Y							
City	State	Zip Code	Transaction ID: PR494274							
Forest Hills	NY	11375-1410	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		156.00							
Name of Employer New York Life Insurance	Occupatio Agent	n								
Company		e Year-to-Date V								
Primary General Other (specify) ▼		312.00	P/R Deduction (\$26.00 Mon- thly)							
SUBTOTAL of Receipts This Page (optional)	I	b	812.11							
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)									

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 194 / 395 (check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12
		Detailed Summary Page		
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. John Dipalermo		Date of Receipt	
	Mailing Address 3297 Padilla Way			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR504274
	San Jose	CA	95148-2746	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		700.00
	Name of Employer New York Life Insurance Company	Occupation Agent	ı	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1000.00	P/R Deduction (\$83.34 Mon- thly)
В.	Full Name (Last, First, Middle Initial) Mr. David R. Tarella			Date of Receipt
	Mailing Address 489 Stage Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR509274
	Charlton	NY	12019-2704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance Company	Occupation Agent	1	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Mr. Brian M. O'Neill			Date of Receipt
	Mailing Address 45 Saint Michaels Te			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR510274
	Carmel	NY	10512-2006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		104.00
	Name of Employer New York Life Insurance Company	Occupation	n ssociate General Counsel	7
	Receipt For:		Year-to-Date ▼	1
	Primary General Other (specify) ▼	0 0	208.00	P/R Deduction (\$8.00 Bi-W- eekly)
s	UBTOTAL of Receipts This Page (optional)			960.00
	OTAL This Period (last page this line number o			

5	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 195/395				
· · · ·		Use separate schedule(s) or each category of the		(check only one)				
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
			, ,	13 14 15 16 17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
\sum	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Poli	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Ms. Mary Hallahan			Date of Receipt				
	Mailing Address 172 Wayne Avenue			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR512274				
	River Edge	NJ	07661-1106	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		130.00				
	Name of Employer New York Life Insurance	Occupation						
	Company Receipt For:		Year-to-Date V	_				
	Primary General			P/R Deduction (\$10.00 Bi-				
	Other (specify) v	0 0	260.00	Weekly)				
в.	Full Name (Last, First, Middle Initial) Mr. Thomas P. Shea			Date of Receipt				
	Mailing Address 20 Makanna Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR527274				
	Huntington	NY	11743-2935	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		455.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	First Vice	President					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Other (specify) ▼	0 0	855.00	P/R Deduction (\$35.00 Bi- Weekly)				
	Full Name (Last, First, Middle Initial) Mr. Robert B. O'Neill			Date of Receipt				
	Mailing Address 6080 Cabotage Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR529274				
	Duluth	GA	30097-8476	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			195.00				
	Name of Employer New York Life Insurance	Occupation	1	7				
	New York Life Insurance Company		ne Chief Operating Officer					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	390.00	P/R Deduction (\$15.00 Bi- Weekly)				
s	UBTOTAL of Receipts This Page (optional)		·····	780.00				
\vdash				-				
L'	TOTAL This Period (last page this line number only)							

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 196 / 395 (check only one)
ITEMIZED RECEIPTS		Detailed Summary Page		X 11a 11b 11c 12
•	information conied for such Decederation 10:			
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\geq	New York Life Insurance Company Poli	tical Action	Committee	_
Α.	Full Name (Last, First, Middle Initial) Mr. Howard Levy			Date of Receipt
	Mailing Address 14 Strafford Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR534274
	Bedford	NH	03110-4536	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		507.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company Mana		g Partner	_
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	916.00	P/R Deduction (\$39.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. James D. Dean			Date of Receipt
	Mailing Address 1648 Wimbledon Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54017274
	Walled Lake	MI	48390-3179	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		910.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	<u> </u>	_
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify)	0 0	1000.00	P/R Deduction (\$83.34 Mon- thly)
С.	Full Name (Last, First, Middle Initial) Ms. Jeanmarie A. Deliso			Date of Receipt
	Mailing Address 43 Primrose Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54019274
	Longmeadow	MA	01106-2531	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		498.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent		
	Receipt For:		e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	996.00	P/R Deduction (\$83.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	1915.00
F				
Т	OTAL This Period (last page this line number of	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 197 / 395 (check only one)
			Detailed Summary Fage	13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\overline{\mathbb{N}}$	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. John R. Heckmann			Date of Receipt
	Mailing Address 325 Eastwood Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54027274
	Cutchogue	NY	11935-2207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	<u> </u>	_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Ms. Jenny Sunsim Louie			Date of Receipt
	Mailing Address 72-16 267th Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54033274
	Floral Park	NY	11004-1022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	l v	Year-to-Date V	
	Primary General			P/R Deduction (\$40.00 Mon-
	Other (specify) v	0 0	360.00	thly)
с.	Full Name (Last, First, Middle Initial) Mr. Joseph Marotta			Date of Receipt
	Mailing Address 527 Shore Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54038274
	Oakdale	NY	11769-2028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		_
			e Year-to-Date ▼	
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)			510.00
	OTAL This Period (last page this line number o		•	
L'	CIAL THIS I CHOU (IAST PAYE THIS INTE HUITIDE O	···· y) ······		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 198 / 395 (check only one)
		Detailed Summary Page		$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Ν	NAME OF COMMITTEE (In Full)			
\geq	New York Life Insurance Company Poli	tical Action	Committee	-
A.	Full Name (Last, First, Middle Initial) Mr. Oren Popper			Date of Receipt
	Mailing Address 1448 President Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54058274
	Brooklyn	NY	11213-4435	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer New York Life Insurance	Occupation	ı	
	Company	Agent	<u> </u>	_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	1000.00	P/R Deduction (\$83.34 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Andrew W. Rawding			Date of Receipt
	Mailing Address 19 Herald Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54060274
	Queensbury	NY	12804-9187	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupation Partner	1	
	Company Receipt For:		Year-to-Date 🔻	-
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$50.00 Mon- thly)
	Full Name (Last, First, Middle Initial)			
C.	Mr. Paul Sica			Date of Receipt
	Mailing Address 51 Rockvale Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54068274
	Tewksbury	MA	01876-2227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	<u> </u>	
	Receipt For: Agg		e Year-to-Date ▼	
	Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			1450.00
Т	OTAL This Period (last page this line number or	nly)	······	

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 199 / 395 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)			
\backslash	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Beverly Stewart			Date of Receipt
	Mailing Address 215 W 88th 3G			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54075274
	New York	NY	10024-2324	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	e Year-to-Date ▼	
	Primary General	Aggregate		D/D Deduction (\$25.00 Mon
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Ms. Adrian L. Williams			Date of Receipt
	Mailing Address 20008 Northwest 85th A	Avenue		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54080274
	<u>Miami</u>	FL	33015-6933	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	e Year-to-Date ▼	_
	Primary General	, iggi oguio		P/R Deduction (\$25.00 Mon-
	Other (specify) 🔻	0 0	300.00	thly)
с.	Full Name (Last, First, Middle Initial) Ms. Dusty G. Woods			Date of Receipt
	Mailing Address 1203 Shadow Way			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54081274
	Greenville	SC	29615-3843	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For:		Year-to-Date ▼	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)			450.00
F			•	
Т	OTAL This Period (last page this line number of	nly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 200 / 395 (check only one)
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		X 11a $11b$ 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Elaine E. Hayden			Date of Receipt
	Mailing Address 116 Sunset Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54218274
	Hempstead	NY	11550-4729	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:		Year-to-Date 🔻	_
	Primary General			P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0	300.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. Jude A. Watters			Date of Receipt
	Mailing Address 6030 S Spruce			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54223274
	Casper	WY	82601-6256	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		160.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	l v	Year-to-Date 🔻	_
	Primary General		010.00	P/R Deduction (\$30.00 Mon-
	Other (specify)	0 0	310.00	thly)
с.	Full Name (Last, First, Middle Initial) Mr. Les Glankler			Date of Receipt
	Mailing Address 4806 Willowick Bouleva	ırd		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54242274
	Alexandria	LA	71303-2539	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	า	7
	Company	Agent		
	Receipt For:		e Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)			460.00
F			······	-
Т	OTAL This Period (last page this line number o	nly)		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 201 / 395 (check only one)
11	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12
				13 14 15 16 17
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\geq	New York Life Insurance Company Poli	tical Action	Committee	
A.	Full Name (Last, First, Middle Initial) Mr. Wayne Thomas			Date of Receipt
	Mailing Address 29 Cycas Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54249274
	Kenner	LA	70065-6188	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:		Year-to-Date 🔻	
	Primary General		600.00	P/R Deduction (\$50.00 Mon-
	Other (specify)	0 0	600.00	thly)
В.	Full Name (Last, First, Middle Initial) Mr. Robert D. Hartman			Date of Receipt
	Mailing Address 1351 Fairway			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54256274
	Kyle	ТХ	78640-8767	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance Company	Occupation Partner	1	_
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General		260.00	P/R Deduction (\$10.00 Bi- Weekly)
	Other (specify) 🔻	0 0		
C.	Full Name (Last, First, Middle Initial) Ms. Jan Ragland			Date of Receipt
	Mailing Address 13631 Flagstone Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54261274
	Dallas	TX	75240-5820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For: Primary General		Year-to-Date V	D/D Dadwatian (#00.00 Mar
	Other (specify)	0 0	240.00	P/R Deduction (\$20.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)			550.00
Т	OTAL This Period (last page this line number o	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 202 / 395 (check only one)
		Detailed Summary Page		$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Ν	NAME OF COMMITTEE (In Full)			
\geq	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Bob Magers			Date of Receipt
	Mailing Address 4513 San Carlos			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54264274
	Dallas	TX	75205-2055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	ı	
	Company	Agent		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Ernest L. Martell			Date of Receipt
	Mailing Address 15980 Bear Valley Road	d		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54274
	Victorville	CA	92395-9587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	ı	
	Company Receipt For:	Agent	e Year-to-Date ▼	
	Primary General	Aggregate		D/D Deduction (\$25.00 Mon
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Ms. Aeramy Paulseen			Date of Receipt
	Mailing Address 8024 Greenbriar Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54282274
	Wichita	KS	67226-1834	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		_
	Receipt For: A Primary General		e Year-to-Date ▼	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	450.00
	OTAL This Period (last page this line number o			

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 203 / 395 (check only one)				
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
$\left[\right]$	NAME OF COMMITTEE (In Full)	tiaal Aatian	Committee					
	New York Life Insurance Company Poli							
Α.	Full Name (Last, First, Middle Initial) Mr. Wesley M. Teterud			Date of Receipt				
	Mailing Address 11613 E 48th			M M / D D / Y Y Y				
	City	State	Zip Code	Transaction ID: PR54284274				
	Spokane	WA	99206-9494	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		208.02				
	Name of Employer New York Life Insurance	Occupation	ı					
	Company Receipt For:	Agent	e Year-to-Date ▼					
	Primary General	riggrogaio		P/R Deduction (\$34.67 Mon-				
	Other (specify) v	0 0	416.04	thly)				
в.	Full Name (Last, First, Middle Initial) Mr. Ben Freedman			Date of Receipt				
	Mailing Address 143 Amoretti			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR54286274				
	Lander	WY	82520-2816	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		300.00				
	Name of Employer New York Life Insurance	Occupation	ı					
	Company Receipt For:	Agent	e Year-to-Date ▼					
	Primary General	riggrogaio		P/R Deduction (\$50.00 Mon-				
	Other (specify) v	0 0	600.00	thly)				
с.	Full Name (Last, First, Middle Initial) Mr. Larry L. Crafton			Date of Receipt				
	Mailing Address 10305 Northeast 20th C	ircle		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR54297274				
	Vancouver	WA	98664-4367	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation Agent	n					
	Company		e Year-to-Date ▼	_				
	Primary General Other (specify) ▼	33 - 3	300.00	P/R Deduction (\$25.00 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)			658.02				
т	TOTAL This Period (last page this line number only)							

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 204 / 395 (check only one)					
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12					
		Detailed Summary Page							
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any person lress of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.					
Ν	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee						
A.	Full Name (Last, First, Middle Initial) Mr. John Owens			Date of Receipt					
	Mailing Address PO Box 2813			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR54319274					
	Camarillo	CA	93011-2813	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:		Year-to-Date V	-					
	Primary General Other (specify) ▼	U U U	300.00	P/R Deduction (\$25.00 Mon- thly)					
<u> </u>	Full Name (Last, First, Middle Initial) Mr. William R. Lindsey			Date of Receipt					
	Mailing Address 664 South Wabash Ave	nue		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR54323274					
	Redlands	CA	92374-6428	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		499.98					
	Name of Employer New York Life Insurance	Occupation	ו	1					
	Company	Agent							
	Receipt For: Primary General	Aggregate	Year-to-Date V						
	Other (specify) ▼		999.96	P/R Deduction (\$83.33 Mon- thly)					
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. David Ray			Date of Receipt					
	Mailing Address 4913 Creekbend Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR54332274					
	Crp Christi	TX	78413-2414	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		130.00					
	Name of Employer New York Life Insurance	Occupation]					
	Company		e Sales Development Manage						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D Deduction (#10.00 Di					
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)		•	779.98					
Т	TOTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 205 / 395 (check only one) (Check only one) X 11a 11b 11c 12			
			Detailed Summary Page				
	y information copied from such Reports and Sta for commercial purposes, other than using the r						
	NAME OF COMMITTEE (In Full)						
\geq	New York Life Insurance Company Poli						
Α.	Full Name (Last, First, Middle Initial) Ms. Bodil Brovick			Date of Receipt			
	Mailing Address 1344 92nd Avenue Nort	M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR54338274			
	Clyde Hill	WA	98004-3450	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		130.00			
	Name of Employer New York Life Insurance	Occupatio	n				
	Company Receipt For:	Partner	e Year-to-Date V	_			
	Primary General	Ayyreyall		P/R Deduction (\$10.00 Bi-			
	Other (specify)	0 0	260.00	Weekly)			
В.	Full Name (Last, First, Middle Initial) Mr. David Brody			Date of Receipt			
	Mailing Address 453 Miller Creek Avenue	M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR54340274			
	San Rafael	CA	94903-1317	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00			
	Name of Employer New York Life Insurance	Occupatio	n				
	Company Receipt For:	Agent Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)			
	Full Name (Last, First, Middle Initial)						
C.	Ms. Linda Hulbert Mailing Address PO Box 81402			Date of Receipt			
	City	State	Zip Code	Transaction ID: PR544274			
	Fairbanks	AK	99708-1402	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.02			
	Name of Employer New York Life Insurance	Occupatio	n				
	Company Receipt For:	Agent	e Year-to-Date 🔻	_			
	Primary General Other (specify) ▼		500.04	P/R Deduction (\$41.67 Mon- thly)			
s	LUBTOTAL of Receipts This Page (optional)		······	530.02			
	TOTAL This Period (last page this line number only)						

5	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 206 / 395
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	New York Life Insurance Company Politi	tical Action	Committee	
	Full Name (Look First Middle Initial)			
Α.	Full Name (Last, First, Middle Initial) Mr. Michael F. Barry			Date of Receipt
	Mailing Address 3 Evergreen Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54762274
	Walpole	MA	02081-2142	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		195.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		285.00	P/R Deduction (\$50.00 Mon- thly)
В.	Full Name (Last, First, Middle Initial) Mr. Todd Purich			Date of Receipt
	Mailing Address 6332 Battleview Drive			
		01-11-	7'	
	City Raleigh	State NC	Zip Code 27613-7148	Transaction ID: PR54768274
	•		27013-7148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer	Occupation		_
	Name of Employer New York Life Insurance Company	Agent		
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		600.00	P/R Deduction (\$50.00 Mon-
	Other (specify) v	1 1		thly)
_	Full Name (Last, First, Middle Initial)			
C.	Mr. R. Douglas Rasmussen Mailing Address 9432 Villa Isle Circle			Date of Receipt
	Maining Address 9432 Mila Isle Circle			
	City	State	Zip Code	Transaction ID: PR54769274
	Villa Park	CA	92861-2318	Amount of Each Receipt this Period
	FEC ID number of contributing	С		150.00
	federal political committee.			
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company		Year-to-Date V	
	Receipt For: Primary General	Ayyreyale		P/R Deduction (\$25.00 Mon-
	Other (specify)		300.00	thly)
s	UBTOTAL of Receipts This Page (optional)			645.00
\vdash				-
Т	OTAL This Period (last page this line number of	nly)		

S	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 207 / 395
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12
Ar	y information copied from such Reports and Sta	tements may	y not be sold or used by any perso	13 14 15 16 17
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Jeffrey E. Thol			Date of Receipt
	Mailing Address 736 High Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR54771274
	Honesdale	PA	18431-1738	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		340.02
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Year-to-Date V	_
	Primary General	Aggregate		P/R Deduction (\$83.34 Mon-
	Other (specify)	0 0	520.02	thly)
в.	Full Name (Last, First, Middle Initial) Mr. Michael B. Marshall			Date of Receipt
	Mailing Address 57 Sunset Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR55274
	North Salem	NY	10560-1027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		182.00
	Name of Employer New York Life Insurance	Occupation Cvp - Res		
	Company Receipt For:		Year-to-Date V	
	Primary General	, iggi ogaio		P/R Deduction (\$14.00 Bi-
	Other (specify)	0 0	364.00	Weekly)
С.	Full Name (Last, First, Middle Initial) Ms. Missy Gaynor			Date of Receipt
	Mailing Address 180 Peace Acre Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR557274
	Stratford	CT	06497-1306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			208.02
	Name of Employer New York Life Insurance	Occupation	1	
	Company // Receipt For:		<u> </u>	_
			Year-to-Date V	
	Other (specify) ▼	0 0	416.04	P/R Deduction (\$34.67 Mon- thly)
ß	UBTOTAL of Receipts This Page (optional)			730.04
F				
Т	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 208 / 395 (check only one)					
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12					
			, ,	13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the n								
	NAME OF COMMITTEE (In Full)		0 III						
\angle	New York Life Insurance Company Polit	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Frank Scarpa			Date of Receipt					
	Mailing Address 5 Abbington Way			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR559274					
	Morristown	NJ	07960-3314	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		500.11					
	Name of Employer New York Life Insurance	Occupation Managing							
	Company Receipt For:		Year-to-Date ▼	_					
	Primary General			P/R Deduction (\$38.47 Bi-					
	Other (specify) v	0 0	1000.22	Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Roberto Recine			Date of Receipt					
	Mailing Address 12800 Cumberland Circ	M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR561274					
	Anchorage	AK	99516-2746	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		260.00					
	Name of Employer New York Life Insurance	Occupation	า						
	Company	Managing							
	Receipt For:	Aggregate	e Year-to-Date ▼	_					
	Primary General Other (specify) ▼	0 0	520.00	P/R Deduction (\$20.00 Bi- Weekly)					
<u></u>	Full Name (Last, First, Middle Initial) Mr. Robert F. Terry			Date of Receipt					
-	Mailing Address 8 Pinnacle Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR56614274					
	East Walpole	MA	02032-1153	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent	<u> </u>						
			Year-to-Date ▼						
	Other (specify)	0.0	300.00	P/R Deduction (\$25.00 Mon- thly)					
s	LUBTOTAL of Receipts This Page (optional)		······	910.11					
т	TOTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X)			Lico concrete achadula(a)	FOR LINE NUMBER: PAGE 209 / 395					
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)					
			Detailed Summary Page	X 11a 11b 11c 12					
A	winformation annial formation by Danasta and Otat			13 14 15 16 17					
or	y information copied from such Reports and State for commercial purposes, other than using the na	ime and add	lress of any political committee to	solicit contributions from such committee.					
∇	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Politi	cal Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Michael F. Broderick Cfp		Date of Receipt						
	Mailing Address 170 Clapboard Tree Stree	et		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR56615274					
	Westwood	MA	02090-2906	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		300.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent							
	Receipt For:	Aggregate	Year-to-Date V						
	Primary General Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Don L. Lippencott			Date of Receipt					
	Mailing Address 123 Old Post Road Box 596			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR56616274					
	Port Jefferson	NY	11777-0596	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent	<u> </u>	_					
	Receipt For: Primary General	Aggregate	Year-to-Date V						
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)					
с.	Full Name (Last, First, Middle Initial) Mr. Jeff Perryman			Date of Receipt					
	Mailing Address 270 Spectacular Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR56617274					
	Henderson	NV	89052-5907	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		300.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company	Agent		_					
			Year-to-Date V						
	Other (specify)	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)		·····	750.00					
	TOTAL This Period (last page this line number only)								

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 210 / 395				
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12				
		Detailed Summary Page		X 11a 11b 11c 12 13 14 15 16 17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions				
\sum	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee					
A.	Full Name (Last, First, Middle Initial) Mr. Roy Salmon			Date of Receipt				
	Mailing Address 4255 Alta Vista Avenue			M M / D D / Y Y Y Y				
	City Sta		Zip Code	Transaction ID: PR56626274				
	Santa Rosa	CA	95404-1906	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		499.98				
	Name of Employer New York Life Insurance Company	Occupatior Agent	1	_				
	Receipt For:	Ŭ	Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	999.96	P/R Deduction (\$83.33 Mon- thly)				
в.	Full Name (Last, First, Middle Initial) Mr. James M. Smith			Date of Receipt				
	Mailing Address 6414 Hickorycrest Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR56628274				
	Spring	TX	77389-5230	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		220.00				
	Name of Employer New York Life Insurance	Occupation	1	_				
	Company	Agent						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/P Deduction (\$40.00 Man				
	Other (specify)	0 0	430.00	P/R Deduction (\$40.00 Mon- thly)				
с.	Full Name (Last, First, Middle Initial) Ms. Laura Hogan			Date of Receipt				
	Mailing Address 119 Apple Hill Road			M M / D D / Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR56634274				
	Brewster	NY	10509-6162	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		130.00				
	Name of Employer New York Life Insurance	Occupation		7				
	Company		mmunications					
				P/R Deduction (\$10.00 Bi-				
	Other (specify)	0 0	260.00	Weekly)				
s	UBTOTAL of Receipts This Page (optional)		•	849.98				
т	TOTAL This Period (last page this line number only)							

5	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 211/395			
		Use separate schedule(s) or each category of the		(check only one)			
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
				13 14 15 16 17			
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
$ \rangle$	New York Life Insurance Company Polit	ical Action	Committee				
	Full Name (Last, First, Middle Initial)						
Α.	Mr. Oswald C. Francis			Date of Receipt			
	Mailing Address PO Box 743			M M / D D / Y Y Y Y			
	City Elmont		Zip Code	Transaction ID: PR56647274			
			11003-0743	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		100.02			
	federal political committee.						
	Name of Employer New York Life Insurance	Occupation	1				
	Company	Agent					
	Receipt For: Primary General	Aggregate	Year-to-Date V				
	Other (specify) ▼		200.04	P/R Deduction (\$16.67 Mon- thly)			
		0 0					
В.	Full Name (Last, First, Middle Initial) Ms. Lois P. Nole			Date of Receipt			
	Mailing Address 3170 Viaduct Ponciana						
	# 6						
	City	State FL	Zip Code	Transaction ID: PR568274			
	Lake Worth		33467-3303	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		600.00			
	Name of Employer	Occupation					
	Name of Employer New York Life Insurance	Occupation Agent	I				
	Company Receipt For:	Ŭ	Year-to-Date 🔻	_			
	Primary General		1000.00	P/R Deduction (\$100.00 Mo-			
	Other (specify)	0 0	1200.00	nthly)			
	Full Name (Last, First, Middle Initial)						
C.	Mr. Michael E. Sproule			Date of Receipt			
	Mailing Address 16 Middle Beach Road			M M / D D / Y Y Y			
	City	State	Zip Code	Transaction ID: PR570274			
	Madison	CT	06443-3053	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		500.11			
	federal political committee.						
	Name of Employer New York Life Insurance	Occupation					
	Company	1	Chief Financial Officer	_			
	Receipt For: Primary General	Ayyreyale	Year-to-Date V	P/P Doduction (\$29.47 Pi			
	Other (specify)		1000.22	P/R Deduction (\$38.47 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)		·····	1200.13			
F							
T	TOTAL This Period (last page this line number only)						

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 212 / 395 (check only one) X X 11a 11b 11c 12
	y information copied from such Reports and Sta for commercial purposes, other than using the n		y not be sold or used by any perso	
	NAME OF COMMITTEE (In Full)			
$\left \right\rangle$	New York Life Insurance Company Polit	tical Action	n Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Jefferson C. Boyce			Date of Receipt
	Mailing Address 28 Inwood Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR57512274
	Yonkers	NY	10704-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		309.53
	Name of Employer New York Life Insurance	Occupatio		
	Company		lanaging Director	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	619.06	P/R Deduction (\$23.81 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Ms. Barbara J. McInerney			Date of Receipt
	Mailing Address 35 Sutton Place Apt. 4E			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR57513274
	New York	NY	10022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		309.53
	Name of Employer New York Life Insurance	Occupatio		
	Company		rporate Compliance	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	D/D Daduction (#00.01 Di
	Other (specify)	0 0	619.06	P/R Deduction (\$23.81 Bi- Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Gedalia Miller			Date of Receipt
-	Mailing Address 1436 46th Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR57521274
	Brooklyn	NY	11219-2632	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		520.00
	Name of Employer New York Life Insurance	Occupatio		7
	Company		g Partner	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	935.00	P/R Deduction (\$40.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			1139.06
T	OTAL This Period (last page this line number or	nly)	· · · · · · · · · · · · · · · · · · ·	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 213 / 395 (check only one)					
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$					
	y information copied from such Reports and Stat for commercial purposes, other than using the na								
	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Cheong H. Tsang			Date of Receipt					
	Mailing Address 1974 Troy Avenue			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR57525274					
	Brooklyn	NY	11234-3020	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		507.00					
	Name of Employer New York Life Insurance	Occupation							
	Company	Senior Pa							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	B/B Doduction (\$20.00 Pi					
	Other (specify)	0 0	774.67	P/R Deduction (\$39.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Ralph K. Sklar			Date of Receipt					
	Mailing Address 6632 Liggett Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR575274					
	Oakland	CA	94611-3204	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		210.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	1						
	Receipt For:	U U	Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	420.00	P/R Deduction (\$35.00 Mon- thly)					
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Jon A. Law			Date of Receipt					
	Mailing Address 5 Mann Drive								
	City	State	Zip Code	Transaction ID: PR57549274					
	Liverpool	NY	13088-5477	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		780.00					
	Name of Employer New York Life Insurance Company	Occupation Field Par							
			Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	1490.00	P/R Deduction (\$60.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)		······	1497.00					
\vdash	FOTAL This Period (last page this line number only)								

5	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 214/395
			Use separate schedule(s) or each category of the	(check only one)
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		,,	
$ \rangle$	New York Life Insurance Company Poli	tical Action	Committee	
\square				
Δ	Full Name (Last, First, Middle Initial) Ms. Marilyn W. Arnold			Date of Receipt
	Mailing Address 32 Fieldstone Lane			
	City	State	Zip Code	Transaction ID: PR57550274
	Medford	NJ	08055-3515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:	Managing Aggregate	Year-to-Date V	_
	Primary General	, iggi oguto		P/R Deduction (\$15.00 Bi-
	Other (specify)		390.00	Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Jack C. C. Hall			Date of Receipt
	Mailing Address 1020 Watkins Creek Dri	ve		
	City	State	Zip Code	Transaction ID: PR57553274
	Franklin	TN	37067-7829	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			507.00
	Name of Employer New York Life Insurance	Occupation Partner	1	
	Company Receipt For:		Year-to-Date V	_
	Primary General		010.00	P/R Deduction (\$39.00 Bi-
	Other (specify)	0 0	916.00	Weekly)
	Full Name (Last, First, Middle Initial)			
C.	Mr. Bradley J. Jensen			Date of Receipt
	Mailing Address 5004 Itasca Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR57554274
	Lubbock	TX	79416-1225	Amount of Each Receipt this Period
	FEC ID number of contributing	0		520.00
	federal political committee.	С		520.00
	Name of Employer New York Life Insurance	Occupation		
	New York Life Insurance Company	Managing	g Partner	
	Receipt For:	Aggregate	Year-to-Date 🔻	_
	Other (specify) ▼		1040.00	P/R Deduction (\$40.00 Bi- Weekly)
			8 8 8 8 8 8 8 8	
s	UBTOTAL of Receipts This Page (optional)		•••••••	1222.00
-	OTAL This Poriod (last ages this line number a			
11	OTAL This Period (last page this line number o	····y) ······	P	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 215/395						
	EMIZED RECEIPTS		or each category of the	(check only one)						
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
^	winformation against from such Departs and Stat	emonto mo	, not be cold or used by environment	13 14 15 16 17						
or	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.									
Ν	NAME OF COMMITTEE (In Full)									
\mathbb{Z}	New York Life Insurance Company Politi	ical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Mr. William J. Terry, III			Date of Receipt						
	Mailing Address 43 Winchester Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR57555274						
	Arlington	MA	02474-1019	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		325.00						
	Name of Employer New York Life Insurance	Occupation	1	-						
	Company	Senior Pa								
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)						
в.	Full Name (Last, First, Middle Initial) Mr. William F. Murphy			Date of Receipt						
	Mailing Address 233 Linkside Circle			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR57556274						
	Ponte Vedra	FL	32082-2034	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		195.00						
	Name of Employer New York Life Insurance	Occupation								
	Company	Senior Pa								
	Receipt For: Primary General	Aggregate	Year-to-Date V							
	Other (specify)	0.0	780.00	P/R Deduction (\$15.00 Bi- Weekly)						
С.	Full Name (Last, First, Middle Initial) Mr. David A. Odom			Date of Receipt						
	Mailing Address 24719 Bogey Ridge			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR57557274						
	San Antonio	ТХ	78258-4805	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		325.00						
	Name of Employer New York Life Insurance	Occupation								
	Company	Managing								
			Year-to-Date V							
	Other (specify) ▼	0 0	580.00	P/R Deduction (\$25.00 Bi- Weekly)						
s	UBTOTAL of Receipts This Page (optional)			845.00						
Т	TOTAL This Period (last page this line number only)									

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 216 / 395 (check only one)	
IT	EMIZED RECEIPTS		or each category of the	\overline{X} 11a 11b 11c 12	
			Detailed Summary Page		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	n for the purpose of soliciting contributions			
\sum	NAME OF COMMITTEE (In Full)				
\geq	New York Life Insurance Company Poli	tical Action	n Committee	_	
Α.	,	Date of Receipt			
	Mailing Address 3920 Arkwright Road St	uite 160		M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR57558274	
	Macon	GA	31210-1744	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		195.00	
	Name of Employer New York Life Insurance	Occupatio		7	
	Company Receipt For:	Employe	e Year-to-Date ▼	_	
	Primary General Other (specify) ▼		390.00	P/R Deduction (\$15.00 Bi- Weekly)	
в.	Full Name (Last, First, Middle Initial) Mr. James B. Moore			Date of Receipt	
	Mailing Address 13413 Wyngate Point			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR57559274	
	San Diego	CA	92130-1347	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		195.00	
	Name of Employer New York Life Insurance	Occupatio		7	
	Company Receipt For:		g Partner e Year-to-Date ▼	-	
	Primary General Other (specify) ▼		390.00	P/R Deduction (\$15.00 Bi- Weekly)	
 C.	Full Name (Last, First, Middle Initial) Mr. Kevin E. Boland			Date of Receipt	
0.	Mailing Address 3993 Howard Hughes P #500	arkway			
	City	State	Zip Code	Transaction ID: PR57560274	
	Las Vegas	NV	89169-6700	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		195.00	
	Name of Employer New York Life Insurance	Occupatio			
	Company Receipt For:		g Partner e Year-to-Date ▼	_	
	Primary General Other (specify) ▼		390.00	P/R Deduction (\$15.00 Bi- Weekly)	
s	UBTOTAL of Receipts This Page (optional)			585.00	
	OTAL This Period (last page this line number o		r		
S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 217/395	
-----------------------	---------------------------------------------------------------------------------------------------	-------------------------	-----------------------------------------------------	----------------------------------------------------------------------------------------------	
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)	
			Detailed Summary Page	X 11a 11b 11c 12	
•	winformation conied from each Development of 101	tome-to	upst be cold as up at the area	13 14 15 16 17	
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	litements may	dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
$\left \right\rangle$	New York Life Insurance Company Polit	tical Action	Committee		
<u>к</u>	Full Name (Last, First, Middle Initial) Mr. Eric Cox			Date of Receipt	
	Mailing Address 136 Cape May Lane			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR57561274	
	Mount Pleasant	SC	29464-6500	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		325.00	
	Name of Employer New York Life Insurance	Occupation Senior Pa			
	Company Receipt For:		e Year-to-Date V		
	Primary General	30 - 3-		P/R Deduction (\$25.00 Bi-	
	Other (specify)		580.00	Weekly)	
в.	Full Name (Last, First, Middle Initial) Mr. Hugh J. Smith			Date of Receipt	
	Mailing Address 10 Rock Road			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR57563274	
	Attleboro	MA	02703-4454	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		520.00	
	Name of Employer New York Life Insurance	Occupation	n		
	Company	Partner		_	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻		
	Other (specify) ▼	0 0	1040.00	P/R Deduction (\$40.00 Bi- Weekly)	
С.	Full Name (Last, First, Middle Initial) Mr. Robert J. Hynes			Date of Receipt	
	Mailing Address 6 Cliftwood Drive			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR578274	
	Huntington	NY	11743-2103	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		104.00	
	Name of Employer New York Life Insurance	Occupation			
	Company	Vice Pres			
			e Year-to-Date 🔻		
	Other (specify) ▼		208.00	P/R Deduction (\$8.00 Bi-W- eekly)	
s	UBTOTAL of Receipts This Page (optional)			949.00	
Ĕ					
Т	OTAL This Period (last page this line number or	nly)			

S	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 218/395					
	· · · ·		Use separate schedule(s) or each category of the	(check only one)					
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.					
Ν	NAME OF COMMITTEE (In Full)								
\backslash	New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas J. Troeller			Date of Receipt					
	Mailing Address 12 Crape Myrtle Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR582274					
	Holmdel	NJ	07733-1529	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of Employer New York Life Insurance	Occupation	า						
	Company	First Vice	President & Actuary						
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Mark W. Pfaff			Date of Receipt					
	Mailing Address 330 Stockbridge Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR584274					
	Charlotte	VT	05445-9356	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		754.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Svp		_					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼						
	Other (specify) ▼	0 0	1382.00	P/R Deduction (\$58.00 Bi- Weekly)					
с.	Full Name (Last, First, Middle Initial) Mr. Joe Alderman			Date of Receipt					
	Mailing Address 260 Chicora Club			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR58612274					
	Dunn	NC	28334-5671	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		75.00					
	Name of Employer	Occupation	า	7					
	New York Life InsuranceMaCompanyMaReceipt For:Ag		g Partner						
			e Year-to-Date 🔻						
	Other (specify) ▼	0 0	270.00	P/R Deduction (\$15.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)			1154.00					
	TOTAL This Period (last page this line number only)								

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 219/395			
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)			
			Detailed Summary Page				
٨	vinformation conied from each Departs and Ch	tomonto ma	unot be cold or used by any arrest	13 14 15 16 17			
or	y information copied from such Reports and Sta for commercial purposes, other than using the r	name and add	dress of any political committee to	o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
\geq	New York Life Insurance Company Poli	tical Action	Committee	_			
Α.	Full Name (Last, First, Middle Initial) Mr. Nicola lannitelli			Date of Receipt			
	Mailing Address 148 Brittany Court			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR58613274			
	<u>Clifton</u>		07013-2672	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		260.00			
	Name of Employer New York Life Insurance	Occupation Senior Pa					
	Company Receipt For:		e Year-to-Date V	_			
	Primary General		E20.00	P/R Deduction (\$20.00 Bi-			
	Other (specify)	0 0	520.00	Weekly)			
в.	Full Name (Last, First, Middle Initial) Mr. Robert G. Karalius			Date of Receipt			
	Mailing Address 139 Sutcliffe Lane			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR58614274			
	Conshohocken	PA	19428-1457	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		195.00			
	Name of Employer New York Life Insurance	Occupation	n				
	Company	Senior Pa					
	Receipt For:	Aggregate	e Year-to-Date 🔻	_			
	Primary General Other (specify) ♥	0 0	390.00	P/R Deduction (\$15.00 Bi- Weekly)			
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Frank Lusk			Date of Receipt			
	Mailing Address 15185 Wood Duck Trail	Northwest		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR58615274			
	Prior Lake	MN	55372-3209	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		650.00			
	Name of Employer New York Life Insurance	Occupation	n				
	Company		g Partner	_			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify)	0 0	1300.00	P/R Deduction (\$50.00 Bi- Weekly)			
s	LUBTOTAL of Receipts This Page (optional)		······	1105.00			
F							
Т	TOTAL This Period (last page this line number only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 220 / 395 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	$\begin{array}{c c} X & 11a \\ \hline 13 \\ \hline 13 \\ \hline 14 \\ \hline 15 \\ \hline 16 \\ \hline 17 \\ \hline 16 \\ \hline 17 \\ \hline 17 \\ \hline 17 \\ \hline 10 \\ \hline 10$
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
\sum	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Anne F. Pollack	Date of Receipt		
	Mailing Address 44 Gramercy Park N Ap	t. 9D		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR587274
	New York	NY	10010-6310	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.11
	Name of Employer New York Life Insurance	Occupation		-
	Company Receipt For:		nief Investment Officer e Year-to-Date ▼	_
	Primary General	Aggregate		P/R Deduction (\$38.47 Bi-
	Other (specify)	0 0	1000.22	Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Bernard J. Zweig			Date of Receipt
	Mailing Address 393 West End Avenue Apt. 9D			M · M / D · D / Y · Y · Y · Y
	City	State	Zip Code	Transaction ID: PR602274
	New York	NY	10024-6141	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.02
	Name of Employer New York Life Insurance	Occupation	1	7
	Company Receipt For:	Agent	e Year-to-Date ▼	-
	Primary General	Aggregate		P/R Deduction (\$83.34 Mon-
	Other (specify)	0 0	250.02	thly)
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. Scot R. Bradstreet			Date of Receipt
	Mailing Address PO Box 415			
	City	State	Zip Code	Transaction ID: PR60274
	Stratham	NH	03885-0415	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		499.98
	Name of Employer New York Life Insurance	Occupation	1	1
	Company	Agent	Veer te Dete	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 999.96	P/R Deduction (\$83.33 Mon- thly)
Г				
s	UBTOTAL of Receipts This Page (optional)		•••••	1250.11
т	OTAL This Period (last page this line number or	ıly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 221 / 395 (check only one)		
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12		
Ar	y information copied from such Reports and Sta	tements may	y not be sold or used by any perso	13 14 15 16 17 on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the n	solicit contributions from such committee.				
	New York Life Insurance Company Polit					
<u>А.</u>	Full Name (Last, First, Middle Initial) Mr. Jonathan T. Paone	Date of Receipt				
	Mailing Address 57 Van Doren Avenue			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR60596274		
	Chatham	NJ	07928-2213	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		195.00		
	Name of Employer New York Life Insurance	Occupation	n			
	Company		vernmental Affairs			
	Receipt For: Primary General	Aggregate	e Year-to-Date V			
	Other (specify) ▼	0 0	360.00	P/R Deduction (\$15.00 Bi- Weekly)		
в.	Full Name (Last, First, Middle Initial) Mr. Dale Lazzarone			Date of Receipt		
	Mailing Address 4165 Caughlin Parkway			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR60603274		
	Reno	NV	89509-0601	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		124.98		
	Name of Employer New York Life Insurance	Occupation Agent	n			
	Company Receipt For:	ļ	e Year-to-Date 🔻	_		
	Primary General Other (specify) ▼	0 0	499.96	P/R Deduction (\$20.83 Mon- thly)		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Paul M. Holmes			Date of Receipt		
•	Mailing Address 3200 Beechleaf Court Suite 820			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR60641274		
	Raleigh	NC	27604-1063	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		260.00		
	Name of Employer New York Life Insurance	Occupation	n	7		
	Company	Managing				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Other (specify)	0 0	413.67	P/R Deduction (\$20.00 Bi- Weekly)		
s	LUBTOTAL of Receipts This Page (optional)			579.98		
	OTAL This Period (last page this line number or					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 222 / 395 (check only one)					
••			Detailed Summary Page						
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.					
\sum	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Raul G. Morrison			Date of Receipt					
	Mailing Address 5000 Town Center Suite 3004			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR607274					
	Southfield	MI	48075-1118	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Now Vork Life Incurance		n						
	Company	Senior Pa							
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼						
	Other (specify)		249.00	P/R Deduction (\$12.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Charles W. Van Devander			Date of Receipt					
	Mailing Address 10396 Whispering Pine	s Drive		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61188274					
	Frisco	TX	75034-3807	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	Name of Employer New York Life Insurance	Occupatio							
	Company Receipt For:	Executive	e Officer						
	Primary General	Ayyreyale		P/R Deduction (\$15.00 Bi-					
	Other (specify)	0 0	390.00	Weekly)					
C.	Full Name (Last, First, Middle Initial) Mr. Johnson Kho			Date of Receipt					
	Mailing Address 110 Westminster Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR612274					
	Scarsdale	NY	10583-2425	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		300.00					
	Name of Employer New York Life Insurance	Occupatio	n						
	Company	Agent	<u> </u>						
	Receipt For: Age Primary General		e Year-to-Date V						
	Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)		·····	651.00					
	TOTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 223 / 395 (check only one) X X 11a 11b 11c				
Ar	y information copied from such Reports and Sta	atements may	y not be sold or used by any perso	13 14 15 16 17				
or	for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	o solicit contributions from such committee.				
	New York Life Insurance Company Poli	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. William E. Mahoney, Jr., Jr.			Date of Receipt				
	Mailing Address 936 Intracostal Drive Apt. 14F	Stata	Zin Code					
	City Fort Lauderdale	State FL	Zip Code 33304-3666	Transaction ID: PR61274 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		1000.00				
	Name of Employer New York Life Insurance Company	Occupation Agent	1	-				
	Receipt For:		Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	1000.00	P/R Deduction (\$1000.00 Monthly)				
В.	Full Name (Last, First, Middle Initial) Ms. Faylin Monica Rodney Mailing Address 116-72 232nd Street			Date of Receipt				
	Maining Address 116-72 232110 Street			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR61306274				
	Jamaica	NY	11411-1834	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance Company	Occupation Agent	1					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)				
с.	Full Name (Last, First, Middle Initial) Mr. John P. Border			Date of Receipt				
	Mailing Address 12720 Crown Crest Driv	/e		M M / D D / Y Y Y Y				
	City Delegentical d	State	Zip Code	Transaction ID: PR61309274				
	Bakersfield	CA	93311-8568	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		124.98				
	Name of Employer New York Life Insurance	Occupation Agent	า					
	Company Receipt For:		e Year-to-Date 🔻					
	Primary General Other (specify) ▼		249.96	P/R Deduction (\$20.83 Mon- thly)				
s	I UBTOTAL of Receipts This Page (optional)			1274.98				
т	TOTAL This Period (last page this line number only)							

6				FOR LINE NUMBER: PAGE 224/395					
SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	(check only one)					
IT	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12					
				13 14 15 16 17					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)									
\mathbb{Z}	New York Life Insurance Company Polit								
A.	Full Name (Last, First, Middle Initial) Mr. Sean M. Starling			Date of Receipt					
	Mailing Address 4957 Lockraven Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61314274					
	Winston-Salem	NC	27104-2417	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation	ו						
	Company	Agent							
	Receipt For:	Aggregate	Year-to-Date V						
	Other (specify)		300.00	P/R Deduction (\$25.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Steven L. P. Wong			Date of Receipt					
	Mailing Address 620 Deerbrook Drive			M M / D D / Y V V Y					
	City	State	Zip Code	Transaction ID: PR61319274					
	Yardley	PA	19067-4537	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		499.98					
	Name of Employer New York Life Insurance Company	Occupation Agent	1						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	999.96	P/R Deduction (\$83.33 Mon- thly)					
<u></u>	Full Name (Last, First, Middle Initial) Mr. Ralph P. Owen			Date of Receipt					
	Mailing Address 3317 Highway 63			M M / D D / Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61327274					
	Bloomfield	IA	52537-8063	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		300.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company		Year-to-Date V						
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$50.00 Mon- thly)					
6	UBTOTAL of Receipts This Page (optional)			949.98					
\vdash			•						
Т	OTAL This Period (last page this line number or	nly)							

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 225 / 395 (check only one)						
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $					
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
\sum	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Politi	cal Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas A. Drynan			Date of Receipt					
	Mailing Address 2409 W Chadwick Court			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61330274					
	Spokane	WA	99208-4466	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		120.18					
	Name of Employer New York Life Insurance	Occupation	ı	_					
	Company Receipt For:	Agent	e Year-to-Date ▼	_					
	Primary General	Aggregate		P/R Deduction (\$20.03 Mon-					
	Other (specify) ▼	0 0	240.36	thly)					
В.	Full Name (Last, First, Middle Initial) Mr. Alan Pottebaum			Date of Receipt					
	Mailing Address 29 Laura Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61338274					
	Lemars	IA	51031-2731	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		180.00					
	Name of Employer New York Life Insurance	Occupation	ı	-					
	Company	Agent	e Year-to-Date ▼						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/P Doduction (\$40.00 Mon					
	Other (specify)	0 0	330.00	P/R Deduction (\$40.00 Mon- thly)					
с.	Full Name (Last, First, Middle Initial) Mr. Ross Inciong			Date of Receipt					
	Mailing Address 14424 37 Avenue Apt. 5.	J		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61344274					
	Flushing	NY	11354-5909	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company Receipt For:	Agent	e Year-to-Date 🔻	_					
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)		·····	450.18					
	TOTAL This Period (last page this line number only)								

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 226 / 395
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
11			Detailed Summary Page	X 11a 11b 11c 12
•				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committee	
\square				
Α.	Full Name (Last, First, Middle Initial) Mr. Travis D. Hite			Date of Receipt
	Mailing Address 103 Dekalb Street			M M / D D / Y Y Y Y
		.		
	City Staten Joland	State NY	Zip Code	Transaction ID: PR61346274
	Staten Island		10304-3393	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	<u> </u>	_
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
<u>—</u> В	Full Name (Last, First, Middle Initial) Mr. Bob Chrisman			Date of Receipt
2.	Mailing Address 2660 Augusta #6303			
	City	State	Zip Code	Transaction ID: PR61363274
	Houston	ТХ	77057-5682	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.02
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify)	0 0	500.04	P/R Deduction (\$41.67 Mon- thly)
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Timothy J. Thompson			Date of Receipt
	Mailing Address 106 Suffolk Court			M • M / D • D / Y • Y • Y • Y
	City	State	Zip Code	Transaction ID: PR61375274
	Garden City	KS	67846-8464	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		240.00
	Name of Employer New York Life Insurance	Occupation	1	7
	Company	Agent		_
			Year-to-Date V	
	Other (specify)	0 0	480.00	P/R Deduction (\$40.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			640.02
Ĕ				
Т	OTAL This Period (last page this line number or	nly)		

50	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 227 / 395						
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)						
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12						
				13 14 15 16 17						
Ar	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)										
$ \rangle$	New York Life Insurance Company Polit	ical Action	Committee							
\square										
Α.	Full Name (Last, First, Middle Initial) Mr. Jason Mickey			Date of Receipt						
	Mailing Address 8001 Divernon Avenue									
	City	State	Zip Code	Transaction ID: PR61380274						
	Las Vegas	NV	89149-4913	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		150.02						
	Name of Employer New York Life Insurance	Occupation	1							
	Company Receipt For:	Agent	Year-to-Date V							
	Primary General	Ayyreyale		P/R Deduction (\$11.54 Bi-						
	Other (specify) ▼		300.04	Weekly)						
Р	Full Name (Last, First, Middle Initial)			Data of Descint						
р.	Mr. Donald E. Lippencott Mailing Address 10 Hawkins Avenue			Date of Receipt						
	Maining Address TO Hawkins Avenue									
	City	State	Zip Code	Transaction ID: PR61382274						
	Setauket	NY	11733-3911	Amount of Each Receipt this Period						
	FEC ID number of contributing	С		300.00						
	federal political committee.									
	Name of Employer New York Life Insurance	Occupation	1							
	Company	Agent								
	Receipt For: Primary General	Aggregate	Year-to-Date V							
	Other (specify)		600.00	P/R Deduction (\$50.00 Mon- thly)						
		0 0								
~	Full Name (Last, First, Middle Initial)									
C.	Mr. Greg Davis Mailing Address 2005 Marshallfield Lane			Date of Receipt						
	Mailing Address 2005 Marshallfield Lane			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR61384274						
	Redondo Beach	CA	90278-4213	Amount of Each Receipt this Period						
	FEC ID number of contributing	С		125.00						
	federal political committee.									
	Name of Employer New York Life Insurance	Occupation	1	7						
	Company Ag Receipt For: Ag			_						
			Year-to-Date V							
	Other (specify) ▼		500.00	P/R Deduction (\$62.50 Mon- thly)						
				·						
s	UBTOTAL of Receipts This Page (optional)			575.02						
Т	TOTAL This Period (last page this line number only)									

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 228 / 395					
ITEMIZED RECEIPTS			or each category of the	(check only one)					
			Detailed Summary Page	13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Polit								
Α.	Full Name (Last, First, Middle Initial) Ms. Teresita Mantal Reyes			Date of Receipt					
	Mailing Address 242 N Marvista Avenue	#1		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61387274					
	Pasadena	CA	91106-1456	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		125.00					
	Name of Employer New York Life Insurance	Occupatio	n						
	Company Receipt For:	Agent	e Year-to-Date V	_					
	Primary General	Ayyreyate		D/D Deduction (#05.00 Man					
	Other (specify)	0 0	275.00	P/R Deduction (\$25.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Dennis Poulos			Date of Receipt					
	Mailing Address 14111 Fenton Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61392274					
	Fenton	MI	48430-1539	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		124.98					
	Name of Employer New York Life Insurance	Occupatio	n						
	Company	Agent							
	Receipt For:	Aggregate	e Year-to-Date 🔻	_					
	Other (specify)	0 0	249.96	P/R Deduction (\$20.83 Mon- thly)					
<u></u>	Full Name (Last, First, Middle Initial) Ms. Patricia A. Goldin			Date of Receipt					
	Mailing Address 189 Wildwood Trail			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61395274					
	Petal	MS	39465-2681	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		130.00					
	Name of Employer New York Life Insurance	Occupatio	n	7					
	Company	Partner	Veer to Deta	_					
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻						
	Other (specify) ▼	0 0	210.00	P/R Deduction (\$10.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)		`	379.98					
	TOTAL This Period (last page this line number only)								

S	CHEDULE A (FEC Form 3X)		· · · · · · · · · · · · · · · · · · ·	FOR LINE NUMBER: PAGE 229 / 395
		Use separate schedule(s) or each category of the		(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
•			and the rest of the second	
An or	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may ame and add	r not be sold or used by any perso fress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\left \right\rangle$	New York Life Insurance Company Polit	ical Action	Committee	
́А.	Full Name (Last, First, Middle Initial) Mr. Les J. Marsh			Date of Receipt
	Mailing Address PO Box 1792			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61396274
	Great Falls	MT	59403-1792	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer New York Life Insurance	Occupation Agent	ו	
	Company Receipt For:	Ŭ	Year-to-Date V	-
	Primary General			P/R Deduction (\$1000.00
	Other (specify)		1000.00	Monthly)
В.	Full Name (Last, First, Middle Initial) Mr. Jeff Willis			Date of Receipt
	Mailing Address 320 West Cherry Street Box 36			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61402274
	Shelby	NE	68662-0036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	<u> </u>	_
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify)	0.0	300.00	P/R Deduction (\$25.00 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Mr. Jeff Mason			Date of Receipt
	Mailing Address 12 Heather Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61405274
	Manchester	NH	03104-2037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		124.98
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		_
	Receipt For:		Year-to-Date V	
	 Primary General Other (specify) ▼ 	0.0	249.96	P/R Deduction (\$20.83 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			1274.98
F				
Т	OTAL This Period (last page this line number or	ly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 230 / 395 (check only one)					
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions				
$\overline{\mathbb{N}}$	NAME OF COMMITTEE (In Full)							
\angle	New York Life Insurance Company Politi	ical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Gregory Eric Williams			Date of Receipt				
	Mailing Address 48 Mount Vernon Street			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR61406274				
	Somersworth	NH	03878-2644	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		120.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company Receipt For:	Agent Aggregate	e Year-to-Date 🔻	-1				
	Primary General Other (specify) ▼		240.00	P/R Deduction (\$20.00 Mon- thly)				
в.	Full Name (Last, First, Middle Initial) Ms. Sandra Udasco			Date of Receipt				
	Mailing Address 25 Ardsley Court			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR61413274				
	East Brunswick	NJ	08816-3672	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		120.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	3	Year-to-Date V	-				
	Primary General Other (specify) ▼		240.00	P/R Deduction (\$20.00 Mon- thly)				
	Full Name (Last, First, Middle Initial) Mr. Gregory P. Genovese			Date of Receipt				
	Mailing Address 14 Woodcutters Lane			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR61416274				
	Cold Spring Harbor	NY	11724-1206	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.02				
	Name of EmployerOcNew York Life InsuranceAgCompanyAgReceipt For:Ag		1					
			Year-to-Date 🔻	_				
	Primary General Other (specify) ▼		500.04	P/R Deduction (\$41.67 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)			490.02				
	TOTAL This Period (last page this line number only)							

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 231/395					
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)					
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$					
An	y information copied from such Reports and Sta	itements may	not be sold or used by any perso						
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.					
$\left \right $	NAME OF COMMITTEE (In Full)		•						
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	_					
Α.	Full Name (Last, First, Middle Initial) Ms. Sybilla C. Ruark Lenz			Date of Receipt					
	Mailing Address RR 1 Box 1530			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61419274					
	Factoryville	PA	18419-9778	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	, v	Year-to-Date 🔻						
	Primary General		300.00	P/R Deduction (\$25.00 Mon-					
	Other (specify)	0 0	300.00	thly)					
В.	Full Name (Last, First, Middle Initial) Mr. Randall D. Hart			Date of Receipt					
	Mailing Address 3547 State Route 7			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61424274					
	New Waterford	OH	44445-8719	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		150.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company Receipt For:	Agent Aggregate	Year-to-Date V						
	Primary General	, .gg. cgalc		P/R Deduction (\$25.00 Mon-					
_	Other (specify) v		300.00	thly)					
С.	Full Name (Last, First, Middle Initial) Mr. Moses Eric Cobb			Date of Receipt					
	Mailing Address 7646 Tiverton Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61428274					
	Springfield	VA	22152-2018	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		135.00					
	Name of Employer New York Life Insurance	Occupation							
	Company		tner Year-to-Date V	_					
				P/R Deduction (\$25.00 Mon-					
	Other (specify)	0 0	255.00	thly)					
s	LUBTOTAL of Receipts This Page (optional)		······	435.00					
	TOTAL This Period (last page this line number only)								

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 232 / 395					
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)					
			Detailed Summary Page	X 11a 11b 11c 12					
•	winformation conical from cuck Devices (0)	amarta	, not be cold as we address and	13 14 15 16 17					
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	riot be sold or used by any perso lress of any political committee to	solicit contributions from such committee.					
$\overline{\mathbf{N}}$	NAME OF COMMITTEE (In Full)								
\backslash	New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Russell Bicker			Date of Receipt					
	Mailing Address 125 Poplar Forest Drive		M M / D D / Y Y						
	City	State	Zip Code	Transaction ID: PR61435274					
	Slippery Rock	PA	16057-8527	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		499.98					
	Name of Employer New York Life Insurance	Occupation	1	-					
	Company	Agent		_					
	Receipt For:	Aggregate	Year-to-Date V						
	Primary General Other (specify) ▼	0 0	999.96	P/R Deduction (\$83.33 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. John Pereira			Date of Receipt					
	Mailing Address 2815 E 10th Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61437274					
	the Dalles	OR	97058-4020	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		499.98					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	U U	Year-to-Date V						
	Primary General		000.000	P/R Deduction (\$83.33 Mon-					
	Other (specify)	0.0	999.96	thly)					
C.	Full Name (Last, First, Middle Initial) Mr. Rodney S. Ferguson			Date of Receipt					
	Mailing Address 466 Blackwolf Run Drive	•		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61446274					
	Wildwood	MO	63040-1571	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company Agent Receipt For: Aggregat								
			Year-to-Date 🔻	D/D Dathatian (#05.00 Mar					
Primary General Other (specify) ▼			300.00	P/R Deduction (\$25.00 Mon- thly)					
s	SUBTOTAL of Receipts This Page (optional)								
т	TOTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		FOR LINE NUMBER: PAGE 233 / 395 (check only one)				
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page		X 11a 11b 11c 12				
				13	14	1	5	16	1
	y information copied from such Reports and Stat for commercial purposes, other than using the na								;
$\left \right\rangle$	NAME OF COMMITTEE (In Full)		0 III						
\mathbb{Z}	New York Life Insurance Company Politi	cal Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas J. Kanaley			Date of	Receipt				
	Mailing Address 150 Lenox Way				/ D				Y
	City	State	Zip Code	Transac	tion ID:	PR61	45227	'4	
	San Francisco	CA	94127-1113	Amount	of Each	Receip	ot this P	eriod	
	FEC ID number of contributing federal political committee.	C					-	150.0	0
	Name of Employer New York Life Insurance	Occupation	ו						
	New York Life Insurance Company	Agent							
	Receipt For:	Aggregate	Year-to-Date V						
	Other (specify) ▼	0 0	300.00	P/R Dec thly)	luction (\$25.0	0 Mor	1-	
в.	Full Name (Last, First, Middle Initial) Ms. Cherilyn Nguyen			Date of	Receipt				
	Mailing Address 545 East St. John Street	MM	/ D	D /	YY	Y	Y		
	City	State	Zip Code	Transac	tion ID:	PR61	45927	'4	
	San Jose	CA	95112-3412	Amount	of Each	Receip	ot this P	eriod	
	FEC ID number of contributing federal political committee.	C					-	150.0	0
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent							
	Receipt For:	Aggregate	Year-to-Date V						
	Other (specify)	0 0	300.00	P/R Dec thly)	luction (\$25.0	0 Mor	1-	
— C.	Full Name (Last, First, Middle Initial) Mr. Edward C. Han			Date of	Receipt				
	Mailing Address 5619 Blackoak Court			MM		D /	YY	Y	Y
	City	State	Zip Code	Transac	tion ID:	PR61	47227	'4	
	Stockton	CA	95207-4685		of Each				
	FEC ID number of contributing federal political committee.	C					-	195.0	0
	Name of Employer New York Life Insurance Company	nce Occupation G.O. Agency Standards Consultant							
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	255.00	P/R Dec Weekly)	luction (\$15.0	00 Bi-		
s	UBTOTAL of Receipts This Page (optional)		·····				4	95.0	0
Т	OTAL This Period (last page this line number on	ly)	· · · · · · · · · · · · · · · · · · ·	-					

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 234 / 395
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
۸	vinformation applied from such Departs and Ot-	tomonto m-	(not be cold or used by environment	13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\left \right\rangle$	New York Life Insurance Company Polit	tical Action	Committee	
<u>۸</u> .	Full Name (Last, First, Middle Initial) Mr. William Schultz			Date of Receipt
	Mailing Address PO Box 489			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61474274
	Shelton	WA	98584-0489	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent Aggregate	e Year-to-Date ▼	
	Primary General	, iggi ogaio		P/R Deduction (\$35.00 Mon-
	Other (specify)	0 0	420.00	thly)
В.	Full Name (Last, First, Middle Initial) Mr. Paul J. Haye			Date of Receipt
	Mailing Address 6475 Dowling Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61475274
	Perrysburg	OH	43551-9514	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	า	_
	Company	Agent		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Henoch Lerner			Date of Receipt
	Mailing Address 162 A Maple Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61482274
	Spring Valley	NY	10977-4721	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
			ı	
			<u> </u>	
			e Year-to-Date 🔻	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			510.00
Ĕ				
Т	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 235/395						
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)					
			Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports and Statements may		not be cold as used to serve	13 14 15 16 17						
or	for commercial purposes, other than using the na	solicit contributions from such committee.							
\sum	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Brian Ruh			Date of Receipt					
	Mailing Address 23702 Steinthal Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61485274					
	Kiel	WI	53042-4994	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		1000.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company	Agent							
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻						
	Other (specify) ▼		1000.00	P/R Deduction (\$166.67 Mo- nthly)					
в.	Full Name (Last, First, Middle Initial) Mr. Harvey C. Krautschun			Date of Receipt					
	Mailing Address PO Box 157			M M / D D / Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61486274					
	Spearfish	SD	57783-0157	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		361.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent	Veer to Deta	_					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/D Deduction (\$201.00 M					
	Other (specify)		561.00	P/R Deduction (\$361.00 Mo- nthly)					
с.	Full Name (Last, First, Middle Initial) Mr. Billy L. Nicholson			Date of Receipt					
	Mailing Address 214 Swallow Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR61496274					
	McAlester	OK	74501-7418	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		100.02					
	Name of Employer New York Life Insurance	Occupation	1						
	<u>Company</u> Agent		Veer te Dete						
			Year-to-Date 🔻	P/P Deduction (#10.07 Mar					
			200.04	P/R Deduction (\$16.67 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)		·····	1461.02					
	TOTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 236 / 395 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
$\sum_{i=1}^{n}$	NAME OF COMMITTEE (In Full)		,	
\geq	New York Life Insurance Company Polit	ical Action	n Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Mark James McAdams	Date of Receipt		
	Mailing Address 2402 Laureldale Park La	ane		M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR61497274
	Spring	TX	77386-2974	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer New York Life Insurance	Occupatio	n	
	Company Receipt For:	Agent	e Year-to-Date V	_
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$50.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Ms. Donna Knasiak			Date of Receipt
	Mailing Address 33 Yale Square			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61508274
	Morton	PA	19070-1923	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer New York Life Insurance	Occupatio Agent	n	
	Company Receipt For:	, v	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
 c.	Full Name (Last, First, Middle Initial) Mr. Christopher Jones			Date of Receipt
	Mailing Address 25723 Bridle Creek Dr. 1	N		
	City	State	Zip Code	Transaction ID: PR61512274
	Magnolia	ТХ	77355-5879	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer New York Life Insurance Company	Occupatio Agent	n	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	D/D Deduction (\$25.00 Man
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			600.00
T	OTAL This Period (last page this line number or	וע)	· · · · · · · · · · · · · · · · · · ·	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 237 / 395 (check only one)
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any persol lress of any political committee to	on for the purpose of soliciting contributions
Ν	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Boyd Phillips			Date of Receipt
	Mailing Address 14191 Highway 221			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61526274
	Marion	NC	28752-7552	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:		Year-to-Date V	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
В.	Full Name (Last, First, Middle Initial) Mr. Robert J. Hebron			Date of Receipt
	Mailing Address 231 Wyoming Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR615274
	Maplewood	NJ	07040-2013	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer New York Life Insurance Company	Occupation Svp	1	_
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)
<u></u>	Full Name (Last, First, Middle Initial) Mr. Thomas J. Nelson			Date of Receipt
	Mailing Address 102 Arlington Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR61530274
	<u>Utica</u>	NY	13501-6207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company		· · · · ·	
			Year-to-Date V	D/D Dadwatian (#05.00 Mar
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			625.00
т	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 238 / 395 (check only one)		
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	/ y not be sold or used by any perso dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee.		
\sum	NAME OF COMMITTEE (In Full)					
\sum	New York Life Insurance Company Poli	tical Action	Committee			
A.	Full Name (Last, First, Middle Initial) Mr. Lucious Hicks, IV			Date of Receipt		
	Mailing Address 22330 S Meyler Street # 23			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR61538274		
	Torrance	CA	90502-2381	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		120.00		
	Name of Employer New York Life Insurance Company	Occupation Agent	n			
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	240.00	P/R Deduction (\$20.00 Mon- thly)		
В.	Full Name (Last, First, Middle Initial) Mr. Kurt Anderson			Date of Receipt		
	Mailing Address 13038 Village Chase Ci	rcle		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR61547274		
	Tampa	FL	33618-8359	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		700.00		
	Name of Employer New York Life Insurance	Occupatio				
	Company		velopment Manager			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	666.68	P/R Deduction (\$83.34 Bi- Weekly)		
с.	Full Name (Last, First, Middle Initial) Mr. Christopher J. Kolbeck			Date of Receipt		
	Mailing Address 11 Mountain Laurel Wa	у		M · M / D · D / Y · Y · Y · Y		
	City	State	Zip Code	Transaction ID: PR61559274		
	Azusa	CA	91702-6265	Amount of Each Receipt this Period		
	Company			130.00		
			n velopment Manager	7		
			e Year-to-Date V	_		
				P/R Deduction (\$10.00 Bi-		
	Other (specify)	0 0	260.00	Weekly)		
s	UBTOTAL of Receipts This Page (optional)			950.00		
т	OTAL This Period (last page this line number o	nly)				

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 239 / 395		
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)		
			Detailed Summary Page	X 11a 11b 11c 12		
٨٣	y information copied from such Reports and Sta	tomonto mo	unot be sold or used by any perce	13 14 15 16 17		
	for commercial purposes, other than using the n					
	NAME OF COMMITTEE (In Full)					
\geq	New York Life Insurance Company Polit	tical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Mr. Jonathan B. Swaney			Date of Receipt		
	Mailing Address 3 Muirfield Road			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR61566274		
	Falmouth	ME	04105	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		130.00		
	Name of Employer New York Life Insurance Company	Occupation Director	ı			
	Receipt For:	Aggregate	Year-to-Date V			
	Primary General Other (specify) ▼	U U U	260.00	P/R Deduction (\$10.00 Bi- Weekly)		
В.	Full Name (Last, First, Middle Initial) Mr. Barry A. Schub			Date of Receipt		
	Mailing Address 4 Wren Court					
	City	State	Zip Code	Transaction ID: PR61569274		
	Morristown	NJ	07960-6346	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.12		
	Name of Employer New York Life Insurance	Occupation Executive	n e Vice President			
	Company Receipt For:		Year-to-Date ▼	_		
	Primary General Other (specify) ▼	1 1	500.24	P/R Deduction (\$19.24 Bi- Weekly)		
<u></u> С.	Full Name (Last, First, Middle Initial) Ms. Michele M. Kenaga			Date of Receipt		
	Mailing Address 3 Pequot Drive					
	City	State	Zip Code	Transaction ID: PR61572274		
	Norwalk	CT	06855-1607	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		195.00		
	Name of Employer New York Life Insurance	Occupation	า			
	Company	Vice Pres		_		
	Receipt For:		Year-to-Date ▼			
	Other (specify) ▼	0 0	284.29	P/R Deduction (\$15.00 Bi- Weekly)		
s	UBTOTAL of Receipts This Page (optional)		······	575.12		
	OTAL This Period (last page this line number or			-		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 240 / 395 (check only one)					
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page						
			Detailed Summary Page	13 14 15 16 17					
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Polit	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Mike Harrison			Date of Receipt					
	Mailing Address 105 Scenic Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR63192274					
	Madison	AL	35758-8786	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		120.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	1						
	Receipt For:	Ŭ	Year-to-Date V						
	Primary General Other (specify) ▼	0 0	240.00	P/R Deduction (\$20.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Alan I. Weissbaum			Date of Receipt					
	Mailing Address 10912 Northwest 4th Dr	ive		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR63205274					
	Coral Springs	FL	33071-8120	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	, v	Year-to-Date V	_					
	Primary General Other (specify) ▼	U U U	300.00	P/R Deduction (\$25.00 Mon- thly)					
	Full Name (Last, First, Middle Initial) Mr. Alan H. Shortell			Date of Receipt					
	Mailing Address 161 Farrington Avenue								
	City	State	Zip Code	Transaction ID: PR63216274					
	Sleepy Hollow	NY	10591-1304	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		250.12					
	Name of Employer New York Life Insurance	Occupation							
	Company		sident						
			Year-to-Date V						
	Other (specify)	0 0	500.24	P/R Deduction (\$19.24 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)			520.12					
т	TOTAL This Period (last page this line number only)								

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 241/395				
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)				
11			Detailed Summary Page	X 11a 11b 11c 12				
An	y information copied from such Reports and Sta	tomente moi	not be sold or used by any para	13 14 15 16 17				
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.				
\sum	NAME OF COMMITTEE (In Full)							
$\langle \rangle$	New York Life Insurance Company Polit	ical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Ms. Julia A. Warren			Date of Receipt				
	Mailing Address 78 Crest Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR633274				
	South Orange	NJ	07079-1037	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		325.00				
	Name of Employer New York Life Insurance Company	Occupation Senior M	n anaging Director					
	Receipt For:	1	Year-to-Date V	_				
	Primary General		650.00	P/R Deduction (\$25.00 Bi-				
	Other (specify)	0 0	030.00	Weekly)				
в.	Full Name (Last, First, Middle Initial) Mr. James J. Coffee			Date of Receipt				
	Mailing Address 327 Lakeside Dr. N			M M / D D / Y Y Y Y				
	City		Zip Code	Transaction ID: PR637274				
	Forked River	NJ	08731-4227	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		126.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company		Vice President - Systems					
	Receipt For: Primary General	Aggregate	Year-to-Date V					
	Primary General Other (specify) ▼	0 0	204.00	P/R Deduction (\$10.00 Bi- Weekly)				
 C.	Full Name (Last, First, Middle Initial) Ms. Diane H. Gould			Date of Receipt				
	Mailing Address 1102 Prospect Hill Place	9		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR638274				
	Rockville	MD	20850-2868	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		498.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company			_				
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General Other (specify) ▼	0 0	996.00	P/R Deduction (\$83.00 Mon- thly)				
s	JBTOTAL of Receipts This Page (optional)			949.00				
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the		FOR LINE NUMBER: PAGE 242 / 395 (check only one)				
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	/ y not be sold or used by any perso dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee.				
\sum	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Polit	Committee						
A.	Full Name (Last, First, Middle Initial) Mr. Bernee V. Kapili M.D.			Date of Receipt				
	Mailing Address 200 East End Avenue Apt. 14G			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR64242274				
	New York	NY	10128-7891	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.12				
	Name of Employer New York Life Insurance Company	Occupation First Vice	n e President					
	Receipt For:		e Year-to-Date V	_				
	Primary General Other (specify) ▼	0 0	500.24	P/R Deduction (\$19.24 Bi- Weekly)				
в.	Full Name (Last, First, Middle Initial) Ms. Elisabeth M. Ingoldsby			Date of Receipt				
	Mailing Address 145 N Four Bridges Roa	ıd		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR64245274				
	Long Valley	NJ	07853-3214	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		325.00				
	Name of Employer New York Life Insurance	Occupation						
	Company Receipt For:	1	e Year-to-Date V					
	Primary General Other (specify)		650.00	P/R Deduction (\$25.00 Bi- Weekly)				
		0 0	0 0 0 0 0 0 0 0					
C.	Full Name (Last, First, Middle Initial) Ms. Terry B. Capsay			Date of Receipt				
	Mailing Address 6144 N Keeler Avenue			M · M / D · D / Y · Y · Y · Y				
	City	State	Zip Code	Transaction ID: PR64250274				
	Chicago	IL	60646-5224	Amount of Each Receipt this Period				
	Company			130.00				
			n g Director					
			e Year-to-Date V	_				
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)				
s	UBTOTAL of Receipts This Page (optional)			705.12				
\vdash	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)							

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose or for commercial purposes, other than using the name and address of any political committee to solicit contribution NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial)	from such committee.						
Detailed Summary Page A 11a Any information copied from such Reports and Statements may not be sold or used by any person for the purpose or for commercial purposes, other than using the name and address of any political committee to solicit contribution NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial)	t D P P P P P P P P P P P P P						
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose or for commercial purposes, other than using the name and address of any political committee to solicit contribution NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial)	soliciting contributions from such committee.						
or for commercial purposes, other than using the name and address of any political committee to solicit contribution NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial)	from such committee.						
New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial)	D; PR64266274						
Full Name (Last, First, Middle Initial)	D; PR64266274						
	D; PR64266274						
A. Mr. Arthur H. Seter Date of Rec.	D: PR64266274						
Mailing Address 1 Merion Drive							
Purchase NY 10577-1301 Amount of E	ch Receipt this Period						
FEC ID number of contributing federal political committee.	125.06						
Name of Employer Occupation							
Company Svp & Deputy Chief Investment Officer							
Receipt For: Aggregate Year-to-Date ▼							
Primary General Other (specify) ▼ 250.12	n (\$9.62 Bi-W-						
Full Name (Last, First, Middle Initial) Date of Reco B. Ms. Carol S. Mayer Date of Reco	ot						
Mailing Address 27 Spook Ridge Road	D / Y Y Y Y Y						
City State Zip Code Transaction	Transaction ID: PR64268274						
U Saddle River NJ 07458-1525 Amount of E	ch Receipt this Period						
FEC ID number of contributing federal political committee.	250.25						
Name of Employer Occupation New York Life Insurance V P & Appendix Council							
Company V.F. & Associate General Courisei							
Receipt For: Aggregate Year-to-Date ▼							
Primary General Other (specify) ▼ 500.50	n (\$19.25 Bi-						
Full Name (Last, First, Middle Initial) C. Mr. Paul K. Cunningham Date of Recu	ot						
Mailing Address 42 Strickland Place	D / Y Y Y Y						
City State Zip Code Transaction	b: PR64269274						
Manhasset NY 11030-2717 Amount of E	ch Receipt this Period						
FEC ID number of contributing federal political committee.	250.25						
Name of Employer Occupation							
New York Life Insurance Company Managing Director							
Receipt For: Aggregate Year-to-Date ▼							
Primary General Other (specify) ▼ 500.50	n (\$19.25 Bi-						
SUBTOTAL of Receipts This Page (optional)	625.56						
TOTAL This Period (last page this line number only)							

5	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 244 / 395			
	,		Use separate schedule(s) or each category of the	(check only one)			
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
				13 14 15 16 17			
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
$ \rangle$	New York Life Insurance Company Polit	Committee					
\angle							
Δ	Full Name (Last, First, Middle Initial) Mr. David R. Monroe			Date of Receipt			
Λ.	Mailing Address 96 Pleasant Drive						
	City	State	Zip Code	Transaction ID: PR64270274			
	Southbury	СТ	06488-3231	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		125.06			
	Name of Employer New York Life Insurance	Occupation					
	Company Receipt For:	Employe	e Year-to-Date ▼	_			
	Primary General	Ayyreyale		D/D Deduction (#0.62 Bi W/			
	Other (specify) ▼		250.12	P/R Deduction (\$9.62 Bi-W- eekly)			
Б	Full Name (Last, First, Middle Initial)			Data of Dessint			
р.	Ms. Elizabeth W. McCarthy Mailing Address 124 College Place			Date of Receipt			
	Maining Address 124 College Flace						
	City	State	Zip Code	Transaction ID: PR64273274			
	South Orange	NJ	07079-2506	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		250.25			
	federal political committee.						
	Name of Employer New York Life Insurance	Occupation					
	Company		President				
	Receipt For: Primary General	Aggregate	Year-to-Date V				
	Other (specify)		500.50	P/R Deduction (\$19.25 Bi- Weekly)			
~	Full Name (Last, First, Middle Initial)			Data of Data int			
С.	Ms. Janet M. Dolan Mailing Address 305 W 98th Street			Date of Receipt			
	Apt. 1En						
	City	State	Zip Code	Transaction ID: PR64274274			
	New York	NY	10025-5558	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		125.06			
	federal political committee.						
	Name of Employer New York Life Insurance	Occupation					
	Company		President				
	Receipt For: Primary General	Aggregate	Year-to-Date V				
	Other (specify)		250.12	P/R Deduction (\$9.62 Bi-W- eekly)			
			<u> </u>				
	•			500.37			
S	UBTOTAL of Receipts This Page (optional)		•••••••••••••••••••••••••••••••••••••••	500.37			
-							
1 r	TOTAL This Period (last page this line number only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 245 / 395 (check only one)				
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12				
	y information copied from such Reports and Sta for commercial purposes, other than using the n							
	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Polit	tical Action	Committee					
<u>А.</u>	Full Name (Last, First, Middle Initial) Mr. Gary W. Scofield			Date of Receipt				
	Mailing Address 45 Blydenberg Lane			M M / D D / Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR64275274				
	Stonybrook	NY	11790-2123	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			125.06				
	Name of Employer New York Life Insurance Company	Occupation Senior Vi	n ce President & Chief Actuar	/				
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Primary General Other (specify) ▼		250.12	P/R Deduction (\$9.62 Bi-W- eekly)				
в.	Full Name (Last, First, Middle Initial) Mr. Michael Arnheiter			Date of Receipt				
	Mailing Address 220 N Falmouth Highwa	ay		M M / D D / Y Y Y Y				
	City		Zip Code	Transaction ID: PR645274				
	North Falmouth	MA	02556-3102	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		600.00				
	Name of Employer New York Life Insurance Company	Occupation Agent	1	-				
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	1200.00	P/R Deduction (\$100.00 Mo- nthly)				
<u></u>	Full Name (Last, First, Middle Initial) Mr. Tommy Ingram			Date of Receipt				
	Mailing Address 114 Coldwater Lane			M M / D D / Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR64540274				
	Austin	ТХ	78734-5206	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	oompany		Year-to-Date V					
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)				
	UBTOTAL of Receipts This Page (optional)			875.06				
⊢			•					
Ľ	TOTAL This Period (last page this line number only)							

50	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 246 / 395				
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)				
11			Detailed Summary Page	X 11a 11b 11c 12				
•								
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)							
$\left \right\rangle$	New York Life Insurance Company Polit	tical Action	Committee					
<u> </u>	Full Name (Last, First, Middle Initial)							
Α.	Mr. Douglas W. Pelz			Date of Receipt				
	Mailing Address 2404 Thomas Hill Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR64543274				
	Coeur D Alene	ID	83815-6334	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		300.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent		_				
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)				
В.	Full Name (Last, First, Middle Initial) Ms. Ellen M. Coletto			Date of Receipt				
	Mailing Address 61 Chester Avenue			M M / D D / Y Y Y Y				
	City		Zip Code	Transaction ID: PR64710274				
	Brooklyn	NY	11218-2020	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		325.00				
	Name of Employer New York Life Insurance	Occupation						
	Company		ormation Systems					
	Receipt For: Primary General	Aggregate	Year-to-Date V					
	Other (specify) ▼		650.00	P/R Deduction (\$25.00 Bi- Weekly)				
<u>с.</u>	Full Name (Last, First, Middle Initial) Ms. Dorothea Rodd			Date of Receipt				
	Mailing Address 14 Old Neck Court							
	City	State	Zip Code	Transaction ID: PR64712274				
	Manorville	NY	11949-3238	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		130.00				
	Name of Employer New York Life Insurance	Occupation		7				
	Company Receipt For:		sident					
			Year-to-Date V					
	Other (specify) ▼	0 0	202.91	P/R Deduction (\$10.00 Bi- Weekly)				
s	UBTOTAL of Receipts This Page (optional)			755.00				
F	· · · · · · · · · · · · · · · · · · ·		•	-				
Т	TOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 247 / 395 (check only one)		
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12	
An	y information copied from such Reports and Sta	atements may	y not be sold or used by any perso	13 14 15 16 17 on for the purpose of soliciting contributions	
	for commercial purposes, other than using the r				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Poli				
\square	New Fork Life insurance Company For				
Α.	Full Name (Last, First, Middle Initial) Mr. James Van Merkensteijn			Date of Receipt	
	Mailing Address 1313A 12th Street North	nwest		M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR64715274	
	Washington	DC	20005-4401	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			125.06	
	Name of Employer New York Life Insurance	Occupatio	n	_	
	Company		ve Vice President		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻		
	Other (specify)	0 0	250.12	P/R Deduction (\$9.62 Bi-W- eekly)	
в.	Full Name (Last, First, Middle Initial) Mr. Harry W. DeHaven			Date of Receipt	
	Mailing Address 9065 Bethel Road			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR64719274	
	Gainesville	GA	30506-3963	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		156.00	
	Name of Employer New York Life Insurance	Occupatio			
	Company Receipt For:		ormation Systems		
	Primary General	Aggregate		P/R Deduction (\$11.54 Bi-	
	Other (specify)	0 0	300.00	Weekly)	
с.	Full Name (Last, First, Middle Initial) Mr. John A. Foster			Date of Receipt	
	Mailing Address 5707 Sodus Shores			M M / D D / Y Y Y Y	
	City	State	Zip Code	Transaction ID: PR64720274	
	Sodus	NY	14551-9610	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		325.00	
	Name of Employer New York Life Insurance	Occupation Partner	n		
	Company		e Year-to-Date V	-1	
	Primary General Other (specify) ▼		650.00	P/R Deduction (\$25.00 Bi- Weekly)	
s	LUBTOTAL of Receipts This Page (optional)			606.06	
	OTAL This Period (last page this line number o				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 248 / 395 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Jessie M. Colgate			Date of Receipt
	Mailing Address 5815 Potomac Avenue	Northwest		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR648274
	Washington	DC	20016-2517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			452.01
	Name of Employer New York Life Insurance	Occupatio	n	
	Company		ice of Government Affairs	
	Receipt For:	Aggregate	e Year-to-Date V	
	Other (specify)	0 0	904.02	P/R Deduction (\$34.77 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Steven M. Jacobsberg			Date of Receipt
	Mailing Address 23 Hampton Court			M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR65205274
	Port Washingtn	NY	11050-3020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupatio Vice Pres		
	Company Receipt For:		e Year-to-Date V	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
<u></u>	Full Name (Last, First, Middle Initial) Ms. Laura A. Sheldon			Date of Receipt
	Mailing Address 3 Cauldwell Street			
	City	State	Zip Code	Transaction ID: PR65206274
	Eastchester	NY	10709-3603	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance Company		pplications Specialist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		·····	712.01
	OTAL This Period (last page this line number or			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 249 / 395 (check only one)					
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$				
Ar or	ry information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions				
Ν	NAME OF COMMITTEE (In Full)							
\angle	New York Life Insurance Company Polit	ical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Dominic Sacratini			Date of Receipt				
	Mailing Address 2101 Misty Meadow Roa	ad		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR65217274				
	Finksburg	MD	21048-1744	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Occupation Depression			325.00				
			n					
	Company Receipt For:	Partner	e Year-to-Date V					
	Primary General	Aggregate		P/R Deduction (\$25.00 Bi-				
	Other (specify)	0 0	650.00	Weekly)				
в.	Full Name (Last, First, Middle Initial) Mr. Mark Watts			Date of Receipt				
	Mailing Address 3568 Huntertown Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR65433274				
	Allison Park	PA	15101-1039	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		130.00				
	Name of Employer New York Life Insurance	Occupatio		_				
	Company Receipt For:	Senior Pa	artner e Year-to-Date V	_				
	Primary General	Ayyreyate		P/R Deduction (\$10.00 Bi-				
	Other (specify)	0 0	260.00	Weekly)				
с.	Full Name (Last, First, Middle Initial) Mr. Puneet Seth			Date of Receipt				
•	Mailing Address 2 Betsy Ross Court							
	City	State	Zip Code	Transaction ID: PR65434274				
	East Brunswick	NJ	08816-3264	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		325.00				
	Name of Employer Occupation New York Life Insurance Senior P Company Receipt For: Aggregat Primary General Image: Company			7				
			e Year-to-Date V	_				
				P/R Deduction (\$25.00 Bi-				
	Other (specify)	0 0	517.00	Weekly)				
s	UBTOTAL of Receipts This Page (optional)			780.00				
т	TOTAL This Period (last page this line number only)							

6				FOR LINE NUMBER: PAGE 250 / 395					
	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	(check only one)					
IT	EMIZED RECEIPTS		Detailed Summary Page	X 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.									
Ν	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee						
A.	Full Name (Last, First, Middle Initial) Mr. John P. Curry			Date of Receipt					
	Mailing Address 905 Foxhollow Run			M · M / D · D / Y · Y · Y · Y					
	City	State	Zip Code	Transaction ID: PR65435274					
	Alpharetta	GA	30004-0959	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	Name of Employer New York Life Insurance Company	Occupation Senior V.	P South Central Agencies	_					
	Receipt For:		Year-to-Date V						
	Primary General Other (specify) v		225.00	P/R Deduction (\$15.00 Bi- Weekly)					
В.	Full Name (Last, First, Middle Initial)			Data of Descript					
Б.	Mr. Thomas J. O'Grady Mailing Address 6006 Three Rivers Drive)		Date of Receipt					
	City	State	Zip Code	Transaction ID: PR65437274					
	Harrisburg	PA	17112-3553	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of Employer New York Life Insurance Company	Occupation Field Par		_					
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) The second seco	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)					
<u></u>	Full Name (Last, First, Middle Initial) Mr. Daniel F. Clements			Date of Receipt					
	Mailing Address 600 Rosincress Court			M M / D D / Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR65439274					
	San Ramon	CA	94582-5079	Amount of Each Receipt this Period					
	Company			130.00					
			n e President						
			Year-to-Date V	1					
	Primary General Other (specify) ▼	U U	260.00	P/R Deduction (\$10.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)			650.00					
\vdash			· · · ·						
L'	TOTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 251 / 395 (check only one) 11a 11b 11c 12 13 14 15 16 17			
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements mana	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\sum}$	NAME OF COMMITTEE (In Full)		,				
\geq	New York Life Insurance Company Poli	tical Actior	n Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Chinsoo Park			Date of Receipt			
	Mailing Address 2230 George C. Marsha Apt. # 428	all Drive		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR65444274			
	Falls Church VA		22043-2587	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		130.00			
	Name of Employer New York Life Insurance	Occupatio					
	Company Receipt For:	Senior P	artner e Year-to-Date ▼	_			
	Primary General	Ayyreyale		P/R Deduction (\$10.00 Bi-			
	Other (specify)	0 0	232.00	Weekly)			
R	Full Name (Last, First, Middle Initial) Mr. Brian R. Lescinskas			Date of Receipt			
υ.	Mailing Address 9737 E Mount Pleasant	Drive					
	City	State	Zip Code	Transaction ID: PR65448274			
	Tucson	AZ	85749-9357	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		130.00			
	Name of Employer New York Life Insurance	Occupatio					
	Company Receipt For:	, v	g Partner e Year-to-Date ▼	_			
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)			
с.	Full Name (Last, First, Middle Initial) Mr. Brooks Cowan			Date of Receipt			
	Mailing Address 60 Pineapple Street 8F			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR65463274			
	Brooklyn	NY	11201-6841	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		195.00			
	Name of Employer New York Life Insurance	Occupatio					
	Company Receipt For:		I Systems Specialist e Year-to-Date ▼	_			
	Primary General	riggrogati		P/R Deduction (\$15.00 Bi-			
	Other (specify) v	0 0	390.00	Weekly)			
s	UBTOTAL of Receipts This Page (optional)			455.00			
т	TOTAL This Period (last page this line number only)						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 252 / 395 (check only one)		
11			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$		
	y information copied from such Reports and Sta for commercial purposes, other than using the r			on for the purpose of soliciting contributions		
\sum	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	New York Life Insurance Company Poli					
A.	Full Name (Last, First, Middle Initial) Mr. Brad A. Heyde			Date of Receipt		
	Mailing Address 2210 Winsted Drive #51	105		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR65468274		
	Dallas	TX	75214-0000	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		130.00		
	Name of Employer New York Life Insurance	Occupatio	n			
	Company Receipt For:	Partner Aggregate	e Year-to-Date 🔻	_		
	Primary General	, iggi ogui		P/R Deduction (\$10.00 Bi-		
	Other (specify) v	0 0	260.00	Weekly)		
В.	Full Name (Last, First, Middle Initial) Mr. Greg Bilbro			Date of Receipt		
	Mailing Address 8308 Ville Court Northe	ast		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR65470274		
	Albuquerque	NM	87113-2809	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		130.00		
	Name of Employer New York Life Insurance	Occupatio Partner	n			
	Company Receipt For:		e Year-to-Date 🔻	_		
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)		
<u></u>	Full Name (Last, First, Middle Initial) Ms. Cande J. Olsen			Date of Receipt		
•	Mailing Address 85 Canterbury Road					
	City	State	Zip Code	Transaction ID: PR656274		
	Chatham	NJ	07928-2901	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		325.00		
	Name of Employer New York Life Insurance	Occupatio		7		
	Company Receipt For:		gulatory Modernization	_		
	Primary General Other (specify) ▼		586.64	P/R Deduction (\$25.00 Bi- Weekly)		
s	LUBTOTAL of Receipts This Page (optional)			585.00		
	OTAL This Period (last page this line number o					
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 253 / 395		
--------------------------	------------------------------------------------------------------------------------------------------	----------------------------	-------------------------------------------------------------------------	--------------------------------------------	--	--
	EMIZED RECEIPTS		or each category of the	(check only one)		
	EMIZED RECEIPTS		Detailed Summary Page			
Ar	ny information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	rot be sold or used by any perso lress of any political committee to	solicit contributions from such committee.		
∇	NAME OF COMMITTEE (In Full)					
	New York Life Insurance Company Politi	ical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Ms. Sheila K. Davidson			Date of Receipt		
	Mailing Address 45 East Ninth Street Apt. 6/7			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR659274		
	New York	NY	10003-6307	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		462.41		
	Name of Employer New York Life Insurance	Occupation	ו			
	Company	E.V.P L	aw & Corporate Administrat	io		
	Receipt For:	Aggregate	Year-to-Date V			
	Primary General Other (specify) ▼	0 0	924.82	P/R Deduction (\$35.57 Bi- Weekly)		
в.	Full Name (Last, First, Middle Initial) Mr. Verne Brakke			Date of Receipt		
	Mailing Address 624 N Jackson			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR65979274		
	Pierre	SD	57501-2314	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		150.00		
	Name of Employer New York Life Insurance	Occupatior	1			
	Company	Agent		_		
	Receipt For:	Aggregate	Year-to-Date V			
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)		
<u>с.</u>	Full Name (Last, First, Middle Initial) Ms. Victoria C. Buhrow			Date of Receipt		
	Mailing Address 21 81st Avenue			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR66021274		
	Treasure Island	FL	33706-5212	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		325.00		
	Name of Employer New York Life Insurance Company	Occupation First Vice	a President	-		
	Receipt For:	Aggregate	Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)		
s	UBTOTAL of Receipts This Page (optional)		••••••	937.41		
Т	OTAL This Period (last page this line number on	ıly)				

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 254 / 395			
	EMIZED RECEIPTS		or each category of the	(check only one)			
••			Detailed Summary Page	X 11a 11b 11c 12			
٨	Any information copied from such Reports and State		unot be cold or used by any perce	13 14 15 16 17			
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.			
\mathbb{N}	NAME OF COMMITTEE (In Full)						
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Jean-Louis M. Pedat			Date of Receipt			
	Mailing Address 148 West 70th Street Apt. 8			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR66022274			
	New York	NY	10023-4412	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		520.00			
	Name of Employer New York Life Insurance	Occupation	1	1			
	New York Life Insurance Company	Cvp - Inte	ernet Management				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Other (specify)	0 0	1040.00	P/R Deduction (\$40.00 Bi- Weekly)			
в.	Full Name (Last, First, Middle Initial) Mr. John A. Cullen			Date of Receipt			
	Mailing Address 527 Parkview Avenue			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR66023274			
	Westfield	NJ	07090-2403	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		260.00			
	Name of Employer New York Life Insurance	Occupation		7			
	Company	1 1	roller & Chief Accounting Of	·			
	Receipt For:	Aggregate	Year-to-Date V				
	Other (specify)	0 0	520.00	P/R Deduction (\$20.00 Bi- Weekly)			
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Robert A. McLoughlin			Date of Receipt			
	Mailing Address 6 Hollywood Drive			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR66024274			
	Dobbs Ferry	NY	10522-3009	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		325.00			
	Name of Employer	Occupation	า	1			
	New York Life Insurance CompanyViceReceipt For:Aggreen		sident				
			e Year-to-Date 🔻				
	Other (specify)	0 0	650.00	P/R Deduction (\$25.00 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)			1105.00			
\vdash	FOTAL This Period (last page this line number only)						

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 255 / 395 (check only one)	
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
Ar	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Polit	ical Action	Committee	
\square			Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Helen M. Napoli			Date of Receipt
	Mailing Address 2 Oxford Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR66025274
	North Caldwell	NJ	07006-4216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer New York Life Insurance	Occupation	1	7
	Company	Director	Veerste Dete 🗮	_
	Receipt For: Primary General	Aggregate	Year-to-Date V	P/R Deduction (\$25.00 Bi-
	Other (specify)	0 0	650.00	Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Nathan W. Fincher			Date of Receipt
	Mailing Address 206 Casting Street South	heast		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR66026274
	Albany	OR	97322-7347	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		455.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		e Sales Development Manag Year-to-Date ▼	er
	Primary General	riggrogato		P/R Deduction (\$35.00 Bi-
	Other (specify)		910.00	Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Leonard J. Mackesy			Date of Receipt
-	Mailing Address 8 Hillside Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR66027274
	Kearny	NJ	07032-1633	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		325.00
	Name of Employer Occupation New York Life Insurance Cvp - Sec Company Aggregate			7
			vear-to-Date V	_
	Primary General Other (specify) ▼		650.00	P/R Deduction (\$25.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		·····	1105.00
T	OTAL This Period (last page this line number or	ıly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 256 / 395 (check only one) 11c X 11a 11b I1a 11c 12	
Any in or for o	formation copied from such Reports and Sta commercial purposes, other than using the na	tements may ame and add	/ not be sold or used by any perso dress of any political committee to	13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee.
	ME OF COMMITTEE (In Full)			
∕ N∈	w York Life Insurance Company Polit	ical Action	Committee	
	l Name (Last, First, Middle Initial) . Beverly G. Fuscaldo			Date of Receipt
Ма	Mailing Address 770 Anderson Avenue 12G			M M / D D / Y Y Y Y
Cit		State	Zip Code	Transaction ID: PR668274
<u>Cli</u>	ffside Park	NJ	07010-2182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Occupation Construction Constructina Constructina Constructina Constructina Const			195.00
Na Ne				-
	mpany ceipt For:	Employe Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) v		390.00	P/R Deduction (\$15.00 Bi- Weekly)
	I Name (Last, First, Middle Initial) Thomas J. Warga			Date of Receipt
Ма	iling Address 2500 Abbey Lane			M M / D D / Y Y Y Y
Cit	ý	State	Zip Code	Transaction ID: PR669274
<u>Se</u>	aford	NY	11783-3509	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		325.00
	me of Employer w York Life Insurance	Occupation	n eneral Auditor	
	mpany ceipt For:		Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	586.64	P/R Deduction (\$25.00 Bi- Weekly)
	I Name (Last, First, Middle Initial) Stephen Knowles			Date of Receipt
Ма	iling Address 1904 Greenhill Road			M M / D D / Y Y Y Y
Cit	y	State	Zip Code	Transaction ID: PR66976274
<u>La</u>	nsdowne	PA	19050-1012	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		104.00
Ne	Oumpany		n velopment Manager	
			Year-to-Date V	-1
	Primary General Other (specify) ▼		208.00	P/R Deduction (\$8.00 Bi-W- eekly)
SUBT	OTAL of Receipts This Page (optional)		······	624.00
	AL This Period (last page this line number or		•	-

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 257 / 395 (check only one) 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
5.	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Polit			
Α.	Full Name (Last, First, Middle Initial) Mr. Rychard F. Mysliwiec			Date of Receipt
	Mailing Address 82 Rolling Meadow Drive	e		M · M / D · D / Y · Y · Y · Y
	City	State	Zip Code	Transaction ID: PR66978274
	Holliston	MA	01746-2633	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupatio	n	
	Company	Senior P		_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
B.	Full Name (Last, First, Middle Initial) Mr. John Quarella, Jr.			Date of Receipt
	Mailing Address 134 Paugus Road	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR66979274
	Holden	MA	01520-1751	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupatio		
	Company	1	.O. Agency Standards Cons	ultan
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/P Deduction (\$10.00 Pi
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
С.	Full Name (Last, First, Middle Initial) Mr. Mark H. Rodden			Date of Receipt
	Mailing Address 2641 Freeman Manor Di	rive		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR66980274
	Jones	OK	73049-8703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		130.00
	Name of Employer New York Life Insurance	Occupatio		
	Company	-	g Partner	
	Receipt For: Primary General		e Year-to-Date ▼	P/P Doduction (\$10.00 Pi
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		······	390.00
Т	OTAL This Period (last page this line number or	וy)		-

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 258 / 395 (check only one)		
		tomonto mo	, ,	13 14 15 16 17		
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.		
\sum	NAME OF COMMITTEE (In Full)					
\backslash	New York Life Insurance Company Polit					
Ά.	Full Name (Last, First, Middle Initial) Mr. Timothy M. Babbert			Date of Receipt		
	Mailing Address 1 Crimson King Trail			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR66982274		
	Flemington	NJ	08822-1993	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		104.00		
	Name of Employer New York Life Insurance	Occupation	n			
	Company		ales Development Manager			
	Receipt For:	Aggregate	e Year-to-Date V			
	Other (specify) ▼	0 0	208.00	P/R Deduction (\$8.00 Bi-W- eekly)		
в.	Full Name (Last, First, Middle Initial) Mr. Vincent J. Palma			Date of Receipt		
	Mailing Address 13 Randall Road			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR66983274		
	Wading River	NY	11792-9518	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		104.00		
	Name of Employer New York Life Insurance	Occupation				
	Company		ales Development Manager			
	Receipt For: Primary General	Aggregate	e Year-to-Date V			
	Other (specify)	0 0	208.00	P/R Deduction (\$8.00 Bi-W- eekly)		
с.	Full Name (Last, First, Middle Initial) Mr. Robert C. Sheffield			Date of Receipt		
	Mailing Address 4016 Five Oaks Court			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR66985274		
	Charlotte	NC	28227-9272	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		104.00		
	Name of Employer New York Life Insurance	Occupation		7		
	Company		uct Consultant			
			e Year-to-Date 🔻	D/D Doduction (\$9.00 Di W		
	Other (specify) ▼	0 0	208.00	P/R Deduction (\$8.00 Bi-W- eekly)		
s	UBTOTAL of Receipts This Page (optional)		·····	312.00		
	OTAL This Period (last page this line number or			-		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 259 / 395 (check only one)			
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12			
			, ,	13 14 15 16 17			
	y information copied from such Reports and Stat for commercial purposes, other than using the na						
$\left \right\rangle$	NAME OF COMMITTEE (In Full)						
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Lyle D. Wilcox			Date of Receipt			
	Mailing Address 4 Border Lane			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR66987274			
	Sherman	CT	06784-1800	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		130.00			
	Name of Employer New York Life Insurance	Occupation	n ne Training				
	Company Receipt For:		Year-to-Date V				
	Primary General			P/R Deduction (\$10.00 Bi-			
	Other (specify)	0 0	260.00	Weekly)			
в.	Full Name (Last, First, Middle Initial) Mr. Thomas C. Simpson			Date of Receipt			
	Mailing Address 7806 Hampton Meadows	s Lane		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR66989274			
	Chesterfield	VA	23832-2006	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			130.00			
	Name of Employer New York Life Insurance	Occupation					
	Company	1	velopment Manager				
	Receipt For:	Aggregate	Year-to-Date V				
	Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)			
<u></u>	Full Name (Last, First, Middle Initial) Mr. Edward A. Davis, Jr.			Date of Receipt			
	Mailing Address 4908 Hastings Street			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR66990274			
	Metairie	LA	70006-2616	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			130.00			
	Name of Employer New York Life Insurance	Occupation		ultan			
	Company		.O. Agency Standards Cons Year-to-Date ▼				
				P/R Deduction (\$10.00 Bi-			
	Other (specify) ▼	0 0	260.00	Weekly)			
s	UBTOTAL of Receipts This Page (optional)		······	390.00			
	OTAL This Period (last page this line number or			-			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		FOR LINE NUMBER: PAGE 260 / 395 (check only one)		
IT	EMIZED RECEIPTS		or each category of the		X 11a 11b 11c 12		
		Detailed Summary Page					
	y information copied from such Reports and Sta for commercial purposes, other than using the n						
	NAME OF COMMITTEE (In Full)						
	New York Life Insurance Company Polit	tical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. John D. Garnett				Date of Receipt		
	Mailing Address 1009 Seminole Highway	/			M M / D D / Y Y Y Y		
	City	State	Zip Code		Transaction ID: PR66991274		
	Madison	WI	53711-3020		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			110.50		
	Name of Employer New York Life Insurance Company	Occupation Senior G	n. O. Agency Standards Co	nsult	an		
	Receipt For:	Aggregate	Year-to-Date V				
	Primary General Other (specify) ▼	0 0	207.50		P/R Deduction (\$8.50 Bi-W- eekly)		
В.	Full Name (Last, First, Middle Initial) Mr. Ira Goodkin				Date of Receipt		
	Mailing Address 743 S Elmwood Avenue)		M M / D D / Y Y Y Y			
	City	State	Zip Code		Transaction ID: PR66992274		
	Oak Park	IL	60304-1414		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			104.00		
	Name of Employer New York Life Insurance	Occupation	ales Development Manage	ar			
	Company Receipt For:		Year-to-Date V				
	Primary General Other (specify) ▼		208.00		P/R Deduction (\$8.00 Bi-W- eekly)		
C.	Full Name (Last, First, Middle Initial) Mr. Roy H. Morris				Date of Receipt		
	Mailing Address 5000 E Havenhill Drive				M M / D D / Y Y Y Y		
	City	State	Zip Code		Transaction ID: PR66993274		
	Sioux Falls	SD	57110-5604		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Company Occupate Partner Receipt For: Aggregate Aggregate Primary General				104.00		
			ו				
			Year-to-Date V				
					P/R Deduction (\$8.00 Bi-W-		
	Other (specify)	208.00		eekly)			
s	UBTOTAL of Receipts This Page (optional)			•	318.50		
Т	OTAL This Period (last page this line number or	nly)		•			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 261 / 395			
IT	EMIZED RECEIPTS		or each category of the	(check only one)		
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso	n for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)					
	New York Life Insurance Company Polit	Committee				
Z		Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Frank S. Harman			Date of Receipt		
	Mailing Address 3425 Ashmeade Drive			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR66994274		
	Roanoke	VA	24018-3701	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		130.00		
	Name of Employer New York Life Insurance	Occupation	n	-		
	New York Life Insurance Company		e Sales Development Manag	er		
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)		
в.	Full Name (Last, First, Middle Initial) Mr. Robert W. Reeves			Date of Receipt		
	Mailing Address 202 Owens Park Drive	M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR66995274		
	Houston	ТХ	77094-2604	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		130.00		
	Name of Employer New York Life Insurance	Occupation	n			
	Company	Associate	e Sales Development Manag	er		
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	 Primary General Other (specify) ▼ 	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)		
	Full Name (Last, First, Middle Initial) Mr. Samuel L. Bridgeman			Date of Receipt		
•••	Mailing Address 6022 Claridge Drive			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR66996274		
	Houston	TX	77096-5825	Amount of Each Receipt this Period		
	FEC ID number of contributing	_		130.00		
	federal political committee.	C				
	company					
			ales Development Manager	_		
			e Year-to-Date 🔻			
	Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)		
s	UBTOTAL of Receipts This Page (optional)		·····	390.00		
⊢	OTAL This Period (last page this line number or		•			

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	itements ma	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 262 / 395 (check only one) 11a X 11a 11b 13 14 15 16 17 16 17
	for commercial purposes, other than using the n			
$\left \right $	NAME OF COMMITTEE (In Full)		-	
	New York Life Insurance Company Polit	tical Action	Committee	
<u>,</u> А.	Full Name (Last, First, Middle Initial) Mr. Allen A. Hensley			Date of Receipt
	Mailing Address 4904 Lakeland Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR66999274
	Frisco	ТХ	75035-8237	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer New York Life Insurance	Occupatio	n	
	Company	Partner	Veer te Dete 📕	_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	P/P Doduction (\$15.00 P
	Other (specify)	0 0	345.00	P/R Deduction (\$15.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Harold A. Van Vleet			Date of Receipt
Б.	Mailing Address 9415 Layton Avenue No	ortheast		Date of Receipt
	City	State	Zip Code	Transaction ID: PR67000274
	Albuquerque	NM	87111-1331	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupatio		
	Company Receipt For:		evelopment Manager	_
	Primary General	Aggregate		P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. David A. Thompson			Date of Receipt
0.	Mailing Address 4251 S Deframe Street			
	City	State	Zip Code	Transaction ID: PR67002274
	Morrison	CO	80465-1002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupatio Employe		
	Company		e e Year-to-Date ▼	_
				P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
s	UBTOTAL of Receipts This Page (optional)			455.00
ΙT	OTAL This Period (last page this line number or	nıy)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 263 / 395 (check only one) 11a X 11a 11b I3 14 15 16 17
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
\geq	New York Life Insurance Company Politi	Committee		
Α.	Full Name (Last, First, Middle Initial) Mr. Ronald O. McCombs			Date of Receipt
	Mailing Address 1663 Baywood Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67003274
	Concord	CA	94521-1252	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer New York Life Insurance	Occupation		
	Company		velopment Manager	_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	390.00	P/R Deduction (\$15.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Michael Smith			Date of Receipt
	Mailing Address 5 Dayton Circle			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67011274
	Trumbull	CT	06611-2106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.00
	Name of Employer New York Life Insurance	Occupation		
	Company		Product Promotions	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (\$10.00 Di
	Other (specify)	0 0	312.00	P/R Deduction (\$12.00 Bi- Weekly)
с.	Full Name (Last, First, Middle Initial) Ms. Ladonna B. Carr			Date of Receipt
	Mailing Address 148 67th Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67021274
	West New York	NJ	07093-3203	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Company		n e Counselor & Ada Coordina	tor
			e Year-to-Date V	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		·····	517.00
	OTAL This Period (last page this line number on		•	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 264 / 395 (check only one)
••		Detailed Summary Page		$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\overline{\mathbf{N}}$	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Ronald J. Terry			Date of Receipt
	Mailing Address 55 Rustic Gate Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67026274
	Dix Hills	NY	11746-6138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Company Receipt For: Occu			130.00
			1	
			Year-to-Date V	
	Primary General	, iggi egale		P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Dennis V. Westgard			Date of Receipt
	Mailing Address 1819 Kent Street			
	City	State	Zip Code	Transaction ID: PR67029274
	Westbury	NY	11590-5305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer New York Life Insurance	Occupation		
	Company	Cvp - Co	mpliance • Year-to-Date ▼	_
	Receipt For: Primary General	Aggregate		P/P Doduction (\$15.00 P
	Other (specify) v		390.00	P/R Deduction (\$15.00 Bi- Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Robert G. Stauffer			Date of Receipt
5.	Mailing Address 61 Harvard Oval			
	City	State	Zip Code	Transaction ID: PR67033274
	Freehold	NJ	07728-5396	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:	-	Vice President - Training Year-to-Date ▼	
	Primary General	Ayyreyale		P/B Deduction (\$10.00 Bi-
	Other (specify)		260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			455.00
т	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 265 / 395 (check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full)			
$\left \right\rangle$	New York Life Insurance Company Polit	tical Action	n Committee	
<u>А.</u>	Full Name (Last, First, Middle Initial) Ms. Jacqueline M. Barton			Date of Receipt
	Mailing Address 36 Windemere Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67048274
	Yonkers	NY	10710-2416	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupatio	n	_
	Company		stems Accounting	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Carlomagno Elinon			Date of Receipt
	Mailing Address 812 Winchester Avenue	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR67049274
	Hillside	NJ	07205-3123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupatio		
	Company Receipt For:		tuarial Services e Year-to-Date ▼	
	Primary General	Ayyreyale		P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Paul M. Peyser			Date of Receipt
	Mailing Address 10 Kemp Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67060274
	Springfield	NJ	07081-2906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation Director	n	
	Company Receipt For:		e Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		······	390.00
	OTAL This Period (last page this line number or			

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 266 / 395 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	v not be sold or used by any perso dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
A.	Full Name (Last, First, Middle Initial) Ms. Susan A. Thrope			Date of Receipt
	Mailing Address 56 Random Farms Driv	e		M · M / D · D / Y · Y · Y · Y
	City	State	Zip Code	Transaction ID: PR67073274
	Chappaqua	NY	10514-1015	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance Company	Occupation Svp & De	n eputy General Counsel & Se	creta
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. Pettus C. Gibbons			Date of Receipt
	Mailing Address 4028 Dorris Road			
	City	State	Zip Code	Transaction ID: PR67089274
	Irving	TX	75038-4003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		Advanced Planning	_
	Primary General	Aggregate		P/R Deduction (\$10.00 Bi-
	Other (specify) v	0 0	260.00	Weekly)
с.	Full Name (Last, First, Middle Initial) Mr. Frederick B. Van Blaricom			Date of Receipt
	Mailing Address 201 E 39th Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67090274
	Savannah	GA	31401-9019	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation		7
	Company Receipt For:		velopment Manager	
	Primary General	riggrogate		P/R Deduction (\$10.00 Bi-
	Other (specify) v	0 0	260.00	Weekly)
s	UBTOTAL of Receipts This Page (optional)			390.00
т	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 267 / 395			
	EMIZED RECEIPTS		or each category of the	(check only one)			
••			Detailed Summary Page	X 11a 11b 11c 12			
•							
	ny information copied from such Reports and St for commercial purposes, other than using the						
Ν	NAME OF COMMITTEE (In Full)						
\langle	New York Life Insurance Company Pol	itical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Floyd R. Chapman			Date of Receipt			
	Mailing Address 22 Foss Court			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR67091274			
	Walnut Creek	CA	94597-6814	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			130.00			
	Name of Employer New York Life Insurance	Occupation	n	-			
	New York Life Insurance Company		Zone Agency Standards				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼	0 0	250.00	P/R Deduction (\$10.00 Bi- Weekly)			
в.	Full Name (Last, First, Middle Initial) Ms. Sonali Virendra			Date of Receipt			
	Mailing Address 219 Riverwalk Way		M · M / D · D / Y · Y · Y · Y				
	City	State	Zip Code	Transaction ID: PR67096274			
	Clifton	NJ	07014-1734	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		130.00			
	Name of Employer New York Life Insurance	Occupation					
	Company	-	ales Development Manager				
	Receipt For:	Aggregate	e Year-to-Date V				
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)			
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Arthur Keegan			Date of Receipt			
	Mailing Address 12 Crest Rd. E	M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR67097274			
	Merrick	NY	11566-1404	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		104.00			
	Name of Employer New York Life Insurance	Occupation	n	_			
	Company	Sales De	velopment Manager				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Other (specify) ▼		208.00	P/R Deduction (\$8.00 Bi-W- eekly)			
s	UBTOTAL of Receipts This Page (optional)			364.00			
Т	OTAL This Period (last page this line number of	only)	·····				

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 268 / 395 (check only one)		
11			Detailed Summary Page	X 11a 11b 11c 12		
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	/ not be sold or used by any perso dress of any political committee to	13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
\geq	New York Life Insurance Company Poli	tical Action	Committee			
A.	Full Name (Last, First, Middle Initial) Mr. Edwin Cruz			Date of Receipt		
	Mailing Address 140 7th Avenue			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR67099274		
	New York	NY	10011-1843	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		110.00		
	Name of Employer New York Life Insurance Company		ı			
				_		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (\$10.00 Pi		
	Other (specify)	0 0	240.00	P/R Deduction (\$10.00 Bi- Weekly)		
в.	Full Name (Last, First, Middle Initial) Mr. Richard Echevarria			Date of Receipt		
	Mailing Address 91 Pickwick Lane			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR67106274		
	North Babylon	NY	11703-5211	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		104.00		
	Name of Employer New York Life Insurance	Occupation				
	Company		e Sales Development Manag	ler		
	Receipt For: Primary General	Aggregate	gregate Year-to-Date ▼			
	Other (specify)		208.00	P/R Deduction (\$8.00 Bi-W- eekly)		
с.	Full Name (Last, First, Middle Initial) Mr. Michael B. Swartout			Date of Receipt		
	Mailing Address 8705 Northwest 116th T	errace		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR67110274		
	Oklahoma City	OK	73162-2211	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		130.00		
	Name of Employer New York Life Insurance	Occupatio	1	7		
	Company	Partner	<u> </u>	_		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)		
s	UBTOTAL of Receipts This Page (optional)		······	344.00		
т	OTAL This Period (last page this line number o	nly)	· · · · ·	-		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the		FOR LINE NUMBER: PAGE 269 / 395 (check only one)						
IT	EMIZED RECEIPTS	Detailed Summary Page		$\begin{array}{c c c c c c c c c c c c c c c c c c c $						
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions						
\sum	NAME OF COMMITTEE (In Full)									
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee	_						
Α.	Full Name (Last, First, Middle Initial) Mr. George E. Silos			Date of Receipt						
	Mailing Address 385 Larch Avenue			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR671274						
	Bogota	NJ	07603-1056	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			137.96						
	Name of Employer Occup New York Life Insurance Vice		n sident & Actuary							
	Company Receipt For:		Year-to-Date V							
	Primary General Other (specify) ▼	0 0	215.44	P/R Deduction (\$11.00 Bi- Weekly)						
В.	Full Name (Last, First, Middle Initial) Mr. Kenneth M. Toffolo			Date of Receipt						
	Mailing Address 1378 Graymill Drive			M M / D D / Y Y Y Y						
	City		Zip Code	Transaction ID: PR67208274						
	Scotch Plains	NJ	07076-4727	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		104.00						
	Name of Employer New York Life Insurance Company	Occupation		_						
	Receipt For:	Aggregate	Year-to-Date V							
	Other (specify)	0 0	208.00	P/R Deduction (\$8.00 Bi-W- eekly)						
<u></u>	Full Name (Last, First, Middle Initial) Mr. Mark W. Talgo			Date of Receipt						
	Mailing Address 5 Stony Hill Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR67213274						
	West Harrison	NY	10604-1504	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		130.00						
	Name of Employer New York Life Insurance	Occupation Senior M	anaging Director							
	Company		Year-to-Date V							
Primary General Other (specify) ▼			260.00	P/R Deduction (\$10.00 Bi- Weekly)						
s	UBTOTAL of Receipts This Page (optional)			371.96						
\vdash	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)									

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 270 / 395 (check only one)
	y information copied from such Reports and Stat for commercial purposes, other than using the na			
$\overline{\sum}$	NAME OF COMMITTEE (In Full)			
\rangle	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Grant D. Kinkade			Date of Receipt
	Mailing Address 1441 Arnold Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67219274
	Westminster	MD	21157-7208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company Receipt For:	Partner	e Year-to-Date V	_
	Primary General	Aggregate		P/R Deduction (\$20.00 Bi-
	Other (specify)	0 0	520.00	Weekly)
В.	Full Name (Last, First, Middle Initial) Ms. Susan E. Marcus			Date of Receipt
	Mailing Address 188-50J 71st Crescent			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67224274
	Fresh Meadows	NY	11365-3762	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation	n Business Architecture	
	Company Receipt For:		e Year-to-Date V	-
	Primary General	, iggi oguto		P/R Deduction (\$10.00 Bi-
	Other (specify) v	0 0	260.00	Weekly)
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Byron J. Villacreses			Date of Receipt
	Mailing Address 60 Timber Ridge Drive			M * M / D * D / Y * Y * Y
	City	State	Zip Code	Transaction ID: PR67230274
	Coram	NY	11727-2429	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation	n Agency Compensation	1
	Company Receipt For:		e Year-to-Date V	-1
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		······	520.00
	OTAL This Period (last page this line number or			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 271 / 395 (check only one) X X 11a 11b 11c 12
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
$\overline{\nabla}$	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit	tical Action	n Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Gregory F. Appel			Date of Receipt
	Mailing Address 113 Park Road Extension	n		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67242274
	Goldens Brg	NY	10526-1144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer New York Life Insurance	Occupatio	n	
	Company	Cvp - Sy		_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	520.00	P/R Deduction (\$20.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Dennis M. Cleary			Date of Receipt
	Mailing Address 9343 246th Street			M · M / D · D / Y · Y · Y
	City	State	Zip Code	Transaction ID: PR67243274
	Floral Park	NY	11001-3922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		130.00
	Name of Employer New York Life Insurance Company	Occupatio Cvp - Un	n Iderwriting	
	Receipt For:		e Year-to-Date ▼	-
	Primary General Other (specify) The second seco	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
<u></u>	Full Name (Last, First, Middle Initial) Ms. Theresa M. Pepe			Date of Receipt
	Mailing Address 875 Route 312			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67246274
	Brewster	NY	10509-3726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		130.00
	Name of Employer New York Life Insurance	Occupatio		7
	Company Receipt For:	Cvp - Sy	stems e Year-to-Date ▼	_
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			520.00
	OTAL This Period (last page this line number of			

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 272 / 395 (check only one) 11a X 11a 13 14 15 16 17
Any or fo	information copied from such Reports and Sta or commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\ r	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit	ical Action	Committee	
-	Full Name (Last, First, Middle Initial) Mr. Eric J. Grossman			Date of Receipt
N	Mailing Address 8310 35 Avenue Apt. 40			M M / D D / Y Y Y Y Y
(Dity	State	Zip Code	Transaction ID: PR67256274
د	Jackson Heights	NY	11372-5317	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		195.00
1	Company		ⁿ t Vice President - Architectur	-
			e Year-to-Date V	_
	Primary General Other (specify) ▼		390.00	P/R Deduction (\$15.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Joseph J. Hogan			Date of Receipt
N	Mailing Address 8448 Eagle Preserve Wa	M M / D D / Y Y Y Y		
Ċ	Dity	State	Zip Code	Transaction ID: PR67261274
5	Sarasota	FL	34241-9449	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		325.00
	Name of Employer New York Life Insurance	Occupation Actuary	n	_
	Company Receipt For:		e Year-to-Date 🔻	
	Primary General Other (specify) ▼		650.00	P/R Deduction (\$25.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Timothy H. Martin			Date of Receipt
-	Mailing Address 2974 Judylyn Drive			M M / D D / Y Y Y Y
	Dity	State	Zip Code	Transaction ID: PR67262274
-	Decatur	GA	30033-6006	Amount of Each Receipt this Period
f	EC ID number of contributing ederal political committee.	C		195.00
1	Name of Employer New York Life Insurance	Occupation Partner	n	
	Company		e Year-to-Date 🔻	-
	Primary General Other (specify) ▼	0 0	390.00	P/R Deduction (\$15.00 Bi- Weekly)
su	BTOTAL of Receipts This Page (optional)		·····	715.00
	TAL This Period (last page this line number or			-

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 273 / 395 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
Ar	y information copied from such Reports and Sta	atements may	v not be sold or used by any perso	13 14 15 16 17 on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)	name and add	aress of any political committee to	solicit contributions from such committee.
	New York Life Insurance Company Poli	tical Action	Committee	
<u>۸</u> .	Full Name (Last, First, Middle Initial) Mr. Steven J. Schoen			Date of Receipt
	Mailing Address 84 Silver Spring Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR675274
	Short Hills	NJ	07078-3116	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer Occu New York Life Insurance Age Company Age		ı	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (\$26.00 Man
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Ms. Donna J. Caruso			Date of Receipt
	Mailing Address 5253 Willow Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR678274
	Cape Coral	FL	33904-5664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	ı	
	Company		Veente Dete T	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (\$25.00 Mon
	Other (specify)		300.00	P/R Deduction (\$25.00 Mon- thly)
_	Full Name (Last, First, Middle Initial)			
C.	Mr. Paul M. Beggan Clu Chfc Mailing Address 10 Hartford Street			Date of Receipt
	City	State	Zip Code	Transaction ID: PR67906274
	Medfield	MA	02052-1412	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			456.00
	OTAL This Period (last page this line number o			

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 274 / 395
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)
	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12
or	y information copied from such Reports and Sta for commercial purposes, other than using the r	name and add	ress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Karen E. Dann			Date of Receipt
	Mailing Address 520 E 90th Street 4G			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67914274
	New York	NY	10128-7886	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance Company	Occupation		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		260.00	P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	200.00	Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Mark P. Rosa			Date of Receipt
	Mailing Address 6 Lakeview Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67917274
	West Islip	NY	11795-4123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation	า	_
	Company		Project Manager	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
<u></u>	Full Name (Last, First, Middle Initial) Mr. Ramon L. Ortiz			Date of Receipt
	Mailing Address 257 Clinton Street Apt.	18N		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR67918274
	New York	NY	10002-8088	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation	า	7
	Company	1	/ice President	
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	LUBTOTAL of Receipts This Page (optional)			390.00
Ĕ				
Т	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 275 / 395			
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)			
11			Detailed Summary Page	X 11a 11b 11c 12			
	Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add						
	NAME OF COMMITTEE (In Full)						
	New York Life Insurance Company Polit	ical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Fred D. Nicolois			Date of Receipt			
	Mailing Address 5605 31st Avenue Apt. 2J			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR67920274			
	Woodside	NY	11377-1511	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		130.00			
	Name of Employer New York Life Insurance	Occupation					
	Company		ency Standards Specialist				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/P Doduction (\$10.00 P			
	Other (specify)	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)			
в.	Full Name (Last, First, Middle Initial) Mr. Richard C. Dipippo			Date of Receipt			
	Mailing Address 16619 Harbor Town Driv						
	City	State	Zip Code	Transaction ID: PR68274			
	Silver Spring	MD	20905-4082	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.04			
	Name of Employer New York Life Insurance	Occupation	1				
	Company Receipt For:	Agent	Year-to-Date V	-			
	Primary General	Aggregate		P/R Deduction (\$83.34 Mon-			
	Other (specify)	0 0	1000.08	thly)			
C.	Full Name (Last, First, Middle Initial) Ms. Margaret DeCesare			Date of Receipt			
	Mailing Address 9-5 Foxwood Drive			M M / D D / Y Y Y Y 			
	City	State	Zip Code	Transaction ID: PR68689274			
	Pleasantville	NY	10570-1139	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		195.00			
	Name of Employer New York Life Insurance	Occupation					
	Company CVp -		ormation Systems • Year-to-Date ▼				
				P/R Deduction (\$15.00 Bi-			
	Other (specify)	0 0	390.00	Weekly)			
s	UBTOTAL of Receipts This Page (optional)		•••••	825.04			
Т	OTAL This Period (last page this line number or	ıly)					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 276 / 395 (check only one)
		or each category of the Detailed Summary Page		$\begin{array}{c c c c c c c c c c c c c c c c c c c $
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Roy Murphy			Date of Receipt
	Mailing Address 15 Stewart Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR68692274
	Garden City	NY	11530-2208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Company Occupation A.V.P			130.00
			n Financial Analysis	-
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. Chandrakant A. Engineer			Date of Receipt
	Mailing Address 65 Michael Lp			
	City	State	Zip Code	Transaction ID: PR689274
	Staten Island	NY	10301-4638	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance Company	Occupation Agent	ו	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. John T. Baier			Date of Receipt
	Mailing Address 12 Skytop Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR692274
	Denville	NJ	07834-9542	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.11
	Name of Employer New York Life Insurance	Occupation Managing		
	Company		Year-to-Date V	-
	Primary General Other (specify) ▼		1000.22	P/R Deduction (\$38.47 Bi- Weekly)
6	UBTOTAL of Receipts This Page (optional)			780.11
\vdash				-
ΙT	OTAL This Period (last page this line number or	nıy)		

			11 · · · · · · · · · · · · · · · · · ·	FOR LINE NUMBER: PAGE 277 / 395				
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)				
			Detailed Summary Page					
An	y information copied from such Reports and Sta	tomente moi	unot be sold or used by any para	13 14 15 16 17				
or	for commercial purposes, other than using the n	name and add	dress of any political committee to	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
\geq	New York Life Insurance Company Poli	tical Action	Committee					
	Full Name (Last, First, Middle Initial) Ms. Georgene Sfraga Panza			Date of Receipt				
	Mailing Address 4 Hampton Court			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR694274				
	Twp Washinton	NJ	07676-5125	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		130.00				
	Name of Employer New York Life Insurance	Occupation						
	Company Receipt For:		Year-to-Date V					
	Primary General			P/R Deduction (\$10.00 Bi-				
	Other (specify)	0 0	260.00	Weekly)				
_	Full Name (Last, First, Middle Initial) Mr. Izhak Asher			Date of Receipt				
	Mailing Address 29 Center Drive			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR69457274				
	Roslyn	NY	11576-1445	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		375.00				
	Name of Employer New York Life Insurance	Occupation	ı					
	Company Receipt For:	Agent	e Year-to-Date ▼					
	Primary General	Aggregate		P/R Deduction (\$41.67 Mon-				
	Other (specify)	0 0	375.00	thly)				
	Full Name (Last, First, Middle Initial) Mr. Lloyd Pomerantz			Date of Receipt				
	Mailing Address 57 Marion Avenue			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR69459274				
	Merrick	NY	11566-3109	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		130.00				
	Name of Employer New York Life Insurance	Occupation	ı					
	Company	Agent		_				
	Receipt For: Ag		e Year-to-Date 🔻					
	Other (specify)		220.00	P/R Deduction (\$25.00 Mon- thly)				
s	JBTOTAL of Receipts This Page (optional)		`	635.00				
	TOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 278 / 395 (check only one)					
	-	Detailed Summary Page		$\begin{array}{ c c c c c c c c c c c c c c c c c c c$					
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	v not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions					
$\overline{\mathbb{N}}$	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Harris Kagan			Date of Receipt					
	Mailing Address 1608 Pandora Avenue			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR69462274					
	Los Angeles	CA	90024-6114	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		300.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent	.						
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼						
	Other (specify)	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. Steven Bumbera			Date of Receipt					
	Mailing Address 1617 Dumont Terrace			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR69470274					
	Wall	NJ	07719-3846	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	Ĭ	e Year-to-Date ▼	—					
	Primary General		000.00	P/R Deduction (\$25.00 Mon-					
	Other (specify)	0 0	300.00	thly)					
C.	Full Name (Last, First, Middle Initial) Mr. Leonard Isaacs			Date of Receipt					
	Mailing Address 66 Boulder Ridge Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR69471274					
	Scarsdale	NY	10583-3150	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		342.00					
	Name of Employer New York Life Insurance	Occupation	ı						
	Company	Agent	<u> </u>						
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼						
	Other (specify) ▼	0 0	408.00	P/R Deduction (\$80.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)			792.00					
⊢	TOTAL This Period (last page this line number only)								

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 279 / 395 (check only one)					
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the n								
\sum	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Polit	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Frederick Elmer Doggett Jr., Jr.			Date of Receipt					
	Mailing Address 10302 Slidingrock Drive			M M / D D / Y Y Y Y					
	City State		Zip Code	Transaction ID: PR69479274					
	Mechanicsvlle	VA	23116-8723	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		150.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	1						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)					
В.	Full Name (Last, First, Middle Initial) Mr. Dominick Vassos			Date of Receipt					
	Mailing Address 1311 Joseph Lane			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR69495274					
	Addison	IL	60101-5724	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		120.00					
	Name of Employer New York Life Insurance Company	Occupation Agent	1						
	Receipt For:	Ŭ	e Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	240.00	P/R Deduction (\$20.00 Mon- thly)					
<u></u>	Full Name (Last, First, Middle Initial) Mr. Tim F. Moore			Date of Receipt					
	Mailing Address 1539 Highbluff Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR69496274					
	Diamond Bar	CA	91765-2631	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		180.00					
	Name of Employer New York Life Insurance	Occupation	ı						
	Company		<u> </u>						
			e Year-to-Date 🔻						
	Other (specify)	0 0	360.00	P/R Deduction (\$30.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)			450.00					
т	TOTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 280 / 395 (check only one)
"			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	/ not be sold or used by any persol dress of any political committee to	on for the purpose of soliciting contributions
\mathbb{N}	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
A.	Full Name (Last, First, Middle Initial) Mr. Jeffrey Fitzpatrick			Date of Receipt
	Mailing Address 103 Prospect Avenue			M • M / D • D / Y • Y • Y • Y
	City	State	Zip Code	Transaction ID: PR69529274
	Waterloo	IA	50703-4241	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company Receipt For:	Agent	e Year-to-Date ▼	
	Primary General	ryyreyale		P/R Deduction (\$50.00 Mon-
	Other (specify)	0 0	600.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. Brandon Ronald Paulseen			Date of Receipt
	Mailing Address 12417 Boxthorn			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR69544274
	Wichita	KS	67206-8259	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	Voar to Data	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/P Doduction (\$25.00 Man
	Other (specify)		300.00	P/R Deduction (\$25.00 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Mr. Joel D. Gueck			Date of Receipt
	Mailing Address 347 Monte Vista Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR69548274
	Brighton	CO	80601-4183	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance Company	Occupation Field Par		
	Oompany		e Year-to-Date 🔻	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
s	I UBTOTAL of Receipts This Page (optional)			600.00
	OTAL This Period (last page this line number of			
		, , ,		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 281 / 395 (check only one) X X 11a 11b 11c 12
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Polit			
Α.	Full Name (Last, First, Middle Initial) Mr. Peter De La Rambelje			Date of Receipt
	Mailing Address 3198 W Windwalker Pla	ice		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR69558274
	Tucson	AZ	85742-5300	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation Agent	n	
	Company Receipt For:	, v	e Year-to-Date 🔻	
	Primary General Other (specify) v	0 0	220.00	P/R Deduction (\$25.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Berge A. Borrevik			Date of Receipt
	Mailing Address N 10727 Elma Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR69559274
	<u>Spokane</u>	WA	99218-2432	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance Company	Occupation Agent	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) The second seco	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. Matthew Jay Hanson			Date of Receipt
	Mailing Address 7135 Whitehall Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR69573274
	Anchorage	AK	99502-2764	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		283.02
	Name of Employer New York Life Insurance Company	Occupation Agent	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	360.02	P/R Deduction (\$83.34 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			563.02
T	OTAL This Period (last page this line number or	nly)	· · · · · · · · · · · · · · · · · · ·	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 282 / 395
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
••		Detailed Summary Page		X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	tion Antica	Committee	
	New York Life Insurance Company Polit	lical Action	Committee	
^	Full Name (Last, First, Middle Initial)			Data af Daasiat
Α.	Ms. Diana Dabach Mailing Address 22246 Ninfa Court			Date of Receipt
	City Weedland Lille	State	Zip Code	Transaction ID: PR69582274
	Woodland Hills	CA	91364-3034	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Veer to Date	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0	300.00	thly)
	Full Name (Last, First, Middle Initial)			
В.	Ms. Leslie C. Griffin			Date of Receipt
	Mailing Address 1301 N Courthouse Roa #906	id		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR69639274
	Arlington	VA	22201-2535	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer	Occupation		
	Name of Employer New York Life Insurance Company	Vice Pres		
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify)		260.00	P/R Deduction (\$10.00 Bi- Weekly)
		0 0	0 0 0 0 0 0 0	Weekly)
C.	Full Name (Last, First, Middle Initial) Mr. Mark Meirowitz			Date of Receipt
	Mailing Address 12 E 86th Street			
	City	State	Zip Code	Transaction ID: PR69644274
	New York	NY	10028-0506	Amount of Each Receipt this Period
	FEC ID number of contributing	C		130.00
	federal political committee.			
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		eneral Counsel & Asst. Secu Year-to-Date ▼	eta
	Primary General	Aggregate		P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
				410.00
	UBTOTAL of Receipts This Page (optional)		•	
т	OTAL This Period (last page this line number or	nly)		

S	CHEDULE A (FEC Form 3X)		Lico conorato pohedulo(a)	FOR LINE NUMBER: PAGE 283 / 395					
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)					
	EIVIZED RECEIPIS		Detailed Summary Page	X 11a 11b 11c 12					
	Any information copied from such Benorts and Statem			13 14 15 16 17					
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	r not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.					
Ν	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Politi	ical Action	Committee						
́А.	Full Name (Last, First, Middle Initial) Ms. Debbie Y. Moy		Date of Receipt						
	Mailing Address 23318 39th Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR69651274					
	Douglaston	NY	11363-1519	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		143.00					
	Name of Employer New York Life Insurance	Occupation	1	1					
	New York Life Insurance Company	Cvp - Pro	oduct Manager						
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	286.00	P/R Deduction (\$11.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Eric J. Hagerstrom			Date of Receipt					
	Mailing Address C/O Nylife International			M M / D D / Y Y Y Y					
	51 Madison Avenue, Roc								
	City	State	Zip Code	Transaction ID: PR69654274					
	New York	NY	10010-1603	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		130.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company		sident - Customer Service As	ia					
	Receipt For:	Aggregate	e Year-to-Date 🔻						
	Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)					
<u>с.</u>	Full Name (Last, First, Middle Initial) Ms. Marguerite E. Morrison			Date of Receipt					
	Mailing Address 20 West 86th Street #6A			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR69660274					
	New York	NY	10024-3604	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		260.00					
	Name of Employer New York Life Insurance	Occupation							
	Company Receipt For:		g Director e Year-to-Date ▼						
	Primary General	Aggregate		P/P Doduction (\$20.00 Pi					
	Other (specify) ▼	0 0	400.00	P/R Deduction (\$20.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)			533.00					
	TOTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 284 / 395 (check only one) (Check only one)
	-		Detailed Summary Page	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and ado	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
\mathbb{N}	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
A.	Full Name (Last, First, Middle Initial) Mr. Anil Pandya			Date of Receipt
	Mailing Address 180 Old Mill Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR69663274
	Schaumburg	IL	60193-2873	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation	ı	
	Company	Agent	<u> </u>	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Victor A. Verastegui			Date of Receipt
	Mailing Address 5404 Avenal Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR69667274
	Lutz	FL	33558-2823	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer New York Life Insurance	Occupation Cvp - Ser		-
	Company Receipt For:	1 1	Year-to-Date V	
	Primary General		000.00	P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
C.	Full Name (Last, First, Middle Initial) Ms. Bik Yung Tsang			Date of Receipt
	Mailing Address 1974 Troy Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR700274
	Brooklyn	NY	11234-3020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		700.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	<u> </u>	_
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	1000.00	P/R Deduction (\$83.34 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	960.00
⊢	OTAL This Period (last page this line number o			

S	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 285 / 395 (check only one)
IT	EMIZED RECEIPTS		or each category of the	\overline{X} 11a $\overline{\Box}$ 11b $\overline{\Box}$ 11c $\overline{\Box}$ 12
			Detailed Summary Page	
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	v not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Politi	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. William F. Leisman, III, III			Date of Receipt
	Mailing Address 4 Orchard Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR70680274
	Weston	MA	02193-2219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.04
	Name of Employer New York Life Insurance	Occupation	า	
	Company	Agent		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	1000.08	P/R Deduction (\$83.34 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Anil Kumar Jain			Date of Receipt
	Mailing Address 6 Orleans Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR70683274
	Commack	NY	11725-4030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupation	1	-
	Company	Agent		_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Mr. Joseph L. Di Bella			Date of Receipt
	Mailing Address 7 Berkshire Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR70687274
	East Greenbush	NY	12061-1801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance Company	Occupation Agent	ı	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		····· •	950.04
\vdash	OTAL This Period (last page this line number on		· · · ·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 286 / 395 (check only one) [X] 11a 11b 11c 12
			Detailed Summary Faye	
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
$\overline{\mathbb{N}}$	NAME OF COMMITTEE (In Full)			
\backslash	New York Life Insurance Company Polit	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Suk-Ku Lim			Date of Receipt
	Mailing Address 3620 Stanford Circle			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR70702274
	Falls Church	VA	22041-1317	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		190.00
	Name of Employer New York Life Insurance		1	_
	Company	Agent	<u> </u>	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	280.00	P/R Deduction (\$40.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Kenneth Tooke			Date of Receipt
	Mailing Address 3033 Curry Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR70704274
	Carmel	IN	46033-9064	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent Aggregate	e Year-to-Date 🔻	
	Primary General			P/R Deduction (\$500.00 Mo-
	Other (specify)	0 0	0.00	nthly)
С.	Full Name (Last, First, Middle Initial) Mr. Sunil Shah			Date of Receipt
	Mailing Address 820 Morningside Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR70707274
	Schaumburg	IL	60173-2077	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Veer te Deta	_
	Receipt For: Agg		e Year-to-Date ▼	P/P Doduction (\$25.00 Man
	Other (specify)	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		······	840.00
	OTAL This Period (last page this line number or			

9	CHEDULE A (FEC Form 3X)	[FOR LINE NUMBER: PAGE 287/395
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any perso tress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
$ \rangle$	New York Life Insurance Company Politi	tical Action	Committee	
	Now Fort End modification Company For		Committee	
	Full Name (Last, First, Middle Initial)			
А.	Mr. John Anthony Christopher			Date of Receipt
	Mailing Address 8251 Pembridge			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR70708274
	Woodridge	IL	60517-7733	Amount of Each Receipt this Period
	FEC ID number of contributing			150.00
	federal political committee.	C		150.00
	Name of Employer	Occupation	1	-
	New York Life Insurance Company	Agent		
	Receipt For:		Year-to-Date V	
	Primary General	1	300.00	P/R Deduction (\$25.00 Mon-
	Other (specify)		300.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. P. J. Demarie, III			Date of Receipt
	Mailing Address 24 Woodvine Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR70709274
	Covington	LA	70433-4724	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.04
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Verste Dete 🖛	
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	D/D Dathatian (#20.04 Mar
	Other (specify)		1000.08	P/R Deduction (\$83.34 Mon- thly)
		0 0		
_	Full Name (Last, First, Middle Initial)			
C.	Mr. James K. Russo			Date of Receipt
	Mailing Address 128 Pembroke Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR70710274
	Lafayette	LA	70508-5614	Amount of Each Receipt this Period
	FEC ID number of contributing	C		150.00
	federal political committee.	C		
	Name of Employer New York Life Insurance	Occupation	1	-1
	New York Life Insurance Age			
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General	1	300.00	P/R Deduction (\$25.00 Mon-
	Other (specify)			thly)
s	UBTOTAL of Receipts This Page (optional)			800.04
\vdash				-
T	OTAL This Period (last page this line number of	nly)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 288 / 395				
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)				
	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
•								
An	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	ress of any political committee to	solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
$ \rangle$	New York Life Insurance Company Polit	tical Action	Committee					
	Full Name (Last, First, Middle Initial)							
Α.	Mr. Jeffrey C. Williams			Date of Receipt				
	Mailing Address 317 Sharondale			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR70711274				
	<u>El Paso</u>	TX	79912-4257	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		150.00				
	Name of Employer New York Life Insurance	Occupation	1	-				
	Company	Agent						
	Receipt For: Primary General	Aggregate	Year-to-Date V					
	Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)				
В.	Full Name (Last, First, Middle Initial) Mr. David W. Menard			Date of Receipt				
	Mailing Address 4119 Solway Lane			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR70712274				
	Houston	TX	77025-2913	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		150.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company Receipt For:	Agent	Year-to-Date V	_				
	Primary General	Ayyreyale		P/R Deduction (\$25.00 Mon-				
	Other (specify)	0 0	300.00	thly)				
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Joe Kin Foo Lau			Date of Receipt				
0.	Mailing Address 11278 Del Golfo							
	City	State	Zip Code	Transaction ID: PR70716274				
	Yuma	AZ	85367-8959	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		300.00				
	Name of Employer New York Life Insurance	Occupation	1	7				
	Company	Agent		_				
	Receipt For: Primary General	Aggregate	Year-to-Date V					
	Other (specify) ▼	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)			600.00				
Т	TOTAL This Period (last page this line number only)							
S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 289/395				
-------------------	---------------------------------------------------------------------------------------------------	-----------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------	--	--	--	--
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the		(check only one)				
11			Detailed Summary Page	X 11a 11b 11c 12				
•			and the solution of the soluti					
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may ame and add	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
$\left \right $	NAME OF COMMITTEE (In Full)							
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Michael D. Dixon			Date of Receipt				
	Mailing Address 5055 Pathfinder			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR70718274				
	Oak Park	CA	91377-4704	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		300.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	, v	Year-to-Date V	_				
	Primary General			P/R Deduction (\$50.00 Mon-				
	Other (specify)	0 0	600.00	thly)				
в.	Full Name (Last, First, Middle Initial) Mr. Don Wilson			Date of Receipt				
	Mailing Address 9622 Victor Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR70720274				
	Anchorge	AK	99515-1408	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	, v	Year-to-Date 🔻					
	Primary General		500.00	P/R Deduction (\$83.34 Mon-				
	Other (specify)	0 0	500.00	thly)				
C.	Full Name (Last, First, Middle Initial) Mr. James J. Casey			Date of Receipt				
	Mailing Address 36 Argyle Place			M · M / D · D / Y · Y · Y · Y				
	City	State	Zip Code	Transaction ID: PR70727274				
	Rockville Center	NY	11570-2839	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		173.42				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Vice Pres		_				
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General Other (specify) ▼	0 0	335.10	P/R Deduction (\$10.00 Bi- Weekly)				
•	LUBTOTAL of Receipts This Page (optional)			973.42				
Ľ	CETTE OF RECEIPTS THIS FAYE (Optional)		••••••					
Т	TOTAL This Period (last page this line number only)							

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 290 / 395 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
\geq	New York Life Insurance Company Polit	tical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Ms. Elaine A. Rogers			Date of Receipt			
	Mailing Address 150 Melrose Avenue			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR70729274			
	Massapequa	NY	11758-5519	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		195.00			
	Name of Employer New York Life Insurance	Occupation					
	Company Receipt For:		Project Manager				
	Primary General	Ayyreyate	e Year-to-Date ▼	P/R Deduction (\$15.00 Bi-			
	Other (specify)	0 0	390.00	Weekly)			
	Full Name (Last, First, Middle Initial) Mr. Lee Kitzenberg			Date of Receipt			
Б.	Mailing Address 5814 Vernon Lane						
	City	State	Zip Code	Transaction ID: PR71260274			
	Edina	MN	55436-2250	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		490.00			
	Name of Employer New York Life Insurance	Occupatio	n				
	Company Receipt For:	Agent	e Year-to-Date V	_			
	Primary General Other (specify)	Aggregate	970.00	P/R Deduction (\$85.00 Mon- thly)			
		0 0	0 0 0 0 0 0 0				
с.	Full Name (Last, First, Middle Initial) Mr. Todd Belleau			Date of Receipt			
0.	Mailing Address 8182 E 157 Court						
	City	State	Zip Code	Transaction ID: PR71261274			
	Brighton	CO	80601-7533	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00			
	Name of Employer New York Life Insurance	Occupatio	n	7			
	Company Receipt For:	Agent	e Year-to-Date 🔻	_			
	Primary General	Aggregate		P/R Deduction (\$25.00 Mon-			
	Other (specify) v	0 0	300.00	thly)			
s	UBTOTAL of Receipts This Page (optional)			835.00			
Т	TOTAL This Period (last page this line number only)						

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		FOR LINE NUMBER: PAGE 291 / 395 (check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page		X 11a 11b 11c 12
		Detailed Summary Fage		13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
A.	Full Name (Last, First, Middle Initial) Mr. Ronald F. Walker			Date of Receipt
	Mailing Address 1575 Fairway Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR71262274
	Los Altos	CA	94024-5342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			150.00
			1	
	Company Receipt For:	Agent	e Year-to-Date 🔻	_
	Primary General	riggi oguto		P/R Deduction (\$25.00 Mon-
	Other (specify)	0 0	300.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. Bob Homler			Date of Receipt
	Mailing Address 209 Orchard Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR714274
	Mahwah	NJ	07430-1445	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	U U	e Year-to-Date ▼	
	Primary General	, iggi oguio		P/R Deduction (\$26.00 Mon-
	Other (specify)	0 0	312.00	thly)
С.	Full Name (Last, First, Middle Initial) Mr. Bill Van Winkle			Date of Receipt
	Mailing Address 41 Breezy Point			M • M / D • D / Y • Y • Y • Y
	City	State	Zip Code	Transaction ID: PR717274
	Little Silver	NJ	07739-1703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		540.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		_
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1080.00	P/R Deduction (\$90.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)			846.00
F				
Т	OTAL This Period (last page this line number o	nly)		

9	CHEDIII E & (EEC Form 3Y)			FOR LINE NUMBER: PAGE 292/395				
SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the		(check only one)				
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
				13 14 15 16 17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions				
$\overline{\mathbf{n}}$	NAME OF COMMITTEE (In Full)							
$ \rangle$	New York Life Insurance Company Poli	tical Action	Committee					
Ľ								
Α.	Full Name (Last, First, Middle Initial) Mr. Stuart R. Grossman			Date of Receipt				
	Mailing Address 8133 Verbeck Drive			M M / D D / Y Y Y Y				
		Ctata	Zin Code					
	City Manlius	State NY	Zip Code 13104-9308	Transaction ID: PR71755274 Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company	Agent	<u> </u>					
	Receipt For: Primary General	Aggregate	Year-to-Date V					
	Other (specify)		300.00	P/R Deduction (\$25.00 Mon- thly)				
				4				
В.	Full Name (Last, First, Middle Initial) Ms. Barbara Dietze Clu			Date of Receipt				
	Mailing Address 13409 Marble Rock Driv	/e						
		0	7' 0 1					
	City Chantilly	State VA	Zip Code	Transaction ID: PR71758274				
		VA	20151-2482	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		150.00				
	Nome of Employer	Occupation						
	Name of Employer New York Life Insurance	Agent	I					
	Company Receipt For:	l v	Year-to-Date V	_				
	Primary General		300.00	P/R Deduction (\$25.00 Mon-				
	Other (specify) 🔻			thly)				
_	Full Name (Last, First, Middle Initial)							
U.	Mr. Michael P. Capraro Mailing Address 22251 Abington Drive			Date of Receipt				
	City	State	Zip Code	Transaction ID: PR71759274				
	Farmington Hi	MI	48335-4309	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		1000.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:		Year-to-Date V	_				
	Primary General	7.99.094.0		P/R Deduction (\$1000.00				
	Other (specify)	0 0	1000.00	Monthly)				
Γ				1300.00				
s	UBTOTAL of Receipts This Page (optional)		••••••	-				
т	TOTAL This Period (last page this line number only)							

0		[FOR LINE NUMBER: PAGE 293 / 395				
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		(check only one)				
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		X 11a 11b 11c 12				
			Detailed Summary Fage					
	y information copied from such Reports and Sta							
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.				
\mathbb{N}	NAME OF COMMITTEE (In Full)							
$\langle \rangle$	New York Life Insurance Company Polit	ical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Michael Shock			Date of Receipt				
	Mailing Address 21 Rebecca Lane			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR71761274				
	Conway	AR	72032-4961	Amount of Each Receipt this Period				
	FEC ID number of contributing			200.00				
	federal political committee.	C		300.00				
	Name of Employer New York Life Insurance	Occupatior Agent	1					
	Company Receipt For:	Ŭ	Year-to-Date V	-				
	Primary General	33 - 3		P/R Deduction (\$50.00 Mon-				
	Other (specify)	0 0	400.00	thly)				
— R	Full Name (Last, First, Middle Initial) Mr. William R. Kalander			Date of Receipt				
5.	Mailing Address 63 Westwind Drive							
	City	State	Zip Code					
	Jamestown	RI	02835-1007	Transaction ID: PR71769274				
			02033-1007	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer New York Life Insurance	Occupation	1	-				
	New York Life Insurance Company	Associate	e Sales Development Manag	er				
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General		P/R Deduction (\$9.62 Bi-W-					
	Other (specify)		250.00	eekly)				
 C.	Full Name (Last, First, Middle Initial) Mr. Limin Chu			Date of Receipt				
	Mailing Address C/O Nylife International 51 Madison			M M / D D / Y Y Y Y				
	City ST Madisoft	State	Zip Code	Transaction ID: PR71783274				
	New York	NY	10010-1603	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		130.00				
	Name of Employer New York Life Insurance	Occupation						
	Company		Head - China					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)				
s	UBTOTAL of Receipts This Page (optional)		•	680.00				
Т	TOTAL This Period (last page this line number only)							

6	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 294 / 395					
· · · ·		Use separate schedule(s) or each category of the		(check only one)					
IT	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
	y information copied from such Reports and Stat for commercial purposes, other than using the na								
Ν	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Politi	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Ms. Alisa M. Mayeda			Date of Receipt					
	Mailing Address 1101 Green Street Apt. #502			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR71784274					
	San Francisco	CA	94109-2012	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	Name of Employer New York Life Insurance	Occupation Employee							
	Company Receipt For:		year-to-Date ▼	_					
	Primary General	7 1991 09410		P/R Deduction (\$15.00 Bi-					
	Other (specify)	0 0	390.00	Weekly)					
в.	Full Name (Last, First, Middle Initial) Ms. Mary V. Trotter			Date of Receipt					
	Mailing Address 5638 S Harvard Avenue			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR71788274					
	Tulsa	OK	74135-3810	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance Company	Occupatior Partner	1						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General		010.00	P/R Deduction (\$12.00 Bi-					
	Other (specify)	0 0	312.00	Weekly)					
C.	Full Name (Last, First, Middle Initial) Mr. Dan L. Ting			Date of Receipt					
	Mailing Address C/O Nylife International 51 Madison Avenue, Roc	om 1016		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR71791274					
	New York	NY	10010-1603	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		260.00					
	Name of Employer New York Life Insurance	Occupation		7					
	Company	,	Head - Taiwan						
	Receipt For:	Aggregate	Year-to-Date V						
	Primary General Other (specify) ▼	0 0	520.00	P/R Deduction (\$20.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)			611.00					
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 295 / 395 (check only one)
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	v not be sold or used by any perso	on for the purpose of soliciting contributions
$\overline{\sum}$	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Poli			
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas T. Schwaninger			Date of Receipt
	Mailing Address 29218 Howell Point Roa	ad		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR71792274
	Trappe	MD	21673-1843	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer New York Life Insurance	Occupatio	n	
	Company		ormation Officer	
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify) ▼	0 0	630.00	P/R Deduction (\$20.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Stephen T. Carrillo			Date of Receipt
	Mailing Address 4273 Rivermark Parkwa	M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR71793274
	Santa Clara	CA	95054-4153	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		143.00
	Name of Employer New York Life Insurance Company	Occupatio Partner	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	286.00	P/R Deduction (\$11.00 Bi- Weekly)
<u></u>	Full Name (Last, First, Middle Initial) Mr. Daniel W. Shea			Date of Receipt
0.	Mailing Address 10960 Cypres Run Circl	е		
	City Coral Springs	State FL	Zip Code	Transaction ID: PR72274
			33071-6346	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		83.35
	Name of Employer New York Life Insurance	Occupatio	n	
	Company Receipt For:	Agent	e Year-to-Date V	_
	Primary General Other (specify) ▼		583.45	P/R Deduction (\$83.35 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)			486.35
	OTAL This Period (last page this line number o			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 296 / 395 (check only one)
11		Detailed Summary Page		$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	/ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\overline{\mathbf{N}}$	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. George R. Shadie			Date of Receipt
	Mailing Address 57 Teaberry Drive Sand Springs			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR724274
	Drums	PA	18222-2051	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.04
	Name of Employer C New York Life Insurance		n	
	Company	Agent		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (\$92.24 Man
	Other (specify)	0 0	1000.08	P/R Deduction (\$83.34 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. David E. Boynton			Date of Receipt
	Mailing Address 158 N Cobblestone Driv	е		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR72517274
	Orange	CA	92869-4510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	Veer to Dete	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	D/D Deduction (#05.00 Man
	Other (specify)	0.0	300.00	P/R Deduction (\$25.00 Mon- thly)
С.	Full Name (Last, First, Middle Initial) Mr. Daniel Stoll			Date of Receipt
	Mailing Address 16 Kingston Circle			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR72519274
	Lockport	NY	14094-5606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	n	
	Company	Agent	<u> </u>	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	800.04
	OTAL This Period (last page this line number of			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 297 / 395 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17				
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any person lress of any political committee to	on for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)							
\rangle	New York Life Insurance Company Polit							
Α.	Full Name (Last, First, Middle Initial) Ms. Mila M. Olea			Date of Receipt				
	Mailing Address 661 Northwest 134 Aven	ue		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR72521274				
	<u>Miami</u>	FL	33182-1670	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company Receipt For:	Agent	Year-to-Date V	_				
	Primary General	riggrogate		P/R Deduction (\$25.00 Mon-				
	Other (specify)	0 0	300.00	thly)				
в.	Full Name (Last, First, Middle Initial) Mr. Richard Feldman			Date of Receipt				
	Mailing Address 1691 Annesley Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR72524274				
	East Liverpool	OH	43920-9410	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation	1					
	Company Receipt For:	Agent	Year-to-Date V	_				
	Primary General Other (specify) \blacksquare		300.00	P/R Deduction (\$25.00 Mon- thly)				
	Full Name (Last, First, Middle Initial) Mr. Matthew S. Ferris			Date of Receipt				
0.	Mailing Address 324 E Sycamore Street							
	City	State	Zip Code	Transaction ID: PR72526274				
	Columbus	OH	43206-2242	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation	1	7				
	<u>Company</u> Agen		Year-to-Date V	-1				
	Primary General Other (specify)	, iggi egale	300.00	P/R Deduction (\$25.00 Mon- thly)				
		<u>1 0 0</u>	<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·				
s	UBTOTAL of Receipts This Page (optional)		•••••	450.00				
Т	TOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 298 / 395 (check only one)
		or each category of the Detailed Summary Page		X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
\backslash	NAME OF COMMITTEE (In Full)	tiaal Aatian	Committee	
\square	New York Life Insurance Company Poli	lical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Francis Michael Evans	Date of Receipt		
	Mailing Address 1222 W 41st Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR72528274
	La Grange	IL	60525-5802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			150.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	<u> </u>	Year-to-Date V	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
В.	Full Name (Last, First, Middle Initial) Mr. J. Anthony Fulkerson			Date of Receipt
	Mailing Address 1302 Pellow Circle Trail			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR72531274
	Herndon	VA	20170-2423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
	Full Name (Last, First, Middle Initial)			
C.	Mr. John E. Ellis			Date of Receipt
	Mailing Address 5116 N Washingtonst			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR72534274
	Gladstone	MO	64118-4356	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent Aggregate	Year-to-Date V	—
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			450.00
\vdash				
Т	OTAL This Period (last page this line number of	nly)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 299 / 395			
ITEMIZED RECEIPTS		Use separate schedule(or each category of the		(check only one)			
••		Detailed Summary Page		X 11a 11b 11c 12			
Δr	y information copied from such Reports and Sta	atomonte mai	y not be sold or used by any perso	13 14 15 16 17			
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.			
\square	NAME OF COMMITTEE (In Full)						
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. Rolly Radwick			Date of Receipt			
	Mailing Address 18212 85th Place W			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR72536274			
	Edmonds	WA	98026-5314	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			150.00			
	Name of Employer New York Life Insurance	Occupation Agent	1				
	Company Receipt For:	, v	Year-to-Date 🔻	_			
	Primary General		200.00	P/R Deduction (\$25.00 Mon-			
	Other (specify) v	0 0	300.00	thly)			
в.	Full Name (Last, First, Middle Initial) Mr. Ed Williams			Date of Receipt			
	Mailing Address 4015 S Hempstead Circ	le		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR72538274			
	San Diego	CA	92116-2013	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00			
	Name of Employer New York Life Insurance	Occupation	ı				
	Company	Agent					
	Receipt For:	Aggregate	Year-to-Date ▼	_			
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)			
	Full Name (Last, First, Middle Initial) Mr. Christopher O. Blunt			Date of Receipt			
-	Mailing Address 9 Yarmouth Road			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR72957274			
	Rowayton	CT	06853-1842	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		260.00			
	Name of Employer New York Life Insurance	Occupation	า				
	Company	-	O.O. of Life & Annuity				
	Receipt For:	Aggregate	e Year-to-Date ▼	_			
	Primary General Other (specify) ▼	0 0	440.00	P/R Deduction (\$20.00 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)		······	560.00			
				-			
1	TOTAL This Period (last page this line number only)						

6	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 300 / 395			
· · · ·		Use separate schedule(s) or each category of the		(check only one)			
IT	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
				13 14 15 16 17			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
Ν	NAME OF COMMITTEE (In Full)						
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee				
A.	Full Name (Last, First, Middle Initial) Mr. Gregory E. Deavens			Date of Receipt			
	Mailing Address 10 Henley Commons			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR72958274			
	Farmington	CT	06032-1553	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		325.00			
	Name of Employer New York Life Insurance	Occupation Svp	1	_			
	Company Receipt For:		Year-to-Date 🔻	-			
	Primary General			P/R Deduction (\$25.00 Bi-			
	Other (specify)	0 0	550.00	Weekly)			
В.	Full Name (Last, First, Middle Initial) Mr. Scott L. Lenz			Date of Receipt			
	Mailing Address 41 Bellevue Avenue			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR72959274			
	<u>Summit</u>	NJ	07901-2007	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		390.00			
	Name of Employer New York Life Insurance Company	Occupation Vice Pres	n sident & Associate Tax Coun	sel			
	Receipt For:	Aggregate	Year-to-Date 🔻	-			
	Primary General Other (specify) ▼	0 0	660.00	P/R Deduction (\$30.00 Bi- Weekly)			
<u></u>	Full Name (Last, First, Middle Initial) Mr. John M. Hayes			Date of Receipt			
	Mailing Address 7 Sun Valley Way						
	City	State	Zip Code	Transaction ID: PR72960274			
	Long Valley	NJ	07853-3038	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		260.00			
	Name of Employer New York Life Insurance Company	Occupation Vice Pres					
	Receipt For:		Year-to-Date V	1			
	Primary General Other (specify) ▼		440.00	P/R Deduction (\$20.00 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)		·····	975.00			
	OTAL This Period (last page this line number or		-				
L'	TAL THIS I CHOU (IAST PAYE THIS IN CHUITIDE OF	יעיי)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 301 / 395 (check only one)					
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $					
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions					
\sum	NAME OF COMMITTEE (In Full)								
\backslash	New York Life Insurance Company Polit	tical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Michael P. Kelly			Date of Receipt					
	Mailing Address 392 Grove Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR73446274					
	Glen Rock	NJ	07452-1900	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		130.00					
	Name of Employer New York Life Insurance	Occupation	n g Director						
	Company Receipt For:		e Year-to-Date ▼	_					
	Primary General Other (specify) ▼	1 I 1 1	210.00	P/R Deduction (\$10.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Stuart L. Ashton			Date of Receipt					
	Mailing Address 173 Washington Valley	Road		M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR73448274					
	Morristown	NJ	07960-3340	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		130.00					
	Name of Employer New York Life Insurance	Occupation Director	n						
	Company Receipt For:		Year-to-Date V	_					
	Primary General Other (specify) ▼	U U U	210.00	P/R Deduction (\$10.00 Bi- Weekly)					
<u> </u>	Full Name (Last, First, Middle Initial) Ms. Donna S. Betz			Date of Receipt					
-	Mailing Address 1407 73rd Circle Northe	ast		M M / D D / Y Y Y Y					
	City Ct. Detershure	State FL	Zip Code	Transaction ID: PR73451274					
	St. Petersburg		33702-4615	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	New York Life Insurance		n Irketing Services						
			e Year-to-Date ▼	_					
Primary General Other (specify) ▼			300.00	P/R Deduction (\$15.00 Bi- Weekly)					
s	LUBTOTAL of Receipts This Page (optional)		······	455.00					
	OTAL This Period (last page this line number or			-					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 302 / 395 (check only one) 11a X 11a 13 14 15 16 17
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\sum_{i=1}^{n}$	NAME OF COMMITTEE (In Full)		,	
\rangle	New York Life Insurance Company Politi	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas J. Toomey			Date of Receipt
	Mailing Address 4012 Ligustrum Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR73453274
	Palm Harbor	FL	34685-3630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer New York Life Insurance	Occupation		
	Company	Vice Pres		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/P Doduction (\$15.00 Pi
	Other (specify)	0 0	300.00	P/R Deduction (\$15.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Edward J. Fitzgerald			Date of Receipt
	Mailing Address 121 Stratford Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR73455274
	West Hempstead	NY	11552-1723	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		520.00
	Name of Employer New York Life Insurance	Occupation		
	Company Receipt For:		g Director year-to-Date ▼	_
	Primary General	Aggregate		P/R Deduction (\$40.00 Bi-
	Other (specify)	0 0	800.00	Weekly)
С.	Full Name (Last, First, Middle Initial) Mr. Randy K. Cox			Date of Receipt
	Mailing Address 541 Oak Grove Road			M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR73462274
	Chesapeake	VA	23320	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Company Receipt For: Occupation Managing			195.00
				7
			g Partner • Year-to-Date ▼	_
	Primary General Other (specify) ▼	Aggregate	285.00	P/R Deduction (\$15.00 Bi- Weekly)
				910.00
	UBTOTAL of Receipts This Page (optional)			
T	OTAL This Period (last page this line number on	ly)		

SCHEDULE A (FEC Form 3X)			Lloo concrete cohedula(a)	FOR LINE NUMBER: PAGE 303 / 395				
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)				
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any person lress of any political committee to	on for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)							
\rangle	New York Life Insurance Company Poli	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Scott G. Ayers			Date of Receipt				
	Mailing Address 40 Tabor Place			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR73465274				
	South Burlington	VT	05403-5609	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		156.00				
	Name of Employer New York Life Insurance Company	Occupation Managing		-				
	Receipt For:		Year-to-Date V	_				
	Primary General Other (specify) ♥	0 0	228.00	P/R Deduction (\$12.00 Bi- Weekly)				
в.	Full Name (Last, First, Middle Initial) Mr. Scott E. Stone			Date of Receipt				
	Mailing Address 3445 Stratford Road # 3203			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR73475274				
	Atlanta	GA	30326	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		325.00				
	Name of Employer New York Life Insurance	Occupation						
	Company Receipt For:		e President Year-to-Date ▼					
	Primary General	Aggregale		P/R Deduction (\$25.00 Bi-				
	Other (specify)	0 0	475.00	Weekly)				
с.	Full Name (Last, First, Middle Initial) Mr. Thomas J. Reilly			Date of Receipt				
	Mailing Address 11 Running Deer Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR73476274				
	Dartmouth	MA	02747-1351	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			499.98				
	Name of Employer New York Life Insurance	Occupation Partner	1	7				
	Company		Veer to Data 🖛					
			Year-to-Date V	P/R Deduction (\$38.46 Bi-				
	Other (specify)	0 0	730.74	Weekly)				
s	UBTOTAL of Receipts This Page (optional)			980.98				
т	OTAL This Period (last page this line number o	nly)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 304 / 395 (check only one)						
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12							
			Detailed Summary Page		$ \rightarrow $	14	\square	15		1 17	
	y information copied from such Reports and Sta for commercial purposes, other than using the n				pose	of sol		ng contri	bution	s	
\sum	NAME OF COMMITTEE (In Full)										
\rangle	New York Life Insurance Company Polit	ical Action	Committee								
Α.	Full Name (Last, First, Middle Initial) Ms. Gayl Thomas			Date o	f Rece	eipt					
	Mailing Address 3044 Ten Mile Drive							YY		Y	
	City	State	Zip Code	Transa	iction	ID:	PR7	734812	74		
	Sparks	NV	89436-7027	Amour	nt of E	ach I	Rece	eipt this	Period		
	FEC ID number of contributing federal political committee.	C							520.0	00	
	Name of Employer New York Life Insurance	Occupation	n prmation Systems								
	Company Receipt For:	· ·	Year-to-Date V	_							
	Primary General			P/R De	educti	on (\$40	00 Bi-			
	Other (specify)	0 0	760.00	Weekly	/)		φτυ	.00 Di			
в.	Full Name (Last, First, Middle Initial) Mr. Thomas S. Heller			Date o	f Rece	eipt					
	Mailing Address 230 Mahwah Road		MN	M M / D D / Y Y Y Y							
	City	State	Zip Code	Transa	Transaction ID: PR73486274						
	Mahwah	NJ	07430-1440	Amour	nt of E	ach I	Rece	eipt this	Period		
	FEC ID number of contributing federal political committee.	C			195.0					00	
	Name of Employer New York Life Insurance	Occupation	1								
	Company	Cvp - Adı	ministration								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Other (specify)		285.00	P/R De Weekly		on (\$15	5.00 Bi-			
<u></u>	Full Name (Last, First, Middle Initial) Mr. Paul J. Appel			Date o	f Rece	eipt					
	Mailing Address 110 Wagoner Lane 2019 Hemlock Farms			MW	/	D	D /	YY	Y	Y	
	City	State	Zip Code	Transa	ction	ID:	PR	734872	74	-	
	Hawley	PA	18428-9073	Amour	nt of E	ach I	Rece	eipt this	Period		
	FEC ID number of contributing federal political committee.	C							143.0	00	
	Outpany		ancial Analysis	1							
			Year-to-Date V	-1							
Primary General Other (specify) ▼			209.00	P/R De Weekly	educti /)	on (\$11	.00 Bi-			
						v			858.0	0	
	UBTOTAL of Receipts This Page (optional)			-			-	0 0 V V			
11	OTAL This Period (last page this line number or	ııy)	P								

6				FOR LINE NUMBER: PAGE 305 / 395					
SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	(check only one)					
IT	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
An or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
Ν	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Polit	ical Action	Committee						
A.	Full Name (Last, First, Middle Initial) Mr. Anthony DelGreco			Date of Receipt					
	Mailing Address 103 Bocage Circle			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR73493274					
	Lafayette	LA	70503-4354	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	Name of Employer New York Life Insurance Company	Occupation	Lan Systems						
	Receipt For:		Year-to-Date V	_					
	Primary General Other (specify) ▼		285.00	P/R Deduction (\$15.00 Bi- Weekly)					
В.	Full Name (Last, First, Middle Initial) Mr. Richard M. Walsh			Date of Receipt					
	Mailing Address 32 Hilltop Road								
	City	State	Zip Code	Transaction ID: PR73503274					
	Waccabuc	NY	10597-1003	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of Employer New York Life Insurance Company	Occupation Managing							
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	475.00	P/R Deduction (\$25.00 Bi- Weekly)					
с.	Full Name (Last, First, Middle Initial) Mr. Lindsay J. Malkiewich			Date of Receipt					
	Mailing Address 7 Bent Birch Place			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR73504274					
	Parsippany	NJ	07054-2215	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of EmployerOccupatNew York Life InsuranceVice PrCompanyReceipt For:AggregationAggregation								
			Year-to-Date 🔻						
Primary General Other (specify) ▼			475.00	P/R Deduction (\$25.00 Bi- Weekly)					
s	JBTOTAL of Receipts This Page (optional)		······	845.00					
	OTAL This Period (last page this line number or		r	-					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 306 / 395 (check only one)				
ITEMIZED RECEIPTS		or each category of the						
••			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$				
Δr	y information copied from such Reports and Sta	atements may	unot be sold or used by any perso					
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.				
\sum	NAME OF COMMITTEE (In Full)							
	New York Life Insurance Company Poli	tical Action	Committee					
<u>А.</u>	Full Name (Last, First, Middle Initial) Mr. Mark J. Draghi			Date of Receipt				
	Mailing Address 12 Nancy Terrace			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR73511274				
	Hackettstown	NJ	07840-5633	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		143.00				
	Name of Employer New York Life Insurance	Occupation						
	Company Receipt For:		e Year-to-Date V	_				
	Primary General	33 - 3		P/R Deduction (\$11.00 Bi-				
	Other (specify)	0 0	209.00	Weekly)				
В.	Full Name (Last, First, Middle Initial) Mr. John B. Langdon			Date of Receipt				
	Mailing Address 4109 Michael Neill Drive	9		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR73518274				
	Austin	TX	78730-1432	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		205.00				
	Name of Employer New York Life Insurance	Occupatio	n	_				
	Company		Zone Sales					
	Receipt For:	Aggregate	e Year-to-Date 🔻					
	Other (specify) ▼		265.00	P/R Deduction (\$25.00 Bi- Weekly)				
<u></u>	Full Name (Last, First, Middle Initial) Mr. David F. Wright			Date of Receipt				
	Mailing Address 50 Arcadia Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR73529274				
	Allendale	NJ	07401-2002	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		143.00				
	Name of Employer New York Life Insurance	Occupatio	n					
	New York Life Insurance Company Receipt For:							
			e Year-to-Date 🔻					
	Primary General Other (specify) ▼	0 0	209.00	P/R Deduction (\$11.00 Bi- Weekly)				
s	UBTOTAL of Receipts This Page (optional)			491.00				
F								
т	OTAL This Period (last page this line number of	only)						

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 307 / 395 (check only one)					
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $					
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Polit	ical Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Ms. Janett C. Greenberg			Date of Receipt					
	Mailing Address 3721 Pappys Way			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR73535274					
	Austin	TX	78730-1522	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	Name of Employer New York Life Insurance	Occupation Svp	1						
	Company Receipt For:	<u> </u>	Year-to-Date V	_					
	Primary General Other (specify) ▼	0 0	285.00	P/R Deduction (\$15.00 Bi- Weekly)					
В.	Full Name (Last, First, Middle Initial) Mr. Harold J. Beers			Date of Receipt					
	Mailing Address 1206 State Route 428								
	City	State	Zip Code	Transaction ID: PR736274					
	Oil City	PA	16301-4932	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		156.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	l v	Year-to-Date ▼	_					
	Primary General Other (specify) ▼		312.00	P/R Deduction (\$26.00 Mon- thly)					
<u> </u>	Full Name (Last, First, Middle Initial) Ms. Cynthia Y. Valko			Date of Receipt					
0.	Mailing Address 8 Trotter Way								
	City	State	Zip Code	Transaction ID: PR741274					
	Collegeville	PA	19426-2856	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of Employer Oo New York Life Insurance C		n erating Officer						
Company			e Year-to-Date ▼	_					
Primary General Other (specify) ▼			650.00	P/R Deduction (\$25.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)			676.00					
	OTAL This Period (last page this line number or			-					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 308 / 395 (check only one)					
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page		11b	11c	12		_	
^	winformation conied from such Deports and Sta	tomonto mo	anot be cold or used by any perce	13	14	15	16 ributio		17	
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contrib	outions from	n such con	nmittee	1S Ə.		
\sum	NAME OF COMMITTEE (In Full)									
\geq	New York Life Insurance Company Polit	ical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Mr. John F. Horwitz			Date of	Receipt					
	Mailing Address 168 Upland Road			MM	/ D	D / Y	YY	Y		
	City	State	Zip Code	Transad	ction ID:	PR74158	274			
	Sharon	MA	02067-1749	Amoun	t of Each F	Receipt this	s Perio	d		
	FEC ID number of contributing federal political committee.	C					325	.00		
	Name of Employer New York Life Insurance	Occupation	ales Development Manager							
	Company Receipt For:		Year-to-Date V	-						
	Primary General Other (specify) ▼		425.00	P/R Dec Weekly	duction (\$25.00 B	i-			
<u> </u>	Full Name (Last, First, Middle Initial) Ms. Mildred R. Nece			Date of	Receipt					
	Mailing Address 121 Pacific Street Apt. A-4E			MM	· ·	D / Y	YY	Y		
	City	State	Zip Code	Transad	Transaction ID: PR74161274					
	Brooklyn	NY	11201-5555	Amoun	t of Each I	Receipt this	s Perio	d		
	FEC ID number of contributing federal political committee.	C					156	.00		
	Name of Employer New York Life Insurance Company	Occupation Managing	n g Director							
	Receipt For:		Year-to-Date V							
	Primary General Other (specify) ▼	0 0	204.00	P/R Dec Weekly	duction ()	\$12.00 B	i-			
 C.	Full Name (Last, First, Middle Initial) Ms. Jamilyn M. Durbin-Bailey			Date of	Receipt					
	Mailing Address 4722 Portobello Circle			MM	/ D	D / Y	YY	Y		
	City	State	Zip Code			PR74169				
	Valrico	FL	33594-7370	Amoun	t of Each I	Receipt this	s Perio	d		
	FEC ID number of contributing federal political committee.	C					195	.00		
	Company		Service	1						
			Year-to-Date V	-1						
Primary General Other (specify) ▼			255.00	P/R Dec Weekly	duction (\$15.00 B	i-			
s	UBTOTAL of Receipts This Page (optional)						676.	00		
	OTAL This Period (last page this line number or									
L''		"y)	••••••							

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 309 / 395 (check only one)			
ITEMIZED RECEIPTS			or each category of the Detailed Summary Page	X 11a 11b 11c 12			
			Detailed Summary Fage	13 14 15 16 17			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.			
Ν	NAME OF COMMITTEE (In Full)						
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	_			
A.	Full Name (Last, First, Middle Initial) Mr. Peter J. McAvinn			Date of Receipt			
	Mailing Address 49 Fiske Road			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR74274			
	Wellesley	MA	02481-3423	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		455.00			
	Name of Employer New York Life Insurance Company	Occupation Managing					
	Receipt For:	· ·	Year-to-Date ▼	_			
	Primary General Other (specify) ▼	U U U	934.00	P/R Deduction (\$35.00 Bi- Weekly)			
в.	Full Name (Last, First, Middle Initial) Mr. Mark F. Nestleroth			Date of Receipt			
	Mailing Address 1741 Airy Hill Road			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR743274			
	Manheim	PA	17545-8531	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		208.02			
	Name of Employer New York Life Insurance Company	Occupation Agent	1				
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	416.04	P/R Deduction (\$34.67 Mon- thly)			
<u>с.</u>	Full Name (Last, First, Middle Initial) Ms. Beverly J. Moore			Date of Receipt			
	Mailing Address 37 Darren Drive			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR74514274			
	Basking Ridge	NJ	07920-4107	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		195.00			
	Name of Employer New York Life Insurance	Occupation					
	Company	· ·	g Director	_			
Receipt For: Primary General		Aggregate	Year-to-Date V				
	Other (specify) ▼	0 0	240.00	P/R Deduction (\$15.00 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)			858.02			
т	OTAL This Period (last page this line number or	nly)	· · · ·				

SCHEDULE A (FEC Form 3X)		[FOR LINE NUMBER: PAGE 310 / 395					
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)					
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
[13 14 15 16 17					
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	r not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.					
\mathbb{N}	NAME OF COMMITTEE (In Full)								
	New York Life Insurance Company Politi	cal Action	Committee						
Α.	Full Name (Last, First, Middle Initial) Mr. Sam Mancino			Date of Receipt					
	Mailing Address 106 Four Winds Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR74516274					
	Middletown	NJ	07748-3143	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Managing	g Director						
	Receipt For:	Aggregate	Year-to-Date V						
	Primary General Other (specify) ▼	0 0	240.00	P/R Deduction (\$15.00 Bi- Weekly)					
в.	Full Name (Last, First, Middle Initial) Mr. Charles M. Carmouche			Date of Receipt					
	Mailing Address 37354 Ski Side Avenue			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR74523274					
	Prairieville	LA	70769-4487	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		325.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company	Agent							
	Receipt For: Primary General	Aggregate	Year-to-Date V						
	Other (specify) ▼	0 0	400.00	P/R Deduction (\$25.00 Bi- Weekly)					
с.	Full Name (Last, First, Middle Initial) Ms. Sandra L. Bograd			Date of Receipt					
	Mailing Address 33-3502 Hudson Street			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR74527274					
	Jersey City	NJ	07302-6543	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		195.00					
	Name of Employer	Occupation		7					
	Company Receipt For:		ief Compliance Officer	_					
			Year-to-Date V						
Primary General Other (specify) ▼			225.00	P/R Deduction (\$15.00 Bi- Weekly)					
s	UBTOTAL of Receipts This Page (optional)		·····	715.00					
Т	OTAL This Period (last page this line number on	ly)		-					

6				FOR LINE NUMBER: PAGE 311/395					
SCHEDULE A (FEC Form 3X)			Use separate schedule(s) or each category of the	(check only one)					
IT	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12					
				13 14 15 16 17					
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.					
Ν	NAME OF COMMITTEE (In Full)								
\mathbb{Z}	New York Life Insurance Company Polit	tical Action	Committee	_					
Α.	Full Name (Last, First, Middle Initial) Mr. Larry K. Oxenberg			Date of Receipt					
	Mailing Address 135 Andrea Road			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR745274					
	Cheltenham	PA	19012-1311	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		156.00					
	Name of Employer New York Life Insurance	Occupation	1	7					
	Company Receipt For:	Agent	Year-to-Date V	_					
	Primary General	Aggregate		B/B Doduction (\$26.00 Mon					
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)					
в.	Full Name (Last, First, Middle Initial) Mr. James J. Smith			Date of Receipt					
	Mailing Address 22 Palmer Terrace			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR74530274					
	Riverside	CT	06878-2103	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		260.00					
	Name of Employer New York Life Insurance	Occupation Director	1	-					
	Company Receipt For:		Year-to-Date 🔻						
	Primary General Other (specify) ▼	0 0	280.00	P/R Deduction (\$20.00 Bi- Weekly)					
<u></u>	Full Name (Last, First, Middle Initial) Mr. William T. Feakes			Date of Receipt					
	Mailing Address 9445 Nicklaus Lane			M M / D D / Y Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR74542274					
	Crystal Lake		60014-3340	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		260.00					
	Company		n nuity Product Consultant	7					
			Year-to-Date V	-1					
Primary General Other (specify) ▼			280.00	P/R Deduction (\$20.00 Bi- Weekly)					
				676.00					
	UBTOTAL of Receipts This Page (optional)		Þ						
Т	OTAL This Period (last page this line number or	nly)							

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 312 / 395 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Stat	ements may	v not be sold or used by any perso	on for the purpose of soliciting contributions
$\overline{\nabla}$	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Politi	cal Action	Committee	
<u>́</u> А.	Full Name (Last, First, Middle Initial) Mr. Brian A. Murdock			Date of Receipt
	Mailing Address 96 Husted Lane			M · M / D · D / Y · Y · Y · Y
	City	State	Zip Code	Transaction ID: PR74552274
	Greenwich	CT	06830-3935	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		440.00
	Name of Employer New York Life Insurance	Occupation	า	
	Company		t & Chief Executive Officer	
	Receipt For: Primary General	Aggregate	e Year-to-Date V	
	Other (specify)		440.00	P/R Deduction (\$40.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Mr. Bruce Cumby			Date of Receipt
	Mailing Address 816 Ellis Avenue			M · M / D · D / Y · Y · Y · Y
	City	State	Zip Code	Transaction ID: PR747274
	Newtown Sq	PA	19073-3906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.02
	Name of Employer New York Life Insurance	Occupation	ı	
	Company	Agent		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (#41.07 Man
	Other (specify)	0 0	500.04	P/R Deduction (\$41.67 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Ms. Barbara N. Filippelli			Date of Receipt
	Mailing Address 5170 Dove Point Lane			M · M / D · D / Y · Y · Y · Y
	City	State	Zip Code	Transaction ID: PR749274
	Salisbury	MD	21801-1273	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of EmployerOccupationNew York Life InsuranceAgentCompanyAggregationReceipt For:Aggregation		1	
			Year-to-Date 🔻	_
	Primary General Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		·····	846.02
T	OTAL This Period (last page this line number on	ly)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 313/395						
			or each category of the	(check only one)						
••			Detailed Summary Page							
A	winformation canied from such Departs and Ctat	omonto moi	, not be cold or used by only norge	13 14 15 16 17						
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.						
Ν	NAME OF COMMITTEE (In Full)									
	New York Life Insurance Company Politi									
Α.	Full Name (Last, First, Middle Initial) Mr. Randy R. Hartranft	Date of Receipt								
	Mailing Address 6336 Hilltop Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR750274						
	Orefield	PA	18069-8911	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		120.00						
	Name of Employer New York Life Insurance	Occupation	n							
	Company	Agent								
	Receipt For:	Aggregate	e Year-to-Date ▼							
	Primary General Other (specify) ▼	0 0	240.00	P/R Deduction (\$20.00 Mon- thly)						
в.	Full Name (Last, First, Middle Initial) Mr. Robert L. Smith			Date of Receipt						
	Mailing Address 99 Cascade Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR752274						
	Stamford	CT	06903-4226	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		500.11						
	Name of Employer New York Life Insurance	Occupation	n							
	Company	Svp	<u> </u>	_						
	Receipt For: Primary General	Aggregate	e Year-to-Date V							
	Other (specify) ▼	0 0	1000.22	P/R Deduction (\$38.47 Bi- Weekly)						
С.	Full Name (Last, First, Middle Initial) Mr. Samuel G. Zuch			Date of Receipt						
	Mailing Address 1240 Airport Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR758274						
	Coatesville	PA	19320-1876	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		156.00						
	Name of Employer New York Life Insurance	Occupation	n	7						
	Company	Agent								
	Receipt For:	Aggregate	e Year-to-Date ▼							
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)						
s	UBTOTAL of Receipts This Page (optional)		·····	776.11						
\vdash	FOTAL This Period (last page this line number only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 314/395 (check only one)
			Detailed Summary Page	X 11a 11b 11c 12
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and ado	y not be sold or used by any perso dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\mathbb{N}}$	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Politi	cal Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Richard J. Longenhagen, Sr.			Date of Receipt
	Mailing Address 1201 7th Street			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR759274
	Catasauqua	PA	18032-2105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Veer to Data 🖛	_
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/P Deduction (\$26.00 Man
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Ms. Tema L. Steele			Date of Receipt
	Mailing Address 104 Van Buren Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR764274
	Voorhees	NJ	08043-2354	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		490.02
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Year-to-Date V	_
	Primary General	Aggregate		P/R Deduction (\$83.34 Mon-
	Other (specify)	0 0	970.02	thly)
C.	Full Name (Last, First, Middle Initial) Ms. Carolyn M. Buscarino			Date of Receipt
	Mailing Address 2 Shamrock Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR774274
	Millington	NJ	07946-1224	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		101.15
	Name of Employer New York Life Insurance Company	Occupation Executive		7
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify) ▼	0 0	364.14	P/R Deduction (\$20.23 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			747.17
Т	OTAL This Period (last page this line number on	ly)	·····	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)		FOR LINE NUMBER: PAGE 315 / 395 (check only one)					
			or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the n								
\sum	NAME OF COMMITTEE (In Full)		-						
\bigvee	New York Life Insurance Company Polit	tical Action	Committee						
Á.	Full Name (Last, First, Middle Initial) Mr. Michael T. Piotrowicz			Date of Receipt					
	Mailing Address 504 Anthony Drive			M * M / D * D / Y * Y * Y					
	City	State	Zip Code	Transaction ID: PR777274					
	Plymouth Mtng	PA	19462-1040	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			540.00					
	Name of Employer New York Life Insurance	Occupation Agent	1						
	Company Receipt For:	<u> </u>	Year-to-Date V	-					
	Primary General Other (specify) ▼		1080.00	P/R Deduction (\$90.00 Mon- thly)					
		0 0		4					
В.	Full Name (Last, First, Middle Initial) Mr. Edward W. Colello			Date of Receipt					
	Mailing Address 42 Scenic Ridge Drive			M M / D D / Y Y Y Y					
	City		Zip Code	Transaction ID: PR78274					
	Brewster	NY	10509-4303	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		169.00					
	Name of Employer New York Life Insurance	Occupation							
	Company Receipt For:	Managing Aggregate	Year-to-Date V	-					
	Primary General			P/R Deduction (\$13.00 Bi-					
	Other (specify)	0 0	338.00	Weekly)					
C.	Full Name (Last, First, Middle Initial) Mr. Amato Berardi			Date of Receipt					
	Mailing Address 52 Pineview Drive			M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR785274					
	Hntingdon Valley	PA	19006-6604	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		300.00					
	Name of Employer New York Life Insurance	Occupation	1						
	Company Receipt For:	Agent	Year-to-Date V	-					
	Primary General Other (specify) ▼		600.00	P/R Deduction (\$50.00 Mon- thly)					
s	UBTOTAL of Receipts This Page (optional)		••••••	1009.00					
т	TOTAL This Period (last page this line number only)								

SCHEDULE A (FEC Form 3X)			Lloo constato achadula(a)	FOR LINE NUMBER: PAGE 316/395						
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)						
••			Detailed Summary Page							
Δr	ny information copied from such Reports and Stat	tomonts may	y not be sold or used by any perso	13 14 15 16 17 In for the purpose of soliciting contributions						
or	for commercial purposes, other than using the na	ame and add	lress of any political committee to	solicit contributions from such committee.						
Ν	NAME OF COMMITTEE (In Full)									
\mathbb{Z}	New York Life Insurance Company Polit									
Α.	Full Name (Last, First, Middle Initial) Mr. Stephen Purich			Date of Receipt						
	Mailing Address 116 Rockwood Lane			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR789274						
	Johnstown	PA	15905-5404	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		312.00						
	Name of Employer New York Life Insurance	Occupation Agent	1							
	Company Receipt For:	<u> </u>	Year-to-Date 🔻	-						
	Primary General	33 - 3		P/R Deduction (\$52.00 Mon-						
	Other (specify)	0 0	624.00	thly)						
в.	Full Name (Last, First, Middle Initial) Mr. Jeffrey A. Morrison			Date of Receipt						
	Mailing Address 1451 Radbill Circle			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR796274						
	Berwyn	PA	19312-2502	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		500.04						
	Name of Employer New York Life Insurance	Occupation Agent	1	7						
	Company Receipt For:	U U	Year-to-Date V	-						
	Primary General			P/R Deduction (\$83.34 Mon-						
	Other (specify)	0 0	1000.08	thly)						
С.	Full Name (Last, First, Middle Initial) Mr. Joseph A. Auteri			Date of Receipt						
	Mailing Address 2515 Garrett Road			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR797274						
	Drexel Hill	PA	19026-1010	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		916.08						
	Name of Employer New York Life Insurance	Occupation	1	1						
	Company Receipt For:	Agent	Year-to-Date V	-						
	Primary General Aggregate			P/R Deduction (\$152.68 Mo-						
	Other (specify)	0 0	1832.16	nthly)						
s	UBTOTAL of Receipts This Page (optional)		·····	1728.12						
\vdash			· · · ·							
11	OTAL This Period (last page this line number or	"y)								

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the		FOR LINE NUMBER: PAGE 317 / 395 (check only one)
11	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12
٨٣	y information copied from such Reports and Sta	temente mov	unot be cold or used by any pere	13 14 15 16 17
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	o solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\angle	New York Life Insurance Company Polit	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. John Rocco Clu Msfs			Date of Receipt
	Mailing Address 16 Midland Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR80274
	Lynnfield	MA	01940-1265	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			499.98
	Name of Employer New York Life Insurance Company	Occupatior Agent	1	
	Receipt For:	Aggregate	Year-to-Date V	
	Other (specify)	0 0	999.96	P/R Deduction (\$83.33 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Charles R. Eckardt			Date of Receipt
	Mailing Address 620 Meetinghouse Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR809274
	Rydal	PA	19046-2935	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.04
	Name of Employer New York Life Insurance Company	Occupatior Agent	1	
	Receipt For:	l v	Year-to-Date V	
	Primary General Other (specify) ▼	0 0	1000.08	P/R Deduction (\$83.34 Mon- thly)
<u></u> с.	Full Name (Last, First, Middle Initial) Mr. Terrence L. Wolf			Date of Receipt
	Mailing Address 119 Great Circle Road			M • M / D • D / Y • Y • Y • Y
	City	State	Zip Code	Transaction ID: PR817274
	Landenberg	PA	19350-9110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Voor to Doto	_
	Receipt For: Ag		Year-to-Date ▼	P/P Doduction (\$40.00 Mon
	Other (specify)	0 0	480.00	P/R Deduction (\$40.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		······	1240.02
т	OTAL This Period (last page this line number or	ıly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 318/395		
ΙТ	EMIZED RECEIPTS		or each category of the	(check only one)		
••		Detailed Summary Page		$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$		
Δn	y information copied from such Reports and Sta	atements may	unot be sold or used by any pers			
or	for commercial purposes, other than using the n	name and add	dress of any political committee to	o solicit contributions from such committee.		
Ν	NAME OF COMMITTEE (In Full)					
\angle	New York Life Insurance Company Poli	tical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Mr. Gilbert A. Ridgely			Date of Receipt		
	Mailing Address 314 Mannering Drive			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR819274		
	Dover	DE	19901-5407	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		450.00		
	Name of Employer New York Life Insurance	Occupation Agent	n	_		
	Company Receipt For:		e Year-to-Date V			
	Primary General			P/R Deduction (\$75.00 Mon-		
	Other (specify)	0 0	900.00	thly)		
В.	Full Name (Last, First, Middle Initial) Mr. Mark D. Caldon			Date of Receipt		
	Mailing Address Route 1 Box 66E			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR823274		
	Liverpool	WV	25252-9712	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		120.00		
	Name of Employer New York Life Insurance Company	Occupation Agent	n			
	Receipt For:	I V	e Year-to-Date 🔻			
	Primary General Other (specify) ▼	U U U	240.00	P/R Deduction (\$20.00 Mon- thly)		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Mariano C. Fontanilla			Date of Receipt		
	Mailing Address 86-15 Elmhurst Avenue Apt. 6L			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR829274		
	Elmhurst	NY	11372-2596	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		156.00		
	Name of Employer New York Life Insurance	Occupation	n			
	Company	Agent				
	Receipt For:	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)		
s	L UBTOTAL of Receipts This Page (optional)			726.00		
	OTAL This Period (last page this line number of		•			

S	CHEDULE A (FEC Form 3X)		Line concrete cohodulo/c)	FOR LINE NUMBER: PAGE 319/395
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	Iress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Polit	ical Action	Committee	
\backslash	New Tork Life insurance Company Fond		Commuee	
Α.	Full Name (Last, First, Middle Initial) Ms. Gail L. Hoffman			Date of Receipt
	Mailing Address 6419 Clearview Street			
	01			
	City Philadelphia	State PA	Zip Code 19119-2041	Transaction ID: PR836274
			19119-2041	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Veerste Dete	
	Receipt For: Primary General	Aggregate	Year-to-Date V	D/D Deduction (#00.00 Man
	Other (specify) ▼	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
	Full Name (Last, First, Middle Initial)			
в.	Mr. Ronald Kradel Mailing Address 200 Fairmont Road			Date of Receipt
	City	State	Zip Code	Transaction ID: PR842274
	Chicora	PA	16025-3026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	_
	Company	Agent		
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify)		300.00	P/R Deduction (\$25.00 Mon- thly)
	Full Name (Last, First, Middle Initial)			Data of Bassint
0.	Mr. Robert P. Ducato Mailing Address 10 Franklin Street			Date of Receipt
	City Westfield	State NY	Zip Code	Transaction ID: PR843274
	Westfield		14787-1009	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Veer te Dete	_
	Receipt For: Aggre		Year-to-Date V	P/R Deduction (\$25.00 Mon
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		·····	456.00
\vdash				
т	OTAL This Period (last page this line number or	nly)	····· •	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 320 / 395 (check only one)
-			Detailed Summary Page	13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\left \right $	NAME OF COMMITTEE (In Full)		-	
\angle	New York Life Insurance Company Politi	ical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Ms. Rosemary E. Harrington			Date of Receipt
	Mailing Address 121 Park Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR844274
	Morrisville	PA	19067-6276	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.12
	Name of Employer New York Life Insurance	Occupation		-
	Company		sset Manager	
	Receipt For: Primary General	Aggregate	Year-to-Date V	
	Other (specify)	0 0	240.24	P/R Deduction (\$9.24 Bi-W- eekly)
в.	Full Name (Last, First, Middle Initial) Mr. Al Howell			Date of Receipt
	Mailing Address PO Box G			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR847274
	Bath	PA	18014-0169	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Year-to-Date V	_
	Primary General	Aggregate		P/R Deduction (\$20.00 Mon-
	Other (specify)	8 8	240.00	thly)
C.	Full Name (Last, First, Middle Initial) Ms. Cynthia J. Guldy			Date of Receipt
	Mailing Address 2026 Yonkee Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR84907274
	Windsor	CO	80550-4685	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.02
	Name of Employer New York Life Insurance Company	Occupation Agent	1	
	Receipt For:	, v	Year-to-Date V	-
	Primary General Other (specify) ▼	0 0	250.02	P/R Deduction (\$83.34 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			490.14
Т	OTAL This Period (last page this line number on	ıly)	·····	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 321 / 395 (check only one)
IT	EMIZED RECEIPTS	or each category of the Detailed Summary Page		X 11a 11b 11c 12
			, ,	13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full)			
	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. David A. Herlicka			Date of Receipt
	Mailing Address 2 Chablis Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR84923274
	Bedford	NH	03110-5217	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		240.00
	Name of Employer New York Life Insurance	Occupation Agent	1	_
	Company Receipt For:	<u> </u>	Year-to-Date ▼	
	Primary General Other (specify) v	0 0	240.00	P/R Deduction (\$80.00 Mon- thly)
В.	Full Name (Last, First, Middle Initial) Mr. Abullah K. Kanji			Date of Receipt
2.	Mailing Address 9821 N Keystone Avenu	IE		
	City		Zip Code	Transaction ID: PR85320274
	Skokie	IL	60076-1138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer New York Life Insurance	Occupation Agent	1	
	Company Receipt For:	, v	e Year-to-Date ▼	
	Primary General		250.00	P/R Deduction (\$125.00 Mo-
	Other (specify) ▼	0 0		nthly)
C.	Full Name (Last, First, Middle Initial) Mr. Romeo Lazzarone			Date of Receipt
	Mailing Address 2080 Brittany Meadows	Drive		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR85340274
	Reno	NV	89521-5271	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	e Year-to-Date ▼	
	Primary General Aggrega			P/R Deduction (\$41.67 Mon-
	Other (specify)	0 0	300.00	thly)
s	UBTOTAL of Receipts This Page (optional)			790.00
т	OTAL This Period (last page this line number o	nly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s)	FOR LINE NUMBER: PAGE 322 / 395 (check only one)						
			or each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $						
	y information copied from such Reports and Sta for commercial purposes, other than using the n			n for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
	New York Life Insurance Company Polit	ical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Mr. Joel M. Steinberg			Date of Receipt						
	Mailing Address 44 Spruce Street			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR855274						
	Princeton Junction	NJ	08550-2019	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			390.00						
	Name of Employer New York Life Insurance Company	Occupation Svp - Fm	n d & L&a Chief Financial Offi							
	Receipt For:	Aggregate	Year-to-Date V							
	Other (specify) ▼	0 0	720.00	P/R Deduction (\$30.00 Bi- Weekly)						
В.	Full Name (Last, First, Middle Initial) Mr. Andrew Frazier			Date of Receipt						
	Mailing Address 373 Orange Road			M M / D D / Y Y Y Y						
	City		Zip Code	Transaction ID: PR856274						
	Montclair	NJ	07042-4326	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		195.00						
	Name of Employer New York Life Insurance Company	Occupation Employee		-						
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0	390.00	P/R Deduction (\$15.00 Bi- Weekly)						
<u></u>	Full Name (Last, First, Middle Initial) Ms. Earlene M. Neidert			Date of Receipt						
	Mailing Address PO Box G			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR860274						
	Bath	PA	18014-0169	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		120.00						
	Name of Employer New York Life Insurance	Occupation	l							
	Company Receipt For:	Agent	Year-to-Date V	-1						
	Primary General Other (specify)	Aggregate	240.00	P/R Deduction (\$20.00 Mon- thly)						
s	UBTOTAL of Receipts This Page (optional)			705.00						
т	TOTAL This Period (last page this line number only)									

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 323 / 395 (check only one)						
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12						
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions						
$\overline{\}$	NAME OF COMMITTEE (In Full)									
\rangle	New York Life Insurance Company Polit	tical Action	Committee							
Á.	Full Name (Last, First, Middle Initial) Mr. David Walsh			Date of Receipt						
	Mailing Address 150 Vista Grande			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR86274						
	Greenbrae	CA	94904-1135	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.			1000.02						
	Name of Employer New York Life Insurance Company	Occupation Agent	1							
	Receipt For:	Aggregate	Year-to-Date V							
	Primary General Other (specify) ▼	0 0	2000.04	P/R Deduction (\$166.67 Mo- nthly)						
В.	Full Name (Last, First, Middle Initial) Mr. Thomas F. English			Date of Receipt						
	Mailing Address 27 Hedge Brook Lane			M M / D D / Y Y Y Y						
	City	State	Zip Code	Transaction ID: PR863274						
	Stamford	CT	06903-2029	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		375.05						
	Name of Employer New York Life Insurance	Occupation								
	Company		eneral Counsel							
	Receipt For: Primary General	Aggregale	Year-to-Date V	P/P Doduction (\$29.95 Pi						
	Other (specify)	0 0	750.10	P/R Deduction (\$28.85 Bi- Weekly)						
с.	Full Name (Last, First, Middle Initial) Mr. Scott F. Della Penna			Date of Receipt						
	Mailing Address 9541 Purcell Drive			M · M / D · D / Y · Y · Y · Y						
	City	State	Zip Code	Transaction ID: PR867274						
	Potomac	MD	20854-4500	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		130.00						
	Name of Employer New York Life Insurance	Occupation		7						
	Company		e Year-to-Date V							
				P/R Deduction (\$10.00 Bi-						
	Other (specify)	0 0	260.00	Weekly)						
s	UBTOTAL of Receipts This Page (optional)			1505.07						
т	TOTAL This Period (last page this line number only)									

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 324 / 395 (check only one)				
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12				
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
\sum	NAME OF COMMITTEE (In Full)							
\backslash	New York Life Insurance Company Poli	tical Action	Committee					
Α.	Full Name (Last, First, Middle Initial) Mr. Kenneth J. Hittel			Date of Receipt				
	Mailing Address 250 W 90th Street Apt. 10H			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR872274				
	New York	NY	10024-1142	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		260.00				
	Name of Employer New York Life Insurance	Occupation						
	Company Receipt For:		e Year-to-Date V	_				
	Primary General		520.00	P/R Deduction (\$20.00 Bi-				
	Other (specify)	0 0	520.00	Weekly)				
в.	Full Name (Last, First, Middle Initial) Mr. Dave Nash			Date of Receipt				
	Mailing Address 3790 N Zurich			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR874274				
	Flagstaff	AZ	86004-2251	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		150.00				
	Name of Employer New York Life Insurance	Occupation Agent	n					
	Company Receipt For:	I V	e Year-to-Date 🔻					
	Primary General		520.00	P/R Deduction (\$25.00 Mon-				
	Other (specify) v	0.0	520.00	thly)				
c.	Full Name (Last, First, Middle Initial) Mr. B. Christopher Stokes			Date of Receipt				
	Mailing Address 3657 Patuxent River Ro	ad		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR883274				
	Davidsonville	MD	21035-2422	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.04				
	Name of Employer New York Life Insurance	Occupatio	n					
	Company	Agent	Voor to Doto	_				
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/R Deduction (\$92.24 Man				
	Other (specify)	0 0	1000.08	P/R Deduction (\$83.34 Mon- thly)				
s	UBTOTAL of Receipts This Page (optional)		······	910.04				
ד∟	OTAL This Period (last page this line number of	only)						
9	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 325 / 395				
-----	---------------------------------------------------------------------------------------------------	------------------------------	-------------------------------------------------------------------------	----------------------------------------------------------------------------------------------	--	--	--	--
			Use separate schedule(s) or each category of the	(check only one)				
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
			, ,	13 14 15 16 17				
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	New York Life Insurance Company Poli	tical Action	Committee					
́А.	Full Name (Last, First, Middle Initial) Mr. Milton A. Dugger, Jr.			Date of Receipt				
	Mailing Address 904 Dartmouth Road			M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR884274				
	Baltimore	MD	21212-3225	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		300.00				
	Name of Employer New York Life Insurance	Occupation	ı					
	Company Receipt For:	Agent	e Year-to-Date ▼	_				
	Primary General	riggrogato		P/R Deduction (\$50.00 Mon-				
	Other (specify)	0 0	600.00	thly)				
в.	Full Name (Last, First, Middle Initial) Ms. Deborah L. Mumford			Date of Receipt				
	Mailing Address 845 Summerset Drive			M · M / D · D / Y · Y · Y · Y				
	City	State	Zip Code	Transaction ID: PR895274				
	Hockessin	DE	19707-9336	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		156.00				
	Name of Employer New York Life Insurance	Occupation Agent	1					
	Company Receipt For:	<u> </u>	e Year-to-Date ▼	_				
	Primary General	Aggregate		P/R Deduction (\$26.00 Mon-				
	Other (specify)	0 0	312.00	thly)				
с.	Full Name (Last, First, Middle Initial) Mr. Mostafa Abdou			Date of Receipt				
	Mailing Address 6000 Lombardo Center	#300		M · M / D · D / Y · Y · Y · Y				
	City	State	Zip Code	Transaction ID: PR897274				
	Seven Hills	OH	44131-6908	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		520.00				
	Name of Employer New York Life Insurance	Occupation						
	Company	Managing		_				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼					
	Other (specify)		1040.00	P/R Deduction (\$40.00 Bi- Weekly)				
s	LUBTOTAL of Receipts This Page (optional)		······	976.00				
F			•					
Т	OTAL This Period (last page this line number of	nly)						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 326 / 395 (check only one) (Check only one) X 11a 11b 11c 12
			Detailed Summary Page	
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Ν	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Poli	tical Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. Rob Ostberg			Date of Receipt
	Mailing Address 48 Greenleaf Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR90274
	Northampton	MA	01060-9768	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		195.00
	Name of Employer New York Life Insurance	Occupation	1	_
	Company	Agent		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Other (specify)	0 0	285.00	P/R Deduction (\$50.00 Mon- thly)
в.	Full Name (Last, First, Middle Initial) Mr. Bill Weimer			Date of Receipt
	Mailing Address 7234 Hanover Grove La	ane		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR906274
	Mechanicsvl	VA	23111-5633	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	300.00	P/R Deduction (\$25.00 Mon- thly)
С.	Full Name (Last, First, Middle Initial) Mr. William L. Creekmore, II			Date of Receipt
	Mailing Address 1870 Portage Lane Sou	thwest		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR912274
	Ocean Isle	NC	28469-6311	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent		
	Receipt For:	Aggregate	Year-to-Date ▼	_
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 Mon- thly)
s	LUBTOTAL of Receipts This Page (optional)		······	501.00
⊢	OTAL This Period (last page this line number o			

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 327 / 395						
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)						
11			Detailed Summary Page	X 11a 11b 11c	,	 				
Δ	winformation conied from such Departs and Otat	omonto m-	upot bo cold or upod bu opur	13 14 15	16	17				
or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ame and add	lress of any political committee to	solicit contributions from such c	committee.					
\sum	NAME OF COMMITTEE (In Full)									
\mathbb{Z}	New York Life Insurance Company Politi	ical Action	Committee							
Α.	Full Name (Last, First, Middle Initial) Ms. Rose A. Gentile			Date of Receipt						
	Mailing Address 606 South Payne Street			M M / D D / Y						
	City	State	Zip Code	Transaction ID: PR9172						
	Alexandria	VA	22314-3928	Amount of Each Receipt t	his Period					
	FEC ID number of contributing federal political committee.	C			174.00)				
	Name of Employer New York Life Insurance	Occupation	1							
	Company	Agent								
	Receipt For:	Aggregate	Year-to-Date V							
	Other (specify) ▼	0 0	330.00	P/R Deduction (\$35.00 thly)	Mon-					
в.	Full Name (Last, First, Middle Initial) Mr. Gordon Edward Parker, Jr.			Date of Receipt						
	Mailing Address 422 Discovery Road			M M / D D / Y	YYYY					
	City	State	Zip Code	Transaction ID: PR9182	274					
	Virginia Beach	VA	23451-2157	Amount of Each Receipt t	his Period					
	FEC ID number of contributing federal political committee.	C			156.00					
	Name of Employer New York Life Insurance	Occupation	1							
	Company	Agent	Veer to Data 🖛	_						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	D/D Doduction (\$26.00						
	Other (specify)	0 0	312.00	P/R Deduction (\$26.00 thly)	MON-					
с.	Full Name (Last, First, Middle Initial) Mr. Scott K. McGuire			Date of Receipt						
	Mailing Address 1983 Woodlake Drive			M M / D D / Y	YYYY					
	City	State	Zip Code	Transaction ID: PR9212	274					
	Benton	LA	71006-9305	Amount of Each Receipt t	his Period					
	FEC ID number of contributing federal political committee.	C			480.00)				
	Name of Employer New York Life Insurance	Occupation	1	7						
	Company Receipt For:	Agent	Year-to-Date V	-						
	Primary General	Aggregate		P/P Doduction (\$90.00	Mon					
	Other (specify)	0 0	960.00	P/R Deduction (\$80.00 thly)	INIOI1-					
s	UBTOTAL of Receipts This Page (optional)				810.00					
Т	OTAL This Period (last page this line number on	ly)	·							

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		FOR LINE NUMBER: PAGE 328 / 395 (check only one) (check 112) X 11a 11b 11c 12			
			Detailed Summary Page			
	ny information copied from such Reports and St for commercial purposes, other than using the					
Ν	NAME OF COMMITTEE (In Full)					
\mathbb{Z}	New York Life Insurance Company Pol	tical Action	Committee			
Α.	Full Name (Last, First, Middle Initial) Mr. Fielding D. Dupuy			Date of Receipt		
	Mailing Address 27 W 55th St. Apt. 71			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR92274		
	New York	NY	10019-4905	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		130.00		
	Name of Employer New York Life Insurance	Occupatio	n	_		
	Company		rporate Communications			
	Receipt For: Primary General	Aggregate	e Year-to-Date V			
	Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)		
в.	Full Name (Last, First, Middle Initial) Mr. Rick Jennell			Date of Receipt		
	Mailing Address 302 Chestnut Street PO Box 335			M M / D D / Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR930274		
	Pearisburg	VA	24134-0335	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		156.00		
	Name of Employer New York Life Insurance	Occupation	n			
	Company Receipt For:	Agent	e Year-to-Date V	_		
	Primary General Other (specify) ▼		312.00	P/R Deduction (\$26.00 Mon- thly)		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Theodore A. Mathas			Date of Receipt		
	Mailing Address 14 Cole Drive					
	City	State	Zip Code	Transaction ID: PR932274		
	Armonk	NY	10504-3011	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		451.75		
	Name of Employer New York Life Insurance Company	Occupation Vice Cha	n irman & Chief Operating Off	ïice		
	Receipt For:		e Year-to-Date V			
	Primary General Other (specify) ▼	0 0	903.50	P/R Deduction (\$34.75 Bi- Weekly)		
s	UBTOTAL of Receipts This Page (optional)		·····	737.75		
T	OTAL This Period (last page this line number of	only)	· · · · · ·			

ITEMIZED RECEIPTS or each category of the " [] [] [] [] [] [] [] [] [] [] [] [] [] [S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 329 / 395
Detailed Summary Page 113 110 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12 12					
Investignmention coded from such Reports and Statements may not be sold or used by any period for the purposes of sold into contributions from such committee. NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) A. Me, Jane L, Harnick Mailing Address Site Transaction ID: PR935274 Amount of Each Receipt Initial A. Maune L, Last, First, Middle Initial) A. Maune L, Last, First, Middle Initial) Previous Optimized political committee City New York Life Insurance Company Primay General Optime (Last, First, Middle Initial) B. Mr. F. Country Hope Mailing Address Sale City Sale Mailing Address Sale City Sale Mailing Address Sale Vice (President & Actuary Aggregate Year-to-Date Primay General Mailing Address Sale Vic				Detailed Summary Page	
ar for commercial purposes, other than using the name and address of any political committee to solicit cointributions from such committee. NAME CP COMMITTEE (in Full) New York Life Insurance Company Political Action Committee Full Norms (Last, Fist, Middle Initial) Ar Mading Address S31 East 88th City State Yee Vork Name of Contributing federal political committee. PEC ID number of contributing federal political committee. Oncupation Vice President & Actuary Receipt For: Primery Grad Colory Norm Country topic Other (specify) But if Country topic Mailing Address 3027 Golf Colony Drive City State Primery General Other (specify) But if Country topic Mailing Address 3027 Golf Colony Drive City State Name of Employeer Other (specify) But if Country topic Name of Employeer City State State Zip Code Name of Employeer Other (specify) Receipt For: <td< th=""><th>Δr</th><th>w information conied from such Beports and Sta</th><th>atements may</th><th>y not be sold or used by any pers</th><th></th></td<>	Δr	w information conied from such Beports and Sta	atements may	y not be sold or used by any pers	
New York Life Insurance Company Political Action Committee A Ide Jane L Hourids Maing Address 531 East 88th 300 City State Zip Code New York Life Insurance Company Octoregration Transaction ID: PR035274 New York Life Insurance C Primary 240.00 Per Do number of contributing Company C Primary Quee of Receipt New York Life Insurance Occupation Yice President & Actuary Primary Receipt For: Octoregration Yice President & Actuary Primary Receipt For: General Octoregration Yice President & Actuary Receipt For: General Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- B. Mr. F. Country Hoge VA 24152-8833 Primary Date of Receipt Mailing Address 3027 Golf Colony Drive Octoregration P/R Deduction (\$20.00 Mon- Primary General Occupation Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Mon- Primary General Occupation Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Mon- Full Name (Last, First, Middle Initial) Maing Address <t< th=""><th>or</th><th>for commercial purposes, other than using the r</th><th>ame and add</th><th>lress of any political committee to</th><th>solicit contributions from such committee.</th></t<>	or	for commercial purposes, other than using the r	ame and add	lress of any political committee to	solicit contributions from such committee.
✓ Full Name (Last. First, Middle Initial) A. Ma.Jane L. Hamrick Date of Receipt Mailing Address 531 East 88th 3C City City State New York NY How York NY FED ID number of contributing federal political committee. Occupation Vice President & Actuary Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 346.00 FUI Name (Last, First, Middle Initial) B. Mr. F. Contributing federal political committee. Miling Address 302 Colory Drive City State Zip Code Numer (Last, First, Middle Initial) B. Mr.F. Contributing federal political committee. Date of Receipt Name of Employer Neew York Life Insurance Company Occupation Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Mon- tity) Receipt For: City General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Mon- tity) Receipt For: Company General Other (specify) ▼ Date of Receipt P/R Deduction (\$20.00 Mon- tity) City State Zip Code Transaction ID: PR940274 Necopt For: Company	Ν	. ,			
A. Me. Janue L. Hamrick Date of Receipt Mailing Address 531 East 88th 3C City New York NY Interpret optical committee. C Maining Address C Mare of Employer Now York New York NY Interpret optical committee. C Primary Cocupation Vice President & Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 346.00 B. Mr. F. Countrey Hoge Date of Receipt Mailing Address 3027 Golf Colony Drive City State Zip Code Mailing Address 3027 Golf Colony Drive C City State Zip Code Name of Employer Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Mon-till New York Life Insurance Cocupation Aggregate Year-to-Date ▼ Primary General Cocupation P/R Deduction (\$20.00 Mon-till Name of Employer Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Mon-till Primary Gene		New York Life Insurance Company Poli	tical Action	Committee	
Gity State Zip Code Oity State Zip Code Mew York NY 10128-7737 FEC ID number of contributing federal political committee. C Amount of Each Recept this Period	Α.				Date of Receipt
New York NY 10128-2737 FEC ID number of contributing federal political committee. C 4mount of Each Receipt this Period Name of Erpidyeer Momon of the sum one momon					M M / D D / Y Y Y Y
FEC ID number of contributing rederal political committee. C 240.00 Name of Enployer Compony Receipt For: Description Compony Receipt For: Description Compony Receipt For: Compony Receipt For: City Occupation Vice President & Actuary Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- Weekly) B. Mr. F. Courtney Hoge Maling Address 3027 Golf Colony Drive City Date of Receipt VA 24153-6833 Date of Receipt PR Deduction (b: 20.00 Bi- Weekly) B. Mr. F. Courtney Hoge Maling Address 3027 Golf Colony Drive City Date of Receipt VA 24153-6833 Date of Receipt PR Deduction (b: 20.00 Mon- thly) Receipt For: Primary Coupation Agergate Year-to-Date ▼ P/R Deduction (\$20.00 Mon- thly) Receipt For: Primary General Occupation Agergate Year-to-Date ▼ P/R Deduction (\$20.00 Mon- thly) C. Maling Address 1611 Blackburn Heights Drive City Date of Receipt State Date of Receipt PR Deduction (\$20.00 Mon- thly) C. Maling Address 1611 Blackburn Heights Drive City State Zip Code Transaction ID: PR940274 Name of Enployer Primary General Company Code Managing Partner Aggregate Year-to-Date ▼ P/R Deduction (\$38.47 Bi- Weekly) SubtrotAL of Receipt This Page (optional) Managing Partner Aggregate Year-to-Date ▼ P/R Deduction (\$38.47 Bi- Weekly)		2		Zip Code	Transaction ID: PR935274
rederal political committee C 240.00 Name of Employer New York (Itel Insurance Company Receipt For: Primary B. Mr. F. Courthy ↓ Occupation Yice President & Actuary Nagregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- Weekly) B. Mr. F. Courthy Hoge Mailing Address 3027 Golf Colony Drive City State Zip Code City State Zip Code PEC ID number of contributing rederal political committee. C Transaction ID: PR938274 Anount of Each Receipt IIIs Period 120.00 120.00 Primary General Occupation Agental Period P/R Deduction (\$20.00 Mon- thy) C. Mr. Charles F. Rowell, r. Agental Period P/R Deduction (\$20.00 Mon- thy) C. Mr. Charles F. Rowell, r. Agental Period P/R Deduction (\$20.00 Mon- thy) City State Zip Code P/R Deduction (\$20.00 Mon- thy) City State Zip Code Transaction ID: PR940274 Amount of Each Receipt III Blackburn Heights Drive Mailing Address 161 Blackburn Heights Drive Name of Engloyeer Primary Cocupation Managing Partner P/R Deduction (\$38.47 Bi- Weekly) P/R Deduction (\$38.47 Bi- Weekly) SubtrotAL of Receipt This Page (optional) Mailing Partner Receipt This Page (optional)		New York	NY	10128-7737	Amount of Each Receipt this Period
New York Life insurance Company Recept For: Vice President & Actuary Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Bi- Weekly) B. Mr. F. Courney Hoge Maiing Address 3027 Golf Colony Drive City Date of Receipt Date of Receipt Salem VA 24153-6833 FEC ID number of contributing federal political committee. C Primary Beceipt For: Occupation Aggregate Year-to-Date ▼ Maiing Address F. Rowell, Jr. Aggregate Year-to-Date ▼ Maiing Address F. Rowell, Jr. Date of Receipt Inis Period FEC ID number of contributing federal political committee. C City State Zip Code Switckley Fate Zip Code FEC ID number of contributing federal political committee. C P/R Deduction (\$38.47 Bi- Weekly			C		240.00
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Aggregate Year-to-Date ▼ B. Mr. F. Country Hoge Date of Receipt Mailing Address 3027 Golf Colony Drive City State Zip Code Salem VA 24153-6833 FEC ID number of contributing C Transaction ID: PR938274 Aggregate Year-to-Date Aggregate Year-to-Date P/R Deduction (\$20.00 Mon-thily) Name of Employer Occupation Aggregate Year-to-Date P/R Deduction (\$20.00 Mon-thily) Name of Employer Occupation Aggregate Year-to-Date P/R Deduction (\$20.00 Mon-thily) C. Mr. Charles F. Rowell, Jr. Aggregate Year-to-Date P/R Deduction (\$20.00 Mon-thily) City State Zip Code Transaction ID: PR940274 Amount of Each Receipt this Period State Zip Code Transaction ID: PR940274 Amount of Each Receipt this Period State Zip Code State Zip Code Sewidkley PA 15143-8627 Transaction ID: PR940274 Amount of Each Receipt this Period FEC ID number of contributing C State		New York Life Insurance			
Primary General Other (specify) ▼ P/R Deduction (\$20.00 Bi- Weekly) B. Mr. F. Courtney Hoge Date of Receipt Mailing Address 3027 Golf Colony Drive Date of Receipt City State Zip Code Salem VA 24153-6833 FEC ID number of contributing federal political committee. C Name of Employer New York Life Insurance Company. Occupation Agent Other (specify) ▼ C Full Name (Last, First, Middle Initia) C C. Mr. Charles F. Rowell, Jr. Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Mon- thly) P/R Deduction (\$20.00 Mon- thly) Full Name (Last, First, Middle Initia) C C. Mr. Charles F. Rowell, Jr. C Mailing Address 1611 Blackburn Heights Drive Date of Receipt City State Zip Code Name of Employer Mailing Address 1611 Blackburn Heights Drive C City State Zip Code Name of Employer Mailing Address 1611 Blackburn Heights Drive P/R Deduction (\$38.47 Bi- Weekly) Name of Employer Mailing Address 1611 Blackburn Heights Drive P/R Deduction (\$38.47 Bi- Weekly) SubbrottaL of Receipts This Page (optional)					
Cother (specify) ▼ State State<		Primary General			P/R Deduction (\$20.00 Bi-
B. Mr. F. Couriney Hoge Date of Receipt Mailing Address 3027 Golf Colony Drive Transaction ID: PR938274 City State Zip Code Salem VA 24153-6833 FEC ID number of contributing federal political committee. C Amount of Each Receipt This Period Name of Employer New York Ufe Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Mon-this) Ctivy State Zip Code P/R Deduction (\$20.00 Mon-this) Mailing Address 1611 Blackburn Heights Drive Transaction ID: PR940274 City State Zip Code Transaction ID: PR940274 Amount of Each Receipt Inis Period 500.11 500.11 Maing Address Company Amount of Each Receipt Inis Period 500.11 Maing Address Company Amount of Each Receipt Inis Period 500.11 Name of Employer Aggregate Year-to-Date ▼ P/R Deduction (\$38.47 Bi- We		Other (specify)	0 0	346.00	Weekly)
City State Zip Code Salem VA 24153-6833 FEC ID number of contributing federal political committee. C 120.00 Name of Employer New York Life Insurance Company Occupation Agent P/R Deduction (\$20.00 Mon- thly) Receipt For: Occupation Agent Aggregate Year-to-Date ▼ P/R Deduction (\$20.00 Mon- thly) Full Name (Last, First, Middle Initial) C Mailing Address 1611 Blackburn Heights Drive City State Zip Code Transaction ID: PR940274 Amount of Each Receipt for: Date of Receipt Mailing Address 1611 Blackburn Heights Drive City State Zip Code Transaction ID: PR940274 Amount of Each Receipt this Period Transaction ID: PR940274 Amount of Each Receipt this Period State Zip Code Sewickley PA 15143-8627 Transaction ID: PR940274 Name of Employer Occupation Maraging Partner Occupation New York Life Insurance Occupation Maraging Partner P/R Deduction (\$38.47 Bi- Weekly) SUBTOTAL of Receipts This Page (optional) Mail Page (optional) Mail	В.				Date of Receipt
Salem VA 24153-6833 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 120.00 Name of Employer New York Life Insurance Company. Occupation Agent 120.00 Receipt For: Other (specify) ♥ Aggregate Year-to-Date ♥ P/R Deduction (\$20.00 Mon- thly) Full Name (Last, First, Middle Initial) C Date of Receipt City State Zip Code Sewickley PA 15143-8627 FEC ID number of contributing federal political committee. C Transaction ID: PR940274 Name of Employer New York Life Insurance Company Occupation Managing Partner Aggregate Year-to-Date ♥ Primary General Occupation Managing Partner P/R Deduction (\$38.47 Bi- Weekly) SUBTOTAL of Receipts This Page (optional)		Mailing Address 3027 Golf Colony Drive			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. C 120.00 Name of Employer New York Life Insurance Company Occupation Agent P/R Deduction (\$20.00 Mon- thly) Primary General Other (specify) ▼ 240.00 P/R Deduction (\$20.00 Mon- thly) C. Mir Charles F. Rowell, Jr. Date of Receipt Mailing Address 1611 Blackburn Heights Drive Date of Receipt City State Zip Code Sewickley PA 15143-8627 FEC ID number of contributing tederal political committee. C Transaction ID: PR940274 Name of Employer New York Life Insurance Company Occupation Managing Partner Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Integrate Year-to-Date ▼ P/R Deduction (\$38.47 Bi- Weekly) SUBTOTAL of Receipts This Page (optional)		City	State	Zip Code	Transaction ID: PR938274
federal political committee. Image: Company (agent) Name of Employer New York Life Insurance Company (agent) Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 Full Name (Last, First, Middle Initial) C C. Mr. Charles F. Rowell, Jr. Date of Receipt Mailing Address 1611 Blackburn Heights Drive City State Zip Code Sewickley PA 15143-8627 FEC ID number of contributing federal political committee. Occupation Name of Employer Occupation Name of Encloyer Occupation New York Life Insurance Occupation Company Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$38.47 Bi- Weekly) 860.11		Salem	VA	24153-6833	Amount of Each Receipt this Period
Company			C		120.00
Beceipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ P/R Deduction (\$20.00 Mon-thly) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 1611 Blackburn Heights Drive City State Zip Code Sewickley PA 15143-8627 FEC ID number of contributing tederal political committee. Occupation Name of Employer Occupation Managing Partner Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Intervention Subtrotal of Receipts This Page (optional) P/R Deduction (\$38.47 Bi-			· ·	1	
Other (specify) ▼ 240.00 Full Name (Last, First, Middle Initial) C. Mailing Address 1611 Blackburn Heights Drive Date of Receipt City State Zip Code Sewickley PA 15143-8627 FEC ID number of contributing C 500.11 receipt For: Occupation Name of Employer Occupation New York Life Insurance Occupation Managing Partner Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.22 SUBTOTAL of Receipts This Page (optional) 860.11			U U	Year-to-Date V	
C. Mr. Charles F. Rowell, Jr. Date of Receipt Mailing Address 1611 Blackburn Heights Drive City State Zip Code Sewickley PA 15143-8627 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer New York Life Insurance Company Occupation Managing Partner 500.11 Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$38.47 Bi-Weekly) SUBTOTAL of Receipts This Page (optional) Mainaging Date of Receipts This Page (optional) Mainaging Partner			U U U	240.00	
Mailing Address 1611 Blackburn Heights Drive City State Zip Code Sewickley PA 15143-8627 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer New York Life Insurance Company Occupation Managing Partner Aggregate Year-to-Date ▼ P/R Deduction (\$38.47 Bi-Weekly) SUBTOTAL of Receipts This Page (optional)					Date of Receipt
Sewickley PA 15143-8627 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 500.11 Name of Employer New York Life Insurance Company Occupation Managing Partner 500.11 New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$38.47 Bi-Weekly) Primary General 1000.22 P/R Deduction (\$38.47 Bi-Weekly) SUBTOTAL of Receipts This Page (optional) ▲ 860.11			Drive		—
FEC ID number of contributing federal political committee. C 500.11 Name of Employer New York Life Insurance Company Occupation Managing Partner Aggregate Year-to-Date ▼ Primary General 1000.22 P/R Deduction (\$38.47 Bi-Weekly) SUBTOTAL of Receipts This Page (optional) \$60.11		City	State	Zip Code	Transaction ID: PR940274
federal political committee. 0 Name of Employer New York Life Insurance Company Receipt For: Occupation Managing Partner Primary General Other (specify) ▼ 1000.22 SUBTOTAL of Receipts This Page (optional) 860.11		Sewickley	PA	15143-8627	Amount of Each Receipt this Period
Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.22 SUBTOTAL of Receipts This Page (optional) 860.11			C		500.11
Company Managing Partner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.22 SUBTOTAL of Receipts This Page (optional) 860.11		Name of Employer	Occupation	1	7
Primary General Other (specify) ▼ 1000.22 SUBTOTAL of Receipts This Page (optional) 860.11		Company		-	
Other (specify) ▼ 1000.22 If The beddetion (\$50.47 bit Weekly) SUBTOTAL of Receipts This Page (optional) 860.11			Aggregate	Year-to-Date V	
			0 0	1000.22	P/R Deduction (\$38.47 Bi- Weekly)
	s	UBTOTAL of Receipts This Page (optional)			860.11
TOTAL This Period (last page this line number only)	\vdash				

	EC Earm 2V		FOR LINE NUMBER: PAGE 330 / 395						
SCHEDULE A (F	•	Use separate schedule(s) or each category of the	(check only one)						
ITEMIZED RECE	IPTS	Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17						
Any information copied fro or for commercial purpose	m such Reports and Statements may s, other than using the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.						
NAME OF COMMITTE	· · · ·								
New York Life Insur	ance Company Political Action	Committee							
Full Name (Last, First, Mr. Jerry Prentice	Middle Initial)		Date of Receipt						
Mailing Address 600	3 Wilmington Drive		M M / D D / Y Y Y Y						
City	State	Zip Code	Transaction ID: PR942274						
Burke	VA	22015-3823	Amount of Each Receipt this Period						
FEC ID number of cont federal political commit			205.98						
Name of Employer New York Life Insurance	ce Occupation Agent	n							
Company Receipt For:		e Year-to-Date 🔻	-						
Primary	General		P/R Deduction (\$34.33 Mon-						
Other (specify)		411.96	thly)						
Full Name (Last, First, B. Mr. Michael G. Zorio	Middle Initial)		Date of Receipt						
Mailing Address 930	7 E Carondelet Drive		M M / D D / Y Y Y Y						
City	State	Zip Code	Transaction ID: PR943274						
<u>Manassas Park</u>	VA	20111-2465	Amount of Each Receipt this Period						
FEC ID number of cont federal political commit			150.00						
Name of Employer New York Life Insurance	ce Occupation Agent	n							
<u>Company</u> Receipt For:		Year-to-Date ▼	-						
Primary	General	000.00	P/R Deduction (\$25.00 Mon-						
Other (specify)		300.00	thly)						
Full Name (Last, First, Ms. Janet Nichols	Middle Initial)		Date of Receipt						
Mailing Address 132	3 Mount Carml Ridge Road		M M / D D / Y Y Y Y						
City	State	Zip Code	Transaction ID: PR957274						
<u>St. Marys</u>	WV	26170-4661	Amount of Each Receipt this Period						
FEC ID number of cont federal political commit			156.00						
Name of Employer New York Life Insuranc	Occupation	n							
<u>Company</u>	Agent	Veer te Dete	-1						
Receipt For:	General	e Year-to-Date 🔻							
Other (specify)		312.00	P/R Deduction (\$26.00 Mon- thly)						
SUBTOTAL of Receipts	This Page (optional)		511.98						
TOTAL This Period (last	page this line number only)	·							

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 331 / 395 (check only one)
			Detailed Summary Page	X 11a 11b 11c 12
	y information copied from such Reports and Sta for commercial purposes, other than using the n			
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			
\angle	New York Life Insurance Company Polit	tical Action	Committee	1
Α.	Full Name (Last, First, Middle Initial) Mr. Robert L. Pethtal			Date of Receipt
	Mailing Address 4507 Hazeltine Court Apt. E			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR962274
	Alexandria	VA	22312-3205	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		156.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company Receipt For:	Agent	Year-to-Date V	_
	Primary General	7.99.094.0		P/R Deduction (\$26.00 Mon-
	Other (specify)	0 0	312.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. Gerald F. Hall			Date of Receipt
	Mailing Address 15 Fieldstone Drive			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR96274
	Westport	MA	02790-2634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		480.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Versite Data 🗮	
	Receipt For: Primary General	Aggregate	Year-to-Date V	D/D Dathertian (\$20,00 Mar
	Other (specify)	0 0	960.00	P/R Deduction (\$80.00 Mon- thly)
с.	Full Name (Last, First, Middle Initial) Mr. Dan Kunhardt			Date of Receipt
	Mailing Address 11 Madison Circle			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR97274
	Greenfield	MA	01301-2703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer New York Life Insurance	Occupation	1	
	Company	Agent	Veer te Dete	
	Receipt For: Primary General	Aggregale	Year-to-Date V	D/D Deduction (#50.00 Man
	Other (specify)	0 0	350.00	P/R Deduction (\$50.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)			836.00
т	OTAL This Period (last page this line number or	nly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 332 / 395 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	v not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\sum	NAME OF COMMITTEE (In Full)			
\mathbb{Z}	New York Life Insurance Company Politi	cal Action	Committee	
Α.	Full Name (Last, First, Middle Initial) Mr. C. Stuart Nelson			Date of Receipt
	Mailing Address 2424 Honeysuckle Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR987274
	Chapel Hill	NC	27514-6820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		210.00
	Name of Employer New York Life Insurance	Occupation	ı	
	Company	Agent		_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	P/R Deduction (\$35.00 Mon-
	Other (specify)	0 0	420.00	thly)
в.	Full Name (Last, First, Middle Initial) Mr. H. Dewey Young, Jr.			Date of Receipt
	Mailing Address 105 Windrock Lane			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR990274
	Cary	NC	27511-9766	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.02
	Name of Employer New York Life Insurance	Occupation	ı	
	Company Receipt For:	Agent	e Year-to-Date ▼	_
	Primary General	Ayyreyale		P/R Deduction (\$16.67 Mon-
	Other (specify)	0 0	200.04	thly)
с.	Full Name (Last, First, Middle Initial) Mr. James Bergeron			Date of Receipt
	Mailing Address 905 Bosley Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR992274
	Cockeysville	MD	21030-3111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer New York Life Insurance Company	Occupation Agent	1	
	Receipt For:	0	e Year-to-Date 🔻	
	Primary General Other (specify)	0 0	600.00	P/R Deduction (\$50.00 Mon- thly)
s	UBTOTAL of Receipts This Page (optional)		·····	610.02
	OTAL This Period (last page this line number on			236100.94

50	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		E NUMBER:	PAGE 333 / 395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on 21b 27	22 🗙 23 🗌	24 25 26 28c 29 30
	y Information copied from such Reports and Staten or commercial purposes, other than using the nam				
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica				
	Full Name (Last, First, Middle Initial)			Transaction ID: 317	794
Α.	Committee to Elect Gary Ackerman			Date of Disbursemen	-
	Mailing Address 3000 Marcus Ave. Suite 19			0 ^M 8 ^M / 2 ^D 2 ^A	Ý Ž0Ŏ5Ŭ
		State Zip Code		Amount of Each Disb	ursement this Period
	Lake Success	NY 11042		-	1000.00
	Purpose of Disbursement Contribution		011		1000.00
	Candidate Name Gary L. Ackerman		Category/ Type		
		ment For: 2006 Primary General Other (specify) ▼		Contribution	
	Full Name (Last, First, Middle Initial)			T	F 4 7
В.	Committee to Elect Gary Ackerman			Transaction ID: 324 Date of Disbursemen	t
	Mailing Address 3000 Marcus Ave. Suite 19	1 1 1 ^M / ^D 0 7 / ^Y 2 0 0 5 ^Y			
	City Lake Success	StateZip CodeNY11042		Amount of Each Disb	
	Purpose of Disbursement Contribution		2500.00		
	Candidate Name Gary L. Ackerman		011 Category/ Type		
	Senate X President	ment For: 2006 Primary General Other (specify) ▼		Contribution	
	State: NY District: 5				
C.	Full Name (Last, First, Middle Initial) Committee to Elect Gary Ackerman			Transaction ID: 335 Date of Disbursemen	t
	Mailing Address 3000 Marcus Ave. Suite 19				Ž 0 0 5 Ĭ
	City Lake Success	State Zip Code NY 11042		Amount of Each Disb	
	Purpose of Disbursement Voided Check Originally Dated 5/3/05		011] [-2500.00
	Candidate Name Gary L. Ackerman		Category/ Type		
		ment For: 2006 Primary General Other (specify) ▼		Voided Check Orig Dated 5/3/05	inally
					1000.00
S	JBTOTAL of Disbursements This Page (optional)		🕨		1000.00

SCHEDULE B (FEC Form 3X)		Use seperate schedule(s)		FOR LINE (check onl			E NUMBER: PAGE 334 / 395							
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(21b	ć	ne) 22 28a		23 28b	24 28c		25 29		26 30
	y Information copied from such Reports and Statem												3	
or I	or commercial purposes, other than using the name NAME OF COMMITTEE (In Full)		COL			SOIIC	it contr	ibuli	ons no	m such	COULU	nillee		
\rangle	New York Life Insurance Company Political	Action Committee												
<u> </u>	Full Name (Last, First, Middle Initial)						Trans	actio	on ID:	320053	3			
А.	America's Foundation								sburse					
	Mailing Address 128 North Columbus Stre	et					0 ^M 9	M /	^D 1	6 [/]	Ý Ž	0 ð 5	Y	
	,	State Zip Code					Amou	nt of	Each	Disburs	emen	t this F	erioc	1
		VA 22314				_					1	000.0	0	٦
	Purpose of Disbursement Contribution			0	11							000.0		_
	Candidate Name			_	gory/									
					pe									
	Office Sought: House Disburser						Contri	buti	on					
	Senate President	Primary General Other (specify)												
	State: District:													
	Full Name (Last, First, Middle Initial)						Trans	acti	n ID:	329034	1			
В.	America's Foundation								sburse		t			
						_	[™] 2	M /	D 1	3 /	Y Y	0 ð 5	Y	
	Mailing Address 128 North Columbus Street						12			5	~	003		
		State Zip Code					Amou	nt of	Each	Disburs	emen	t this F	Perioc	1
	Alexandria VA 22314					_	1000.00							
	Purpose of Disbursement Contribution 011						<u> </u>					000.0		_
	Candidate Name		С	ate	egory/ rpe									
	Office Sought: House Disburser						Contri	buti	on					
	Senate	Primary General					Contra	out	011					
	State: District:	Other (specify)												
	Full Name (Last, First, Middle Initial)						Tropo	ooti		314558	>			
C.	American Success PAC								sburse)			
	Mailing Address 1155 21st Street, NW					_	0 ^M 8	M /	^D 1	^D /	Ý Ž	0 ở 5	Y	
	<u></u>	State Zin Cada					A		Fash	Disburs				
		State Zip Code DC 20036					Amou	nt of	Each	Disburs	emen	t this p	erioc	
	Purpose of Disbursement Contribution			0	11						1	500.0	00	
	Candidate Name Category/ Type													
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼					Contri	buti	on					
_	State: District:													
s	JBTOTAL of Disbursements This Page (optional)					•					3	500.0	0	
Т	DTAL This Period (last page this line number only)				►	•								

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		E NUMBER:	PAGE 335 / 395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on 21b 27	22 X 23 2	24 25 26 28c 29 30
	y Information copied from such Reports and Statem or commercial purposes, other than using the name				
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica				
Α.	Full Name (Last, First, Middle Initial) Americans for a Republican Majority PAC ((ARMPAC)		Transaction ID: 325	
	Mailing Address 117 Second Street, NW				2005
	,	State Zip Code DC 20036		Amount of Each Disb	
	Purpose of Disbursement Contribution Candidate Name		011 Category/		5000.00
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼	Туре	Contribution	
В.	Full Name (Last, First, Middle Initial) Bachus For Congress			Transaction ID: 324 Date of Disbursement	
	Mailing Address P.O. Box 59444				Ý ŽOŎ5Ÿ
	Birmingham	State Zip Code AL 35259		Amount of Each Disb	ursement this Period 1500.00
	Purpose of Disbursement Contribution Candidate Name Spencer Bachus		011 Category/ Type		1000.00
		ment For: 2006 Primary General Other (specify) ▼		Contribution	
C.	Full Name (Last, First, Middle Initial) Becerra For Congress			Transaction ID: 313 Date of Disbursement	
	Mailing Address P.O. Box 261060				Ý ŽOÖ5Ÿ
		State Zip Code CA 90026		Amount of Each Disb	
	Purpose of Disbursement Contribution		1000.00		
	Candidate Name Xavier Becerra		Category/ Type	-	
	Office Sought: X House Disbursed Senate President State: CA District: 31	ment For: 2006 Primary X General Other (specify) ▼		Contribution	
s	JBTOTAL of Disbursements This Page (optional)		>		7500.00
т	OTAL This Period (last page this line number only)	<u></u>	►		
FEC	Schedule B (Form 3X) Rev. 02/2003				

SCHEDULE B (FEC Form 3X)				E NUMBER: PAGE 336/3			
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 🗙 23 🗌	24 25 26 28c 29 30b		
	y Information copied from such Reports and Statem for commercial purposes, other than using the name						
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica						
<u>ب</u>	Full Name (Last, First, Middle Initial)			Transaction ID: 323	489		
Α.	A Lot of People Who Support Jeff Bingama	an		Date of Disbursemen	-		
	Mailing Address PO Box 16210			10 ^M / 20 ^D	Ý ŽOŎ5Ÿ		
		State Zip Code NM 87191		Amount of Each Dist	oursement this Period		
	Purpose of Disbursement Contribution		011		1000.00		
	Candidate Name Jeff Bingaman		Category/ Type				
	XSenateXPresident	ment For: 2006 Primary General Other (specify) ▼		Contribution			
	State: NM District:						
В.	Full Name (Last, First, Middle Initial) Friends Of Roy Blunt			Transaction ID: 313 Date of Disbursemen	t		
	Mailing Address PO Box 50100			0 ^M 7 ^M / ^D 2 ^D 5	2005 [°]		
	,	StateZip CodeMO65805		Amount of Each Dist			
	Purpose of Disbursement Contribution		011		2000.00		
	Candidate Name Roy Blunt		Category/ Type				
	5 <u>x</u>	ement For: 2006 Primary General Other (specify) ▼		Contribution			
	State: MO District: 7	·					
C.	Full Name (Last, First, Middle Initial) Friends Of Roy Blunt			Transaction ID: 320 Date of Disbursemen			
	Mailing Address PO Box 50100			0 9 2 8	Ý Ž0Ŏ5Ÿ		
		State Zip Code MO 65805		Amount of Each Dist	oursement this Period		
	Purpose of Disbursement Contribution		011	L	2000.00		
	Candidate Name Roy Blunt		Category/ Type				
		ement For: 2006 Primary General Other (specify) ▼		Contribution			
					5000.00		
	UBTOTAL of Disbursements This Page (optional).				5000.00		
Т	OTAL This Period (last page this line number only)		►				

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)						R:		P	AGE	337 /	395	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(Г	check c 7 21b	ć	ie) 22	X	23	24		25		26
		Detailed Summary Page			27		28a		28b	280		29		30k
	y Information copied from such Reports and Statem for commercial purposes, other than using the name												S	
	NAME OF COMMITTEE (In Full)		COII			30101	conti	ibuti			COIII			
$\langle \rangle$	New York Life Insurance Company Politica	I Action Committee												
Α.	Full Name (Last, First, Middle Initial)									32349	6			
	Friends Of Roy Blunt					_	М	м	sburse		Y	Y Y	Y	
	Mailing Address PO Box 50100						10		2	0	2	2005)	
		State Zip Code					Amou	nt of	f Each	Disburs	emer	nt this F	Period	ł
	Springfield Purpose of Disbursement	MO 65805	_	_		_		Û				4000.0	00	٦
	Contribution			0	11			0						
	Candidate Name Roy Blunt				egory/ /pe									
	Office Sought: X House Disburse	ment For: 2006				c	Contri	but	ion					
	Senate President	Primary X General Other (specify)						but						
	State: MO District: 7													
D	Full Name (Last, First, Middle Initial)					٦	Frans	acti	on ID:	32005	8			
В.	Friends Of Sherwood Boehlert							of Di	sburse	ement	V	× ×	V	
	Mailing Address PO Box 819						0 9			6	2	2005	5 '	
		State Zip Code NY 13413					Amou	nt of	f Each	Disburs	emer	nt this F	Perioc	ł
	Purpose of Disbursement Contribution			0	11							2500.0	00	
	Candidate Name Sherwood L. Boehlert			ate	egory/ /pe									
	3 X	ment For: 2006				C	Contri	but	ion					
	Senate X President	Primary General Other (specify) ▼												
	State: NY District: 24													
C.	Full Name (Last, First, Middle Initial) Buckeye PAC								on ID: sburse	31349 ment	3			
	Mailing Address 1331 H Street, NW						0 ^M 7	М	D 2	D /	Ý 2	źoós	5 ^Y	
	City 12th Floor	State Zip Code					Amou	nt of	fEach	Disburs	emer	nt this F	Period	
		DC 20005				_		0			-	2000.0	20	٦
	Purpose of Disbursement Contribution			0	11	1 '						2000.0	50	_
	Candidate Name			ate	egory/ /pe									
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼				C	Contri	but	ion					
_	State: District:	· · · ·												
s	UBTOTAL of Disbursements This Page (optional) .										8	500.0	00	
т	OTAL This Period (last page this line number only)				►	•								
۱ <u> </u>														

S	CHEDULE B (FEC Form 3X)	Use seperate schedu	ile(s)			NUMBE	R:	PA	AGE 3	38/3	395
IT	EMIZED DISBURSEMENTS	for each category of t Detailed Summary P	the		2k only 1b 7	22 28a	X 23 28b	24 28c	2	L	26 30b
	y Information copied from such Reports and Stater for commercial purposes, other than using the name										
or	NAME OF COMMITTEE (In Full)	e and address of any po	nilicai coi	mmuee				om such o	Commu	lee	
\rangle	New York Life Insurance Company Politic	al Action Committee									
<u> </u>	Full Name (Last, First, Middle Initial)					Trans	action ID:	321083	;		
А.	Dave Camp For Congress						of Disburse				
	Mailing Address 5915 Eastman Ave. Sui	te 100				0 ^M 9	M / 2	8 / Y	Ź0	ò 5	Y
	City Midland	StateZip CodeMI48640				Amou	int of Each	Disburse		-	
	Purpose of Disbursement Contribution			011		L.	<u> </u>		100	0.00	0
	Candidate Name Dave Camp			Categor Type	y/						
	Senate X President	ement For: 2006 Primary Gen Other (specify)				Contr	ibution				
	State: MI District: 4 Full Name (Last, First, Middle Initial)										
В.	Cantor For Congress					Date	of Disburse			V	× I
	Mailing Address P. O. Box 17813					0 7	[™] 2	2 Ŭ	20	ŏ5	·
	City Richmond	StateZip CodeVA23226				Amou	int of Each	Disburse			
	Purpose of Disbursement Contribution			011					200	0.00	0
	Candidate Name Eric I. Cantor			Categor Type	y/						
		ement For: 2006 Primary Gen Other (specify)				Contr	ibution				
	State: VA District: 7										
C.	Full Name (Last, First, Middle Initial) Cantor For Congress					Date	action ID: of Disburse	ement	2		
	Mailing Address P. O. Box 17813					0 [™] 9	M / D 1	^D /	ź0	ð 5	Y
	City Richmond	State Zip Code VA 23226				Amou	int of Each	Disburse		-	-
	Purpose of Disbursement Contribution			011		L.	- • •		50	0.00	0
	Candidate Name Eric I. Cantor			Categor Type	y/						
		ement For: 2006 Primary Gen Other (specify) ▼				Contr	ibution				
s	UBTOTAL of Disbursements This Page (optional)				•			• • •	350	0.00	D
	OTAL This Period (last page this line number only				• •					0	
I						-					

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					UMBE	R:			PAG	ie 339	/ 395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27		ne) 22 28a	X	23 28b		24 28c	25 29	26
	y Information copied from such Reports and Statem for commercial purposes, other than using the name												
	NAME OF COMMITTEE (In Full)		COIL			30110		ibuti		011 30			
\rangle	New York Life Insurance Company Politica	al Action Committee											
Α.	Full Name (Last, First, Middle Initial) Cantor For Congress						Trans Date of						
	Mailing Address P. O. Box 17813						0 ^M 9	M	1	9	Y	²oỏ	5 [×]
	City Richmond	State Zip Code VA 23226					Amou	nt o	f Each	ı Disb	ursem	ent this	Period
	Purpose of Disbursement Contribution			0	11							500	.00
	Candidate Name Eric I. Cantor				gory/ pe								
	Office Sought: X House Disburse Senate President State: VA District: 7	ement For: 2006 Primary X General Other (specify) ▼					Contri	ibut	ion				
	Full Name (Last, First, Middle Initial)												
В.							Date of					Y Y	Y
	Mailing Address P.O Box 133						1 0		2	20	Ľ	Ž0Ŏ	5
	Wilmington	State Zip Code DE 19899					Amou	nt o	Each	ı Disb	ursem	ent this	
	Purpose of Disbursement Contribution			0			L.					1000	.00
	Candidate Name Michael N. Castle				gory/ pe								
		ement For: 2006 Primary General Other (specify) ▼					Contri	ibut	ion				
	State: DE District: 1												
C.	Full Name (Last, First, Middle Initial) Chafee For Senate						Trans Date o		sburs	ement			
	Mailing Address P.O. Box #7329						^M 2	M	1	^р	Y	²oỏ	5 [×]
	City Warwick	StateZip CodeRI02887					Amou	nt o	Each	ı Disb	ursem	ent this	
	Purpose of Disbursement Contribution			0	11							1000	.00
	Candidate Name Lincoln Chafee				gory/ pe								
		ement For: 2006 Primary General Other (specify) ▼					Contri	ibut	ion				
	UBTOTAL of Disbursements This Page (optional)					 •				• •	v	2500.	.00
	OTAL This Period (last page this line number only)				•	-		0			0		
<u> </u>				••••							0		

0	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					UMBE	R:			P	AGE	340 /	/ 395	;
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			heck c 21b 27	only o	ne) 22 28a	X	23 28b	\square	24 28c		25 29		26 30
	y Information copied from such Reports and Statem						the pu		se of s		ting o		bution	s	
or t	for commercial purposes, other than using the name	and address of any political	l com	nmi	ttee to	SOLIC	it contr	ibut	ions fr	om s	Such	comr	nittee		
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica	Action Committee													
Α.	Full Name (Last, First, Middle Initial) Friends Of Hillary						Trans Date o	of D	isburs	eme		}			
	Mailing Address 509 2nd Street NE						08	М		2 ^D		źź	0 Å 5	5 [×]	
	,	State Zip Code DC 20002					Amou	nt o	f Each	n Dis	burse		t this F		d
	Purpose of Disbursement Contribution			01	_		L.					. 5	5000.0	00	
	Candidate Name Hillary Rodham Clinton	and Form 00000		ate Ty	gory/ pe	_									
	Office Sought: House Disbursed X Senate President State: NY District:	nent For: 2006 Primary X General Other (specify) ▼					Contri	but	ion						
	Full Name (Last, First, Middle Initial)						Trans	acti	on ID	: 31	7799)			
В.	Friends Of Hillary Mailing Address 509 2nd Street NE					_	Date o	of Di M	/ D	eme 24	nt /	Ý 2	0 ŏ 5	5 Y	
										·					
	Washington	State Zip Code DC 20002					Amou	nt o	f Each	ı Dis	burse		t this F		<i>i</i> d
	Purpose of Disbursement Contribution			01	_		L.	0					500.0	00	_
	Candidate Name Hillary Rodham Clinton			ate Ty	gory/ pe										
	Office Sought: House Disburse X Senate X President	nent For: 2006 Primary General Other (specify) ▼					Contri	but	ion						
	State: NY District:														
C.	Full Name (Last, First, Middle Initial) Mac Collins For Congress						Trans Date of			-			V	V	
	Mailing Address P O Box 962						1 0			2 Ŏ	, 	2	0 Ó 5	5	
		State Zip Code GA 30233					Amou	nt o	f Each	n Dis	burse	-		_	d
	Purpose of Disbursement Contribution			01	1		L.					1	000.0	00	_
	Candidate Name Mac Collins			ate Ty	gory/ pe										
	Office Sought: X House Disburse Senate President State: GA District: 8	nent For: 2006 Primary General Other (specify) V					Contri	but	ion						
	UBTOTAL of Disbursements This Page (optional)								v	*		7	500.0	າດ	

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)						R:		P	AGE	341 /	395	-
IT	EMIZED DISBURSEMENTS	for each category of the		((check c 7 21b	ć	ne) 22	X	23	24		25		26
		Detailed Summary Page		┢	27	Η	28a		28b	28c		29	\vdash	20 30b
	/ Information copied from such Reports and Statem												5	
or	or commercial purposes, other than using the name	and address of any political	com	۱m	ittee to	SOLIC	it contri	butio	ons fro	m such	comr	nittee		
$ \rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Political	Action Committee												
V	New Fork Life insurance Company Politica	Action Committee												
	Full Name (Last, First, Middle Initial)						Trans	actio	on ID:	323493	3			
А.	Congressional Majority Committee						Date c	_						
	Mailing Address P.O. Box 746						10	M /	۵	0 /	ž Ž	0 Ŏ 5	Y	
		State Zip Code					Amou	nt of	Each	Disburs	emen	t this F	Perio	d
		CA 93302						Ū.			F	5000.0	0	
	Purpose of Disbursement Contribution			0	11		L					0000.0		
	Candidate Name			_	gory/									
				Ту	ре									
	Office Sought: House Disburser Senate	ment For: Primary General					Contri	buti	on					
	President	Other (specify)												
	State: District:													
В.	Full Name (Last, First, Middle Initial)								-	325513	3			
Ъ.	Cooper For Congress Committee							of Dis	sburse	ment	vvv		V	
	Mailing Address P.O. Box 927						1 1	vi 7	1	5	' ź	0 Ŏ 5	·	
		State Zip Code					Amou	nt of	Each	Disburs	emen	t this F	Perio	d
	Brentwood Purpose of Disbursement	TN 37024		_		_					1	1000.0	00	
	Contribution			0	11		L							_
	Candidate Name Jim Cooper				gory/ pe									
	Office Sought: X House Disburser						Contri	huti	on					
		Primary General					oonin	buti	on					
	State: TN District: 5	Other (specify)												
	Full Name (Last, First, Middle Initial)						Trans	actio	on ID·	325514	1			
C.	Crowley For Congress						Date of							
	Mailing Address 84-56 Grand Avenue						[™] 11	VI /	^D 1	^D 5	Ý Ž	0 ð 5	Y	
		State Zip Code NY 11373					Amou	nt of	Each	Disburs	emen	t this F	Perio	d
	Purpose of Disbursement			-			L.				3	3000.0	00	
	Contribution			0	_									
	Candidate Name Joseph Crowley				gory/ pe									
	· · ·	ment For: 2006		.,	PO		.	L 4 !						
	Senate X	Primary General					Contri	IJUQ	on					
	State: NY District: 7	Other (specify)												
													_	
s	JBTOTAL of Disbursements This Page (optional)				►	•					9	000.0	0	
						-		Ŷ						٦
	DTAL This Period (last page this line number only)						<u> </u>							

ITI		Use seperate schedule(s)	false also ask		PAGE 342/395
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 28a 28b	24 25 26 28c 29 30
	Information copied from such Reports and Statem or commercial purposes, other than using the name				
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica				
	Full Name (Last, First, Middle Initial) Defending America's Future PAC			Transaction ID: 31 Date of Disburseme	ent
	Mailing Address P.O. Box 763			08 ^M /24	Ý 2005
	Deer Park	State Zip Code NY 11729		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement Contribution Candidate Name		011 Category/ Type		5000.00
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼	туре	Contribution	
-	Full Name (Last, First, Middle Initial) Tom DeLay Congressional Committee			Transaction ID: 32 Date of Disburseme	ent
	Mailing Address 7002 Riverbrook Drive St	e. 200		09 28	2 0 0 5 [°]
	,	State Zip Code TX 77479		Amount of Each Dis	sbursement this Period 3000.00
	Contribution Candidate Name Tom DeLay		011 Category/ Type		
	Office Sought: X House Disburse Senate President State: TX District: 22	ment For: 2006 Primary General Other (specify) ▼		Contribution	
_	Full Name (Last, First, Middle Initial) Dirigo PAC			Transaction ID: 32 Date of Disburseme	ent
	Mailing Address P.O. Box 1355			1 1 ^M [/] 0 7	Ý 2005
		State Zip Code VA 22313-1355		Amount of Each Dis	sbursement this Period
	Purpose of Disbursement Contribution		011		1000.00
	Candidate Name		Category/ Type		
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		Contribution	
sı	JBTOTAL of Disbursements This Page (optional) .		►		9000.00

ITEMIZED DISBURSEMENTS for each catagory of the Detailed Summary Page (bit RA UNIVOR) (bit RA UNIVOR) (control that using the name and address of any political contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee New York Life Insurance Company Political Action Committee Arry Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicital contributions from such committee or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee New York Life Insurance Company Political Action Committee Arry The Elizabeth Dole Committee Transaction ID: 324504 Date of Disbursement time (11 1 1 1 0 0 7 1 2 0 0 5 1 2 0 0 0 5 1 2 0 0 0 0 0 (11 1 1 1 1 1 0 0 7 1 2 0 0 5 1 2 0 0 0 0 0 (11 2 attegory) Elizabeth Dole Arry Tempes of Disbursement for Contribution 011 Catagory) Elizabeth Dole Anount of Each Disbursement file 2 0 0 0 0 (11 2 attegory) Elizabeth Dole Contribution Bruit Name (Last, First, Middle Initial) Dorler For Congress Transaction ID: 314557 Date of Disbursement Contribution Contribution Bruit Name (Last, First, Middle Initial) Dorler For Congress Transaction ID: 314557 Date of Disbursement file (10 0 0 0 0 (11 Catagory) Type Contribution City State: P.O. Box 505 City Transaction ID: 323500 Date of Disbursement Contribution City State Propose of Disbursement Contribution <td< th=""><th>SC</th><th>CHEDULE B (FEC Form 3)</th><th>Use seperate schedule</th><th>e(s)</th><th>FOR LINE</th><th></th><th>PAGE 343 / 395</th></td<>	SC	CHEDULE B (FEC Form 3)	Use seperate schedule	e(s)	FOR LINE		PAGE 343 / 395
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME CF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) A. The Elizabeth Dole Committee Maling Address PO Box 2918 City State Zip Code Purpose of Disbursement 011 Cardidate Name Disbursement For: 2008 City State Zip Code Purpose of Disbursement Other (specify) V Office Sought: House Disbursement For: 2008 City State: NC 2ip Code Purpose of Disbursement Other (specify) V Contribution State: No District: 1 President B. Dreier For Congress Transaction ID: 314557 Date of Disbursement Maling Address P.O. Box 505 Amount of Each Disbursement this Period City State: Zip Code Amount of Each Disbursement this Period Candidate Name Disbursement For: 2006 Contribution City	ITI	EMIZED DISBURSEMENT	for each category of th	e	21b	22 X 23	
NAME OF COMMITTEE (in Full) NAME OF COMMITTEE (in Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Ar The Elizabeth Dole Committee Maling Address PO Box 2918 City State Zip Code Purpose of Disbursement 011 Cardidate Name Disbursement For: 2000 Elizabeth Dole Disbursement For: 2000 Office Sought: House Disbursement For: 2000 Office Sought: House Disbursement For: 2000 Full Name (Last, First, Middle Initial) Transaction ID: 314557 Date of Disbursement B. Dreier For Congress Maling Address P.O. Box 505 Amount of Each Disbursement this Period City State: NC Disbursement For: 2006 Code Purpose of Disbursement CA 91785 Amount of Each Disbursement this Period Office Sought: X House Disbursement For: 2006 Contribution Cardidate Name Disbursement For: 2006 Contribution Contribution Gride Sought: X House							
A. The Elizabeth Dole Committee Intersection B: Delyon Mailing Address PO Box 2918 City State Zip Code Rateigh NC 27602 Purpose of Disbursement 011 Cardidate Name 011 Elizabeth Dole 011 Cardidate Name Disbursement For: 2008 Cardidate Name Disbursement For: 2008 State: NC Disbursement For: 2008 Contribution 011 Cardidate Name Full Name (Last, First, Middle Initia) Transaction ID: 314557 District: 1 Disbursement 011 Cardidate Name 011 ? 0 1 1 ? 2 0 0 5 Mailing Address P.O. Box 505 011 City State Zip Code Upland CA 91785 Purpose of Disbursement 011 Cardidate Name David Dreier Disbursement For: 2006 Office Sought: House President State: CA District: 2 President Mailing Address PO Box 1940 0ther (specify) ▼		NAME OF COMMITTEE (In Full)					
City Rateigh State Zip Code Amount of Each Disbursement this Period Contribution 011 Category/ Type 2000.00 Office Sought: House Disbursement For: 2008 State: NC Disbursement For: 2008 Office Sought: House Disbursement For: 2008 State: NC District: 11 B: District: 11 Category/ Type Contribution Maling Address P.O. Box 505 011 Category/ Type Contribution City State Zip Code Amount of Each Disbursement To: 2006 City State Zip Code Amount of Each Disbursement To: 2006 Catinbution Catinbution Catinbution 111 Category/ Type 20 0 5 Y Office Sought: X House Disbursement For: 2006 Contribution Category/ Transaction ID: 323500 Contribution Contribution Contribution City State: Po Box 1940 11 Category/ Type 2 0 0 5 Y City State<		(,					
Raleigh NC 27602 Purpose of Disbursement Contribution 011 2000.00 Contribution 011 Category/ Type 2000.00 Office Sought: House Disbursement For: 2008 Persident District: 1 0ther (specify) ▼ Contribution Bruit Name (Last, First, Middle Initial) Dreier For Congress Transaction ID: 314557 Mailing Address P.O. Box 505 0ther (specify) Amount of Each Disbursement Contribution 011 Category/ Type 1000.00 Office Sought: X House Disbursement For: 2006 Contribution 011 Category/ Type 1000.00 Office Sought: X House Disbursement For: 2006 C Ful Name (Last, First, Middle Initial) Disbursement For: 2006 Contribution C Purpose of Disbursement 0ther (specify) Transaction ID: 323500 Date of Disbursement this Period C fly State: CA District: 26 Amount of Each Disbursement this Transaction ID: 323500 C fly State Zip Code Amount of Each Disbursement this Period 1011 <		Mailing Address PO Box 2918					07 [°] ^Y 2005 [°]
Contribution 011 Candidate Name 011 Elizabet Dole 011 Office Sought: House X Senate Primary Periodic Name 0ther (specify) State: NC District: 1 Full Name (Last, First, Middle Initial) Disbursement For: B. Dreier For Congress Mailing Address P.O. Box 505 City State Quipland CA Cantibution 011 Cantibution 011 Cantibution 011 Cantibution 011 Category/ Type 1000.00 Office Sought: House Senate Disbursement For: 2006 Amount of Each Disbursement 1000.00 Chribution 011 Category/ Type Office Sought: House Senate President Disbursement For: 2006 K Primary General Mailing Address PO Box 1940 Transaction ID: 323500 City State Zip Code Puru						Amount of Each	
Elizabeth Dole Type Office Sought: House State: NC District: 1 B. Full Name (Last, First, Middle Initial) B. Dreier For Congress Mailing Address P.O. Box 505 City State Uppand CA Office Sought: X House State: CA Disbursement For: 2008 Office Sought: X House Disbursement For: Contribution 011 Candidate Name Disbursement For: David Dreier Other (specify) ▼ Office Sought: X House State: CA District: 3 Disbursement For: 2006 Chur yropse of Disbursement for: 2006 Contribution Transaction ID: 323500 Date of Disbursement Date of Disbursement this Period Xi Primary General Office Sought: X House President Disbursement For: 2006 Chur yropse of Disbursement Other (specify) ▼ Amount of Each Disbursement this Period 1500.00 Chu		Contribution					2000.00
X Senate President Primary General Other (specify) Contribution State: NC District: 1 Transaction ID: 314557 Date of Disbursement Mailing Address P.O. Box 505 City State Zip Code Q1 and Contribution Amount of Each Disbursement Office Sought: X House President Disbursement For: Q1 and Contribution 2006 X Office Sought: X House President Disbursement For: Q1 and Contribution 2006 X Contribution State: CA District: 26 Contribution Contribution Contribution Other (specify) V State: CA Disbursement For: Q1 and Q1 and Q1 and Q1 and		Elizabeth Dole	Diskursement For 2000	(
Full Name (Last, First, Middle Initial) Transaction ID: 314557 Dreier For Congress Mailing Address P.O. Box 505 City State Zip Code Upland CA 91785 Purpose of Disbursement 011 Cardidate Name 011 Cardidate Name 011 Cardidate Name Disbursement For: 2006 Office Sought: X House State: CA Disbursement For: 2006 Contribution Other (specify) Contribution State: CA District: 26 Contribution Full Name (Last, First, Middle Initial) C. President State: CA District: 26 Contribution Mailing Address PO Box 1940 Transaction ID: 323500 Date of Disbursement Date of Disbursement this Period Mailing Address PO Box 1940 Amount of Each Disbursement this Period City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Office Sought: X House Disbursement For: Office Sought: X House <th></th> <td>X Senate President</td> <td>X Primary Gener</td> <td>al</td> <td></td> <td>Contribution</td> <td></td>		X Senate President	X Primary Gener	al		Contribution	
B. Dreier For Congress Date of Disbursement Mailing Address P.O. Box 505 City State Zip Code Purpose of Disbursement 011 Contribution 011 Cardidate Name Disbursement For: 2006 Office Sought: X House Disbursement For: 2006 Contribution 011 Category/ Type Contribution Office Sought: X House Disbursement For: 2006 Verpose of Disbursement Other (specify) ▼ Contribution Contribution State: CA District: 26 Other (specify) ▼ Contribution Mailing Address PO Box 1940 Transaction ID: 323500 Date of Disbursement this Period City State Zip Code Amount of Each Disbursement this Period 1500.00 City State Zip Code Amount of Each Disbursement this Period 1500.00 City State PA 16507 Contribution 1500.00 Contribution Other (specify) ▼ Other (specify) ▼ Contribution Contribution State: PA Disbursement F						Transaction ID	014557
City State Zip Code Qupland CA 91785 Purpose of Disbursement 011 Candidate Name 011 Cardidate Name 011 Cardidate Name 011 Cardidate Name Disbursement For: 2006 Y Y Y Office Sought: X House President Disbursement For: 2006 K Primary General Other (specify) V Contribution Category/ Transaction ID: 323500 Date of Disbursement Disbursement Mailing Address PO Box 1940 City State Zip Code Erie PA 16507 Purpose of Disbursement 011 Candidate Name Disbursement For: 2006 Y Y Y Y Office Sought: X House Disbursement For: 2006 City Senate Primary General Contribution Cardidate Name President Other (specify) Cont	В.	Dreier For Congress				Date of Disburs	ement
Upland CA 91785 Purpose of Disbursement Contribution 011 011 Candidate Name David Dreier 011 Category/ Type 011 Office Sought: X House Senate Disbursement For: President 2006 State: CA District: 26 Other (specify) Contribution Full Name (Last, First, Middle Initial) Transaction ID: 323500 Date of Disbursement C. People For English Tansaction ID: 323500 Date of Disbursement Mailing Address PO Box 1940 100 100 011 City State Zip Code Amount of Each Disbursement this Period Erie PA 16507 1500.00 Purpose of Disbursement Contribution 011 Category/ Type 1500.00 Office Sought: X House Disbursement For: 2006 Senate President Other (specify) Contribution Candidate Name Disbursement For: 2006 Contribution State: PA District: 3 Disbursement For: 2006 Contribution							
Contribution 011 Contribution 011 Category/ David Dreier X Office Sought: X President Disbursement For: 2006 State: CA District: 26 Full Name (Last, First, Middle Initial) C People For English Transaction ID: 323500 Mailing Address PO Box 1940 City State Erie PA Purpose of Disbursement Other (specify) Contribution 011 Category/ Y 2 0 0 5 Amount of Each Disbursement this Period Contribution 011 Category/ Type Office Sought: X House Disbursement For: 2006 Contribution 011 Category/ Type Office Sought: X House Senate Disbursement For: Other (specify) Contribution State: PA District: 3		Upland				Amount of Each	
David Dreier Type Office Sought: X House Disbursement For: 2006 Senate President Other (specify) ▼ Contribution State: CA District: 26 Transaction ID: 323500 Date of Disbursement Full Name (Last, First, Middle Initial) Transaction ID: 323500 Date of Disbursement C People For English Transaction ID: 323500 Date of Disbursement Mailing Address PO Box 1940 10 ° 20 ′ ¥ 20 ° 5 Amount of Each Disbursement this Period City State Zip Code Amount of Each Disbursement this Period 1500.00 Purpose of Disbursement Ontribution 011 Category/ 1500.00 Office Sought: X House Disbursement For: 2006 Contribution Office Sought: X House Disbursement For: 2006 Contribution State: PA District: 3 Other (specify) ▼ Contribution		Contribution				L	1000.00
Senate X Primary General Contribution State: CA District: 26 Other (specify) ✓ Contribution Full Name (Last, First, Middle Initial) Transaction ID: 323500 Date of Disbursement Mailing Address PO Box 1940 10 ^M / 20 ^O / 2005 Amount of Each Disbursement this Period City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement 011 Category/ 1500.00 Contribution 011 Category/ Type Office Sought: X House Disbursement For: 2006 Contribution Senate President Other (specify) Contribution Contribution State: PA District: 3 Other (specify) Contribution Contribution				'			
Full Name (Last, First, Middle Initial) Transaction ID: 323500 People For English Date of Disbursement Mailing Address PO Box 1940 City State Zip Code Erie PA 16507 Purpose of Disbursement 011 Candidate Name 011 Candidate Name Disbursement For: 2006 Senate Primary General Office Sought: X House State: PA District: 3		Senate President	X Primary Gener	al		Contribution	
C. People For English Mailing Address PO Box 1940 Date of Disbursement Mailing Address PO Box 1940 10 20 Y 2005 City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement 011 Category/ 1500.00 Contribution 011 Category/ Type Office Sought: X House Disbursement For: 2006 Senate Primary General Contribution Contribution State: PA District: 3 Other (specify) V Contribution							
Mailing Address PO Box 1940 10 20 2005 City State Zip Code Amount of Each Disbursement this Period Erie PA 16507 1500.00 Purpose of Disbursement 011 Category/ 1500.00 Contribution 011 Category/ Type Office Sought: X House Disbursement For: 2006 Office Sought: X House Disbursement For: 2006 State: PA District: 3 Contribution Contribution						Date of Disburs	ement
Erie PA 16507 Purpose of Disbursement 011 Contribution 011 Candidate Name 011 Candidate Name Category/ Phil English Disbursement For: 2006 Senate Primary President Other (specify) State: PA District: 3		Mailing Address PO Box 1940				10 2	2005
Contribution 011 Candidate Name 011 Candidate Name Category/ Type Office Sought: X A House Disbursement For: 2006 Senate X President Other (specify) State: PA District: 3						Amount of Each	
Phil English Type Office Sought: X Senate X President Other (specify) State: PA District: 3		Contribution					1500.00
Senate X Primary General Contribution State: PA District: 3 Other (specify) ▼ 4500.00		Phil English		(
SUBTOTAL of Disbursements This Page (optional)		Senate President	X Primary Gener	al		Contribution	
	SI	JBTOTAL of Disbursements This Page (c	potional)		►		4500.00

Any Ir or for N N A. Fr M	MIZED DISBURSEMENTS hformation copied from such Reports and Stateme commercial purposes, other than using the name AME OF COMMITTEE (In Full) ew York Life Insurance Company Political ull Name (Last, First, Middle Initial) einstein For Senate ailing Address 601 S. Glenoaks Blvd., Si ity	and address of any political Action Committee	21b 27 d by any person f	22 X 23 24 25 28a 28b 28c 29 or the purpose of solicating contributions licit contributions from such committee	26 30t
or for N N A. Fr	commercial purposes, other than using the name AME OF COMMITTEE (In Full) ew York Life Insurance Company Political ull Name (Last, First, Middle Initial) einstein For Senate ailing Address 601 S. Glenoaks Blvd., Su	and address of any political Action Committee		licit contributions from such committee Transaction ID: 323494	
A. F.	AME OF COMMITTEE (In Full) ew York Life Insurance Company Political ull Name (Last, First, Middle Initial) einstein For Senate ailing Address 601 S. Glenoaks Blvd., St	Action Committee		Transaction ID: 323494	
А. F	einstein For Senate ailing Address 601 S. Glenoaks Blvd., Si	uite 208			
	,	uite 208		Date of Disbursement	Y
_	ity s			10 20 2005	_
В	urbank	State Zip Code CA 91502		Amount of Each Disbursement this Pe 3000.00	
	urpose of Disbursement ontribution andidate Name ianne Feinstein		011 Category/ Type	3000.00	_
Ō	ffice Sought: House Disburser	nent For: 2006 Primary General Other (specify) V	Туре	Contribution	
-	ull Name (Last, First, Middle Initial) einstein For Senate			Transaction ID: 329037 Date of Disbursement	
M	ailing Address 601 S. Glenoaks Blvd., Si	uite 208		$12^{M} / 15^{D} / 2005^{V}$	ſ
В	urbank	State Zip Code CA 91502		Amount of Each Disbursement this Pe	
$\frac{c}{c}$	urpose of Disbursement ontribution andidate Name ianne Feinstein		011 Category/ Type		
	President	nent For: 2006 Primary General Other (specify) ▼		Contribution	
Fi	tate: CA District: JII Name (Last, First, Middle Initial) ommittee to Re-Elect Vito Fossella			Transaction ID: 314561 Date of Disbursement	
М	ailing Address 104 Hume Avenue			$\begin{array}{c} M & M \\ 0 & 8 \end{array} \begin{array}{c} P & D \\ 1 & 1 \end{array} \begin{array}{c} Y \\ 2 & 0 & 0 \end{array} \begin{array}{c} Y \\ 2 & 0 & 0 \end{array} $	ſ
		State Zip Code VA 22301		Amount of Each Disbursement this Pe	əriod
	urpose of Disbursement ontribution		011	2000.00)
	andidate Name ito J. Fossella		Category/ Type		
	ffice Sought: X House Disburser Senate Y President A District: 13	nent For: 2006 Primary General Other (specify) ▼		Contribution	
SUR	TOTAL of Disbursements This Page (optional)		►	6000.00	D
	AL This Period (last page this line number only)				

S	CHEDULE B (FEC Form 3X)	l lse senr	erate schedule(s)			ORLIN			R:		P	AGE	345 /	395	
IT	EMIZED DISBURSEMENTS	for each	category of the		(check o	only o	í.		~~			1		
		Detailed	Summary Page		┝	21b		22 28a	Х	23 28b	24 280	. –	25 29		26 30b
An	/ Information copied from such Reports and Stateme	ents may no	ot be sold or used	d by	an		n for		rpos					5	000
	or commercial purposes, other than using the name													-	
\square	NAME OF COMMITTEE (In Full)														
$\langle \rangle$	New York Life Insurance Company Political	Action C	Committee												
	Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	32107	6			
А.	Charles A. Gonzalez Congressional Comm	ittee						Date o	of Di			YY	Y	Y	
	Mailing Address 238 West Kings Highway							09		D2	8	2	2 0 Ŏ 5		
	,	State	Zip Code					Amou	nt of	Each	Disburs	emer	nt this F	Perio	d
		TX	78212						÷.				1000.0	0	
	Purpose of Disbursement Contribution				0	11		L.,					1000.0		
	Candidate Name				_	egory/									
	Charlie Gonzalez					/pe									
	Office Sought: X House Disburser	nent For:	2006					Contri	hut	ion					
		Primary	General					Contin	but						
	State: TX District: 20	Other (spe	ecity) 🔻												
	Full Name (Last, First, Middle Initial)														
В.	Hastert For Congress Committee									on ID: sburse	32903 ement	8			
								м	M	D	D /	Y Y		Y	
	Mailing Address P. O. Box 625							12		1	5	2	2 0 Ŏ 5		
		State	Zip Code					Amou	nt of	Each	Disburs	emer	nt this F	Perio	d
		L	60510										2000.0	00	
	Purpose of Disbursement Contribution				0	11		L							_
	Candidate Name					egory/									
	J. Dennis Hastert				Ту	pe									
	Office Sought: X House Disburser		2006					Contri	but	ion					
		Primary Other (spe	General												
	State: IL District: 14	Other (spe	(Ciry)												
	Full Name (Last, First, Middle Initial)							Trane	acti	on ID.	32349	8			
C.	J. D. Hayworth For Congress							Date of							
	Mailing Address 14300 N. Northsight Blvd.	#105					_	[™] 0	M	2	D /	Y Z	2 0 Å 5	Y	
		#105													
		State AZ	Zip Code 85260					Amou	nt of	Each	Disburs	emer	nt this F	Perio	d
	Purpose of Disbursement Contribution				0	4.4		L.					1000.0	00	
	Candidate Name					11 gory/									
	J.D. Hayworth					/pe									
	Office Sought: X House Disburser	nent For:	2006					Contri	hut	ion					
		Primary	General					Jonin	Jul	1011					
	State: AZ District: 5	Other (spe	ecity) 🔻												
Г															
s	JBTOTAL of Disbursements This Page (optional)						•					4	000.0	0	
							•								ī
Γ_0	DTAL This Period (last page this line number only) .			•••••	••••	P	•	L							

S	CHEDULE B (FEC Form 3X)	Lise sene	erate schedule(s)				E NUMB	ER:		P	AGE	346 /	395	
IT	EMIZED DISBURSEMENTS	for each o	category of the Summary Page		(0	heck or 21b	nly one)		23	24		25		26
		Detailed	Summary Fage			27	28a		28b	28c		29		30b
	Information copied from such Reports and Statem or commercial purposes, other than using the name												S	
	NAME OF COMMITTEE (In Full)							inout			COIII			
\rangle	New York Life Insurance Company Politica	I Action C	ommittee											
A.	Full Name (Last, First, Middle Initial)									324506	6			
	Herseth For Congress						Date	of D	isburse		y y	Y	Y	
	Mailing Address P.O. Box 884						11		[′] ^D 0	7	2	0 ð 5		
	,	State SD	Zip Code 57006				Amo	unt o	f Each	Disburs	emen	t this F	Period	b
	Brookings Purpose of Disbursement	50	57006	_	_		- Г	j.			2	2000.0	00	٦
	Contribution				0-	1			0					
	Candidate Name Stephanie Herseth				ate Ty	gory/ pe								
		ment For: Primary	2006 General				Cont	ribut	tion					
	President	Other (spe												
	State: SD District: 0													
В.	Full Name (Last, First, Middle Initial) Herseth For Congress						_		ion ID: isburse	327928 ement	3			
	Mailing Address P.O. Box 884						1 [™] 2	М	[/] ^D 0	5 /	Ý Ž	0 ð 5	Y	
		State SD	Zip Code 57006				Amo	unt o	f Each	Disburs	emen	t this F	Period	t
	Purpose of Disbursement	30	57000		0		1 🗆					350.0	00	
	Contribution Candidate Name				0-									
	Stephanie Herseth				ate Ty	gory/ pe								
	\$ <u>X</u>	ment For: Primary	2006 General				Cont	ribu	tion					
	State: SD District: 0	Other (spe	ciry) V											
C.	Full Name (Last, First, Middle Initial) HILLPAC								ion ID:	324514 ement	4			
	Mailing Address 1717 K ST. NW						1́1	М	/	^D 7	Y Y	0 ð 5	Y	
	Suite 309													
		State DC	Zip Code 20036				Amo	unt o	f Each	Disburs	emen	t this F	Period	Ł
	Purpose of Disbursement Contribution				0-	1	1 L				. 5	5000.0	00	
	Candidate Name					gory/								
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼		,		Cont	ribut	tion					
	State: District:													
s	JBTOTAL of Disbursements This Page (optional) .					•					7	350.0	0	
т	OTAL This Period (last page this line number only)					►								

Any li or for N N A. H M	MIZED DISBURSEMENTS Information copied from such Reports and Statemer commercial purposes, other than using the name IAME OF COMMITTEE (In Full) Iew York Life Insurance Company Political ull Name (Last, First, Middle Initial) Iinojosa For Congress Iailing Address 502 North 11th Street	and address of any political	d by any person f	22 X 23 24 25 2 28a 28b 28c 29 3 for the purpose of solicating contributions
or for N N A. H G	commercial purposes, other than using the name IAME OF COMMITTEE (In Full) Iew York Life Insurance Company Political ull Name (Last, First, Middle Initial) Iinojosa For Congress	and address of any political		
А. Н С	AME OF COMMITTEE (In Full) lew York Life Insurance Company Political ull Name (Last, First, Middle Initial) linojosa For Congress			
А. Н м с	linojosa For Congress			
M C				Transaction ID: 329041
c	lailing Address 502 North 11th Street			Date of Disbursement
				$\begin{bmatrix} M & M \\ 1 & 2 \end{bmatrix} \begin{bmatrix} D & D \\ 1 & 5 \end{bmatrix} \begin{bmatrix} Y & Y & Y \\ 2 & 0 & 0 \end{bmatrix} \begin{bmatrix} Y & Y \\ 2 & 0 & 0 \end{bmatrix}$
IV		State Zip Code		Amount of Each Disbursement this Period
P	Icallen urpose of Disbursement	TX 78501		2000.00
C	ontribution		011	
	andidate Name Ruben Hinojosa		Category/ Type	
	tate: TX District: 15	nent For: 2006 Primary General Other (specify) V		Contribution
	ull Name (Last, First, Middle Initial)			Transaction ID: 329045
B. Ir	npact America			Date of Disbursement
M	lailing Address 1331 H Street, NW 12th Floor			
	,	Citate Zip Code		Amount of Each Disbursement this Period
P	urpose of Disbursement	20000	v v	5000.00
_	contribution candidate Name		011 Category/ Type	
	office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼		Contribution
	tate: District: ull Name (Last, First, Middle Initial)			
~	nvestment Company Institute PAC			Transaction ID: 327934 Date of Disbursement
Μ	lailing Address 1401 H Street, NW Suite 1200			$12^{M} 12^{M} 10^{D} 10^{D} 10^{V} 2005^{V}$
	ity S	State Zip Code DC 20005		Amount of Each Disbursement this Period
	urpose of Disbursement		011	5000.00
_	andidate Name		Category/ Type	
	tate: District: Disburser	nent For: Primary General Other (specify) ▼		Contribution
				12000.00
SUE	BTOTAL of Disbursements This Page (optional)		>	12000.00

S	CHEDULE B (FEC Form 3X)	Use seperate	e schedule(s)					IUMBE	R:			PAGE	E 348	/ 395
IT	EMIZED DISBURSEMENTS	for each cate Detailed Sun	gory of the		(i	check (21b 27	ŕ	one) 22 28a	X	23 28b	2	4 3c	25 29	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name													s
	NAME OF COMMITTEE (In Full)		n any political	COIL			SOIIC	IL COILL	IDUI		JIII Suc		millee	
\rangle	New York Life Insurance Company Politica	al Action Com	mittee											
Α.	Full Name (Last, First, Middle Initial) Jobs, Opportunity & Education PAC									on ID: sburse	3290 ement	43		
	Mailing Address 426 C Street, NE							[™] 2	M	1	5	Y	žo ò s	5 [×]
			p Code 0002					Amou	nt o	f Each	Disbu		nt this I	
	Purpose of Disbursement Contribution			_	Q			L.					5000.	00
	Candidate Name Office Sought: House Disburse	ement For:				gory/ pe								
	State: District:	Primary Other (specify	General					Contri	ibut	ion				
	Full Name (Last, First, Middle Initial)							Tropo		an 10.	2200	E 4		
В.	Johnson For Congress							Date		sburse	D /		žoòs	Y
	Mailing Address P.O. Box 1986	<u></u>						09			6			
			p Code 6050					Amou	nt o	f Each	Disbu	rseme	nt this I	Period
	Purpose of Disbursement Contribution				0	11		L.					2000.	00
	Candidate Name Nancy L. Johnson					gory/ pe	_							
	Senate President	ement For: Primary Other (specify	2006 X General) ▼					Contri	ibut	ion				
	State: CT District: 5													
C.	Full Name (Last, First, Middle Initial) Johnson For Congress									sburse	ement		vv	Y
	Mailing Address P.O. Box 1986							1 0		2	2 0 /		2005	5
	New Britain		p Code 6050					Amou	nt o	fEach	Disbu		nt this I 2000.	
	Purpose of Disbursement Contribution Candidate Name				0	-		L					2000.	00
	Nancy L. Johnson					gory/ pe								
	Office Sought: X House Disburse Senate President State: CT District: 5	ement For: Primary Other (specify	2006 X General) ▼					Contri	ibut	ion				
									v	*			9000.	00
	UBTOTAL of Disbursements This Page (optional)					ر ا	-							
L						-								

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					IUMBE	R:			P	AGE	349 /	395	
IT	EMIZED DISBURSEMENTS	for each category of the		(check 7 21b	ŕ	one) 22		23	Г	24	_	25		26
		Detailed Summary Page		┝	27	' –	22 28a	X	23 28b	┢	24 28c	-	25	\square	20 30b
	y Information copied from such Reports and Statem													s	
or	or commercial purposes, other than using the name	e and address of any political	com	۱m	ittee to	solic	cit contr	ibuti	ions f	fron	n such	comi	nittee		
\square	NAME OF COMMITTEE (In Full)	Action Committee													
V	New York Life Insurance Company Politica														
_	Full Name (Last, First, Middle Initial)						Trans	acti	on II	D: 3	32350	3			
Α.	Tim Johnson For South Dakota Inc						Date	_							
	Mailing Address PO Box 1859						1 ^M 0	M	/ D	2 ()	2	2 0 Ò 5	5 [×]	
	,	State Zip Code					Amou	nt o	f Eac	h D	Disburs	emer	nt this I	Perio	d
		SD 57101											1000.	າດ	
	Purpose of Disbursement Contribution			0	11	1	L						1000.		
	Candidate Name				egory/										
	Tim Johnson			Ту	pe										
	5	ment For: 2008 Primary General					Contr	ibut	ion						
	President	Other (specify)													
	State: SD District:														
В.	Full Name (Last, First, Middle Initial)									-	824512	2			
Б.	Stephanie Tubbs Jones For US Congress						Date o	of Di				V N		V	
	Mailing Address 3729 Silsby Rd						^м 11	M		07	7	2	2 0 Ò 5	5	
	,	State Zip Code					Amou	nt o	f Eac	h D	Disburs	emer	nt this I	Perio	d
	University Heights Purpose of Disbursement	OH 44118										Į	5000.	00	
	Contribution			0	11		L								
	Candidate Name Stephanie Tubbs Jones				egory/ /pe										
		ment For: 2006					Contr	ibut	ion						
	Senate President	Primary X General Other (specify)													
	State: OH District: 11														
_	Full Name (Last, First, Middle Initial)						Trans	acti	on II	D: 3	31622 ⁻	14			
C.	Stephanie Tubbs Jones For US Congress						Date	-							
	Mailing Address 3729 Silsby Rd						^M 2	M	/ D	0 9	9	Y 2	2 o ò 5	5 ^Y	
		State Zip Code					Amou	nt o	f Eac	h D	Disburs	emer	nt this I	Perio	d
		OH 44118							Ū.			_!	5000.	าก	
	Purpose of Disbursement Voided Check dated 11/07/2005			0	11	1	<u> </u>						5000.		
	Candidate Name Stephanie Tubbs Jones		Ca	ate	egory/ vpe										
	5 X	ment For: 2006					Voide	d C	hecl	k d	ated 1	1/07	7/_		
	Senate	Primary X General					2005	. 0		ŭ		1,01	,		
	State: OH District: 11	Other (specify)													
Г										-					
s	UBTOTAL of Disbursements This Page (optional) .				. 1	►	L.			0		1	000.0)0	
_T	OTAL This Period (last page this line number only)								Ū.						
Ľ'				••••		-									

S	CHEDULE B (FEC Form 3X)	Use sepera	ate schedule(s)		-	•·· -··			R:		P	AGE	350 /	395	5
IT	EMIZED DISBURSEMENTS	for each ca	ategory of the ummary Page												
		Detailed St	unnary Fage		21b 22 X 23 24 25 27 28a 28b 28c 29										30b
	y Information copied from such Reports and Statem or commercial purposes, other than using the name										S				
	NAME OF COMMITTEE (In Full)			30110		ibuti			com	millee					
\rangle	New York Life Insurance Company Politica	Action Co	mmittee												
_	Full Name (Last, First, Middle Initial)										329035	5			
А.	Stephanie Tubbs Jones For US Congress								of Di	isburse		~ ~		V	
	Mailing Address 3729 Silsby Rd							1 2		1	^D 3	' <u>2</u>	0 0 5		
	,		Zip Code					Amou	nt o	f Each	Disburs	emen	it this F	Peric	bd
	University Heights Purpose of Disbursement	ЭН	44118	_	_							Ę	5000.0	00	
	Contribution		0	11		L	0								
	Candidate Name Stephanie Tubbs Jones	egory/ /pe													
	Office Sought: X House Disburser		2006					Contri	but	ion					
	Senate President	Primary Other (speci	X General												
	State: OH District: 11		<i>,</i>												
B	Full Name (Last, First, Middle Initial)										321082	2			
Ъ.	Pennsylvanians For Kanjorski								of Di M	isburse		y y	, y	Y	
	Mailing Address 103 South Hanover Stree	t						09		2	8 /	<u></u> 2	0 0 5		
		State PA	Zip Code 18634					Amou	nt o	f Each	Disburs	emen	it this F	Peric	bd
	Purpose of Disbursement	Λ	10034	_	_							1	1000.0	00	
	Contribution					11									
	Candidate Name Paul E. Kanjorski					egory/ /pe									
	Office Sought: X House Disburse	nent For: Primary	2006 General					Contri	but	ion					
	President	Other (speci													
	State: PA District: 11														
C.	Full Name (Last, First, Middle Initial) Sue Kelly For Congress										324513	3			
								M		isburse		Y Y	Y Y	Y	
	Mailing Address PO Box 599							11		0	7	2	0 0 5		
		State VY	Zip Code 10536					Amoui	nt o	f Each	Disburs	emen	it this F	Peric	bd
	Purpose of Disbursement Contribution				0	11		L.				. 1	1000.0	00	
	Candidate Name Sue W. Kelly			Ca	ate	egory/ /pe									
	President	nent For: Primary Other (speci	2006 General ify) ▼					Contri	but	ion					
	State: NY District: 19							_							
s	JBTOTAL of Disbursements This Page (optional)					. 🕨						7	000.0	0	
	OTAL This Period (last page this line number only)						•								
Ľ'					••••										

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s)				NUMBE	R:		P	AGE	351 /	395
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,	<u>`</u> 2	ck only 21b	22	X	23	24		25	26
Any Information copied from such Reports and Statem	anto move not be cald as use	dby		27	28a		28b	280		29	30
or for commercial purposes, other than using the name											5
NAME OF COMMITTEE (In Full)											
New York Life Insurance Company Politica	Action Committee										
Full Name (Last, First, Middle Initial)					Trans	sacti	on ID:	32793	1		
A. Pete King For Congress Committee						-	sburse				_
Mailing Address Post Office Box 1428					12	M /	^D 0	5 /	Ý Ž	0 0́ 5	Y
	tate Zip Code				Amou	int of	Each	Disburs	ement	t this P	Period
											20
Purpose of Disbursement	urpose of Disbursement ontribution										00
Candidate Name			011 ategor	×/							
Peter T. King			Type	y/							
Office Sought: X House Disburse	nent For: 2006	I			Contr	ند بما :					
	Primary General				Contr	ibut	ION				
President	Other (specify)										
State: NY District: 3											
Full Name (Last, First, Middle Initial) B. Kolbe For Congress							on ID: sburse	32007	4		
					М		D	D /	Y Y	Y	Y
Mailing Address P O Box 31568					09			9	2	0 ð 5	
	tate Zip Code				Amou	int of	Each	Disburs	ement	t this P	Period
	AZ 85751	-							1	000.0	0
Purpose of Disbursement Contribution			011		L				·	000.0	
Candidate Name Jim Kolbe		Ca	ategor Type	у/							
Office Sought: X House Disburse	nent For: 2006				Contr	ibuti	ion				
	Primary General				Conti	ibut					
State: AZ District: 8	Other (specify)										
Full Name (Last, First, Middle Initial)					_	- *		00105	_		
C. Jon Kyl For U.S. Senate							on ID: sburse	32108 ement	5		
					[™] 9	Μ /	2	8 /	Y Y 2	0 ð 5	Y
Mailing Address Post Office Box 10246					0.9			0	~	005	
	itate Zip Code Z 85064				Αποι	int of	Each	Disburs	ement	t this P	Period
Purpose of Disbursement				_					1	000.0	00
Contribution			011								
Candidate Name Jon Kyl			ategor Type	у/							
Office Sought: House Disburse	nent For: 2006	I			Cant	ند بما :					
X Senate X	Primary General				Contr	IDUT	ion				
President	Other (specify)										
State: AZ District:											
SUBTOTAL of Disbursements This Page (optional)				•					4	000.0	0
SUBTUTAL OF DISDUISEMENTS THIS FAGE (OPTIONAL)				<u> </u>		-					-
TOTAL This Period (last page this line number only)											

S	CHEDULE B (FEC Form 3X)	Lise sene	erate schedule(s)					IUMBE	R:		P	AGE	352 /	395
IT	EMIZED DISBURSEMENTS	for each o	category of the Summary Page		(i	check (21b 27	ŕ	one) 22 28a	X	23 28b	24 28c		25 29	
	y Information copied from such Reports and Sta													S
	or commercial purposes, other than using the r			COII			SOIC	at contr	ibuti		JIII SUCII	COITII	muee	
\rangle	New York Life Insurance Company Poli	tical Action C	ommittee											
~	Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	32902	7		
А.	Larson For Congress								of Di	sburse		V		V
	Mailing Address 29 Ruff Circle							1 2		1	^D 3	' 2	2 0 Å 5	
	City	State	Zip Code					Amou	nt of	Each	Disburs	emer	nt this F	Period
	Glastonbury	CT	06033									-	1000.0)0
	Purpose of Disbursement Contribution			0	11		L							
	Candidate Name John B. Larson			C	ate	gory/ pe								
	Office Sought: X House Disb Senate President	ursement For: X Primary Other (spe	2006 General cify) ▼					Contri	ibut	ion				
	State: CT District: 1													
В.	Full Name (Last, First, Middle Initial) Ron Lewis For Congress									on ID: sburse	327930 ement	0		
	Mailing Address PO Box 307							^M 2	M	^D 0	5 /	Ύ2	2 0 Å 5	Y
	City Elizabethtown	State KY	Zip Code 42702					Amou	nt of	Each	Disburs			
	Purpose of Disbursement Contribution				0	11		L.					1000.0	00
	Candidate Name Ron Lewis					egory/ pe								
	Senate President	ursement For: X Primary Other (spe	2006 General cify) ▼					Contri	but	ion				
	State: KY District: 2													
C.	Full Name (Last, First, Middle Initial) Friends Of Joe Lieberman									sburse	314562 ement	2		
	Mailing Address PO Box 231294 State House Square							0 ^M 8	M	[□] 1	D / 1	Ý Ž	2 0 Ò 5	Y
	City Hartford	State CT	Zip Code 06123					Amou	nt of	Each	Disburs	-		-
	Purpose of Disbursement Contribution				Ŏ	11		L.					3000.0	00
	Candidate Name Joseph I. Lieberman					gory/ pe								
	X Senate President	ursement For: X Primary Other (spe	2006 General cify) ▼					Contri	ibut	ion				
	State: CT District:													
s	UBTOTAL of Disbursements This Page (option	nal)					-					5	000.0)0
Т	OTAL This Period (last page this line number of	nly)				Þ	•							

		B (FEC Form 3	- Use	seperate schedule(s)		OR LINE		R:	PA	AGE 353	3 / 395
IT	emized di	SBURSEMEN	TS for ea Deta	ach category of the iled Summary Page			21b 27	22 28a	X 23 28b	24 28c	25 29	26
		ied from such Reports a irposes, other than usin										
) }	NAME OF COM	•	-									<u> </u>
v		First, Middle Initial)						Trans	action ID	: 314563	;	
А.	Friends Of Joe	e Lieberman							of Disburs			N.
	Mailing Address	PO Box 231294 State House Squ						08	M / D	1	ŹOŎ	5
	City Hartford		State CT	Zip Code 06123				Amou	nt of Each	n Disburse	ement this	Period
	Purpose of Disb	ursement	01	00123							500	0.00
	Contribution					0-	11					
	Candidate Name Joseph I. Lieb				C	Cate Ty	gory/ pe					
	Office Sought: State: CT	HouseXSenatePresidentDistrict:	Disbursement Formation Primate					Contri	bution			
	Full Name (Last,	First, Middle Initial)						Trans	action ID	: 313516		
В.	Maloney For C	Congress						Date o	of Disburs	ement		Y
	Mailing Address	49 East 92nd St	reet					07	2	28	ŹOŎ	5
	City New York		State NY	Zip Code 10128				Amou	nt of Each	n Disburse		
	Purpose of Disb Contribution	ursement				0-	11				1000	.00
	Candidate Name Carolyn B. Ma				C	Cate Ty	gory/ pe					
	Office Sought: State: NY	X House Senate President District: 14	Disbursement For X Primar Other					Contri	bution			
		First, Middle Initial)						Trans	action ID	: 320060		
C.	Maloney For C	Congress							of Disburs			
	Mailing Address	49 East 92nd St	reet					0 [™] 9	M / D	6 /	ŹOŎ	5 [°]
	City New York		State NY	Zip Code 10128				Amou	nt of Each	n Disburse	ement this	Period
	Purpose of Disb Contribution	ursement			Γ	0.	11		a a		2500	.00
	Candidate Name Carolyn B. Ma				C	Cate Ty	gory/ pe					
	Office Sought: State: NY	X House Senate President District: 14	Disbursement F		•			Contri	bution			
•		bursements This Page	(optional)					· ·	ų ų	• • •	4000	.00
		d (last page this line nu					▶		• •	• • •		
		m 3X) Rev. 02/2003	(III)EI OIIIY)									

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)			ORLI		-	R:		P	AGE	354 /	395	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	, 		check o 21b 27	ć	ne) 22 28a	X	23 28b	24 280		25 29		26 30k
	y Information copied from such Reports and Staten or commercial purposes, other than using the nam												S	
	NAME OF COMMITTEE (In Full)	e and address of any politica	CON		illee lo	SOLCI	it contr	ibuli		JIII SUCII	COIII	muee		
\rangle	New York Life Insurance Company Politica	al Action Committee												
<u> </u>	Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	32904	0			
А.	Maloney For Congress							of Di	sburse		X X		X	
	Mailing Address 49 East 92nd Street						12		1	5 /	2	2 0 Å 5	Ť	
	City	State Zip Code					Amou	nt of	fEach	Disburs	emer	nt this F	Period	1
	New York Purpose of Disbursement	NY 10128	_	_		_					-	1000.0	00	٦
	Contribution			0	11		L						0	
	Candidate Name Carolyn B. Maloney				egory/ /pe									
	Office Sought: X House Disburse Senate President	ement For: 2006 Primary X General Other (specify)					Contri	but	ion					
	State: NY District: 14													
В.	Full Name (Last, First, Middle Initial) Martinez For Senate								on ID: sburse	32006 ement	8			
	Mailing Address 11 South Bumby Avenue	Suite 200					^м 9	M	^D 1	6 /	Y 2	2 0 ò 5	Y	
	City	State Zip Code					A.m.o.u	at at	- Cook	Disburs		t this T		
	Orlando	FL 32803					Amou		Each	DISDUIS	emer		enou	-
	Purpose of Disbursement Contribution			0	11	1	L.					1000.0	00	
	Candidate Name Mel Martinez				egory/ /pe									
	X Senate X President	ement For: 2010 Primary General Other (specify) ▼				(Contri	but	ion					
	State: FL District:													
C.	Full Name (Last, First, Middle Initial) McCrery for Congress								on ID: sburse	31348 ement	8			
	Mailing Address Post Office Box 52956						^м 7	M	D2	D /	ř ž	2 0 Ò 5	Y	
	City Shreveport	State Zip Code LA 71135					Amou	nt of	fEach	Disburs	emer	nt this F	eriod	
	Purpose of Disbursement Contribution			0	11	1	L.				2	2000.0	00	
	Candidate Name Jim McCrery			ate	egory/ /pe									
		ement For: 2006 Primary General Other (specify)					Contri	but	ion					
					•						4	000.0	0	٦
F	UBTOTAL of Disbursements This Page (optional)					-						550.0		4
Т	DTAL This Period (last page this line number only)				Þ	•	<u> </u>							

S	CHEDULE B (FEC Form 3X)	Lise sene	erate schedule(s)		OR LIN	-		R:		F	AGE	355 /	395	
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		check or 21b		22	Х	23	24		25		26
—					27		28a		28b	280		29		30b
	y Information copied from such Reports and Statem or commercial purposes, other than using the name												S	
	NAME OF COMMITTEE (In Full)		 											
$\langle \rangle$	New York Life Insurance Company Politica	al Action C	Committee											
_	Full Name (Last, First, Middle Initial)					1	Trans	acti	on ID:	31351	3			
А.	McCrery for Congress								sburse				_	
	Mailing Address Post Office Box 52956						[™] 7 ′	M /	^D 2	8	Y 2	20 0 5	Y	
	,	State	Zip Code				Amoui	nt of	Each	Disburs	emer	nt this F	Perio	d
	Shreveport	LA	71135	 		_						1000.0	n	
	Purpose of Disbursement Contribution			0	11		<u> </u>					1000.0		_
	Candidate Name		_	gory/										
	Jim McCrery		Ту	pe										
		ement For: Primary Other (spe	2006 General			C	Contri	but	ion					
	State: LA District: 4		· · · · ·											
_	Full Name (Last, First, Middle Initial)					1	Trans	acti	on ID:	31351	4			
В.	McCrery for Congress						Date c	of Di	sburse	ement				
	Mailing Address Post Office Box 52956						[™] 7 ′	M	^D 2	8 /	Y	2 0 Å 5	Y	
	City Shreveport	State LA	Zip Code 71135				Amoui	nt of	Each	Disburs	emer	nt this F	Perio	b
	Purpose of Disbursement Contribution			0	11		<u> </u>					1500.0	00	
	Candidate Name Jim McCrery				gory/ pe									
	Office Sought: X House Disburse Senate President	ement For: Primary Other (spe	2006 X General			C	Contri	but	ion					
	State: LA District: 4	ourior (ope	(), (), (), (), (), (), (), (), (), (),											
C.	Full Name (Last, First, Middle Initial) McNulty For Congress Committee								on ID: sburse	31456 ement	0			
	Mailing Address P.O. Box 1560			 			0 [™] 8 ′	M	^D 1	^D /	YZ	2 0 Å 5	Y	
	City Green Island	State NY	Zip Code 12183	 			Amoui	nt of	Each	Disburs	emer	nt this F	Perio	b
	Purpose of Disbursement Contribution			0	11							2000.0	00	
	Candidate Name Michael R. McNulty				gory/ pe									
		ement For: Primary Other (spe	2006 General ecify) ▼			C	Contri	but	ion					
				 							_			
s	JBTOTAL of Disbursements This Page (optional)			 	•						4	500.0	0	
т	DTAL This Period (last page this line number only)			 	►				-					

S	CHEDULE B (FEC Form 3X)		OR LIN			R:		P	AGE	356 /	395			
IT	EMIZED DISBURSEMENTS	Use seperate schedule(s) for each category of the		(check o	ć.	í.		I			05		
		Detailed Summary Page		┝	21b		22 28a		23 28b	24 28c	Η	25 29		26 30b
An	y Information copied from such Reports and Statemo	ents may not be sold or used	d by a	an							contri		Ц ;	
or f	or commercial purposes, other than using the name	and address of any political	com	۱m	ittee to	solicit	contri	butio	ons fro	m such	comn	nittee		
Ν	NAME OF COMMITTEE (In Full)													
V	New York Life Insurance Company Political	Action Committee												
~	Full Name (Last, First, Middle Initial)					Т	rans	actio	on ID:	324510)			
А.	McNulty For Congress Committee							_	sburse					
	Mailing Address P.O. Box 1560						11	M /	^D 0	^D 7	źź	0 0́ 5	Y	
	,	State Zip Code				ŀ	Amou	nt of	Each	Disburs	ement	t this P	erio	d
		NY 12183				- 1					2	2000.0	0	
	Purpose of Disbursement Contribution			0	11			0				.000.0		_
	Candidate Name			_	egory/									
	Michael R. McNulty			Ту	pe									
	Office Sought: X House Disburser	ment For: 2006 Primary General				С	ontri	buti	on					
	President	Other (specify)												
	State: NY District: 21													
D	Full Name (Last, First, Middle Initial)					Т	rans	actio	on ID:	324509)			
В.	ME Repub. Party Leadership PAC - Federa	l Account						_	sburse				Y.	
	Mailing Address 9 Higgins St						11	M /	^D 0	^D 7	źź	0 ð 5	Ŷ	
	,	State Zip Code				A	Amou	nt of	Each	Disburs	ement	t this P	erio	d
	Augusta Purpose of Disbursement	ME 04330				_ [5	000.0	0	٦.
	Contribution			0	11			0					-	
	Candidate Name				egory/ /pe									
	Office Sought: House Disburser	ment For:		1)	pe	_								
	Senate	Primary General				C	ontri	buti	on					
	President	Other (specify)												
	State: District: Full Name (Last, First, Middle Initial)													
C.	Kendrick Meek Campaign For Congress								on ID: sburse	313515	5			
						_ i	M	и /	2		γŶ	0 ð 5	Y	
	Mailing Address 111 Nw 183rd Street Suite 325						07		2	8	2	005		
		State Zip Code FL 33169				4	Amou	nt of	Each	Disburs	ement	t this P	erio	d
	Purpose of Disbursement Contribution			Ō	11						_ 1	000.0	0	
	Candidate Name				gory/									
	Kendrick Meek			Ту	rpe									
	Office Sought: X House Disburser Senate X President	ment For: 2006 Primary General Other (specify) ▼				С	ontri	buti	on					
_	State: FL District: 17	· · · · ·												
s	JBTOTAL of Disbursements This Page (optional)										8	000.0	0	
Т	DTAL This Period (last page this line number only)				►									

S	CHEDULE B (FEC Form 3X)		-	E NUMBE	R:		P	AGE	357 /	395				
IT	EMIZED DISBURSEMENTS	Use seperate for each cate Detailed Sum	gory of the		(C	heck or 21b	ly one)	X	23	24		25		26
		Detailed Sum	inary Faye			27	28a	\square	28b	28c		29		30b
	y Information copied from such Reports and Statem or commercial purposes, other than using the name												6	
	NAME OF COMMITTEE (In Full)		any pointour	00111				inouti			COMM	inteo		
$\langle \rangle$	New York Life Insurance Company Politica	Action Com	mittee											
Α.	Full Name (Last, First, Middle Initial) Friends of Gregory Meeks								on ID: sburse	314556 ment	6			
	Mailing Address 219-10 South Conduit Av	enue					0 ^M 8	M	D 1	D /	Ý Ý	0 ð 5	Y	
	City	State Zir	o Code				Amo	int of	Each	Disburse	ement	this P	eriod	4
	,		1413						East	Biobarot	-			
	Purpose of Disbursement Contribution				01	1					3	000.0	. 00	
	Candidate Name Gregory W. Meeks				ate Ty	gory/ be								
	President	nent For: Primary Other (specify)	2006 General ▼				Cont	ribut	ion					
	State: NY District: 6													
В.	Full Name (Last, First, Middle Initial) Michaud For Congress							of Di	sburse			X	X	
	Mailing Address 213 Lisbon Street						0 9	M	^D 2	B /	źź	0 ð 5	Y	
			o Code 4240				Amo	unt of	Each	Disburse				t
	Purpose of Disbursement Contribution				01	1					1	000.0	00	
	Candidate Name Michael Michaud				ate Ty	gory/ be								
	Office Sought: X House Disburse Senate X President	nent For: Primary Other (specify)	2006 General ▼				Cont	ribut	ion					
	State: ME District: 2													
C.	Full Name (Last, First, Middle Initial) Richard E. Neal For Congress								sburse	323501 ment				
	Mailing Address 76 Magnolia Terrace						1 ^M 0	M	^D 2	D /	°2	0 ð 5	Y	
			o Code 1108				Amo	unt of	Each	Disburse	ement	this P	erioc	ł
	Purpose of Disbursement Contribution				01	1					3	000.0	00	
	Candidate Name Richard E. Neal				ate Ty	gory/ be								
	Office Sought: X House Disburse Senate Y President State: MA District: 2	nent For: Primary Other (specify)	2006 General ▼				Cont	ribut	ion					
									• •		70	0.00	0	7
	UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only)					►		-	• •	* *			-	
L''					••••	-								_

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					UMBE	R:			PAG	E 358	/ 395	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		() [check o 21b	ć	one) 22		23	□ 2	4 T	25		26
		Detailed Summary Page			27		28a	$\widehat{}$	28b		8c	29		30b
	y Information copied from such Reports and Stateme or commercial purposes, other than using the name													
	NAME OF COMMITTEE (In Full)		COII			SOIIC		IDUI		om su		mmuee		
$ \rangle$	New York Life Insurance Company Political	I Action Committee												
	Full Name (Last, First, Middle Initial)						Turne			017	205			
Α.	New Republican Majority Fund								sburs	ement	95	v v	×	
	Mailing Address 201 North Union Street Suite 530						0 8		2	2 4	Ľ	²0Ò	5	
	,	State Zip Code VA 22314					Amou	nt o	Each	ı Disbı	irsem	ent this	V V	_
	Purpose of Disbursement Contribution			0	11		L.					5000	.00	
	Candidate Name				egory/ /pe									
	Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼					Contri	ibut	ion					
	State: District:													
В.	Full Name (Last, First, Middle Initial) NO DAK PAC							of Di	sburs	ement)55	.,		
	Mailing Address P.O. Box 75214						0 9	M	1	6	Y	² o ò	5 [°]	
		State Zip Code DC 20013-5214					Amou	nt o	Each	ı Disbu	irsem	ent this	v v	_
	Purpose of Disbursement Contribution			0	11							5000	.00	
	Candidate Name				egory/ /pe									
	Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼					Contri	ibut	ion					
	State: District:													
C.	Full Name (Last, First, Middle Initial) North Dakota Democratic NPL - Federal Ac	ccount					Trans Date of			: 3269 ement	926			
	Mailing Address 1902 East Divide						[™] 1	М	D 1	8	Y	žo ò	5 [×]	
		State Zip Code ND 58501					Amou	nt o	Each	ı Disbu	irsem	ent this	Period	_
	Purpose of Disbursement Contribution			Ō	11							5000	.00	
	Candidate Name				egory/ /pe									
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) V					Contri	ibut	ion					
										• •	1	5000	.00	7
\vdash	UBTOTAL of Disbursements This Page (optional)					-		-						
Т	DTAL This Period (last page this line number only)					•	L.							

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)			E NUMBER:		PA	AGE 3	859/3	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,		check or 21b 27	1 22 X 28a	23 28b	24 28c		25	26 30k
An	y Information copied from such Reports and Statem	ents may not be sold or us	ed by	i an						-	
or f	or commercial purposes, other than using the name	and address of any politic	al cor	mm	ittee to s	solicit contribut	ions fror	m such o	commit	tee	
\mathbb{N}	NAME OF COMMITTEE (In Full)										
V	New York Life Insurance Company Politica	l Action Committee									
<u> </u>	Full Name (Last, First, Middle Initial)					Transact	ion ID: (313517	,		
А.	PRYCE Project					Date of D				V	V
	Mailing Address 1155 21st Street NW Suite 300					07	28	8	20	ò 5	1
	,	State Zip Code				Amount o	f Each [Disburse	ement th	his Pe	eriod
	Washington Purpose of Disbursement	DC 20036	1_			-		i i	10	00.0	0
	Contribution			0	11						
	Candidate Name		c	Cate	egory/						
				Ту	/pe	_					
	Office Sought: House Disburse Senate	ment For: Primary Genera	I			Contribut	tion				
	President	Other (specify)									
	State: District:										
в.	Full Name (Last, First, Middle Initial) Pryce For Congress					Transacti					
						Date of D	/ D	D /)	(Y	Y	Y
	Mailing Address 145 E. Rich Street					12	1;	3	20	٥́5	
	,	State Zip Code OH 43215				Amount o	f Each [Disburse	ement th	his Pe	eriod
	Purpose of Disbursement	UN 43215	1_	_					20	00.0	0
	Contribution			0	11						
	Candidate Name Deborah Pryce		C		egory/ /pe						
		ment For: 2006				Contribut	tion				
	Senate X President	Primary Genera Other (specify)									
	State: OH District: 15										
C.	Full Name (Last, First, Middle Initial) Rangel For Congress					Transact					
	Mailine Address - DO D - 5577					1 1 ^M	/ 1	D / 1	źŋ	ŏ 0 5	Y
	Mailing Address PO Box 5577 Manhattanville Station								20	00	
		State Zip Code NY 10027				Amount o	f Each [Disburse	ement th	his Pe	eriod
	Purpose of Disbursement Contribution		Г	0	11				50	00.0	0
	Candidate Name Charles B. Rangel		C	Cate	egory/ /pe						
	Office Sought: X House Disburse Senate President	ment For: 2006 Primary X Genera Other (specify) ▼			<u>.</u>	Contribut	tion				
_	State: NY District: 15	× • • • •									
s	JBTOTAL of Disbursements This Page (optional) .								800	0.0	0
т	OTAL This Period (last page this line number only)				►						

S	CHEDULE B (FEC Form 3X)	Use seperate sc	hedule(s)			E NUMBE	R:	PA	AGE 36	60/3	95			
IT	EMIZED DISBURSEMENTS	for each categor Detailed Summa	y of the	Ir	(check or 21b	nly one)	X 23	24	25	5 Г	26			
		Detailed Sulfillia	iry Faye		27	28a	28b	28c	29		30b			
	y Information copied from such Reports and State or commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full)		iy political c											
\rangle	New York Life Insurance Company Politi	cal Action Commit	ttee											
~	Full Name (Last, First, Middle Initial)						action ID:							
А.	Reynolds for Congress						of Disburse	ement		v v				
	Mailing Address PO Box 15388 Pittsford					0 8	<u> </u>	ĭ ′	20	05				
	City Rochester	State Zip C NY 146				Amou	nt of Each	Disburse	ement th	is Pe	riod			
	Purpose of Disbursement			_		-			100	0.00)			
	Contribution			()11									
	Candidate Name Thomas M. Reynolds				egory/ ype									
	Senate President		2006 General 7			Contr	ibution							
	State: NY District: 26													
В.	Full Name (Last, First, Middle Initial) Reynolds for Congress						action ID: of Disburse		2					
								5 /	ź0	о́б	1			
	Mailing Address PO Box 15388 Pittsford													
	City Rochester	State Zip C NY 146				Amou	nt of Each	Disburse	ement th	is Pe	riod			
	Purpose of Disbursement					1 L.			100	0.00)			
	Contribution Candidate Name Thomas M. Reynolds			Ca)11 egory/ ype									
	J A		2006 General			Contr	ibution							
	State: NY District: 26													
C.	Full Name (Last, First, Middle Initial) Reynolds for Congress					Date	action ID: of Disburse	ement	;					
	Mailing Address PO Box 15388 Pittsford					1 ²	M / D	5	20	0 ⁵				
	City Rochester	State Zip C NY 146				Amou	nt of Each	Disburse	ement th	is Pe	riod			
	Purpose of Disbursement Contribution			()11	٦ L.			100	0.00)			
	Candidate Name Thomas M. Reynolds			Ca	egory/ ype									
	Senate President		2006 General		<u>.</u>	Contr	ibution							
—	State: NY District: 26								300	0 00				
S	JBTOTAL of Disbursements This Page (optiona)			🕨				300	0.00				
Т	OTAL This Period (last page this line number on	у)			. 🕨									
S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)			-		UMBE	R:		P	AGE	361 /	395	
--------------	-----------------------------------------------------------	---------------------------------------------------	---	-----------	-------------	-------	------------------	-------	------------------	------------	------	-----------	-------	-----
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			heck o	ć	22		23	24		25		26
An	y Information copied from such Reports and Statem	onto movinot ho cold or upor			27	n for	28a		28b	28c		29		30b
	or commercial purposes, other than using the name												5	
	NAME OF COMMITTEE (In Full)													
\backslash	New York Life Insurance Company Politica	I Action Committee												
_	Full Name (Last, First, Middle Initial)						Trans	actio	on ID:	329042	2			
А.	Mike Ross For Congress								sburse					
	Mailing Address P.O. Box 360						12	M /	1	5	ž	2 0 Å 5	Y	
	,	State Zip Code					Amou	nt of	Each	Disburs	emen	nt this F	Perio	d
		AR 71857										1000.0	0	
	Purpose of Disbursement Contribution			0.			<u> </u>					1000.0	0	
	Candidate Name				gory/									
	Michael Ross			Ту										
	Senate X	ment For: 2006 Primary General					Contri	buti	ion					
	State: AR District: 4	Other (specify)												
	Full Name (Last, First, Middle Initial)						_							
В.	Santorum 2006								on ID: sburse	321088	3			
							М	м /	D	D /	Y Y	(Y	Y	
	Mailing Address One Tower Bridge Suite						10		0	4	2	2 0 Ò 5		
		State Zip Code PA 19428					Amou	nt of	Each	Disburs	emen	nt this F	Perio	d
	Purpose of Disbursement	13420	_	_		_						1000.0	00	
	Contribution			0.	1									_
	Candidate Name Rick Santorum			ate Ty	gory/ pe									
		ment For: 2006					Contri	buti	ion					
	X Senate President	Primary X General Other (specify)												
	State: PA District:													
	Full Name (Last, First, Middle Initial)						Trane	activ	on ID.	31348	2			
C.	Friends Of Sessions Senate Committee Inc								sburse		,			
	Mailing Address P O Box 4278					_	0 ^M 7	M /	□2	D /	Ý ž	2 0 Å 5	Y	
							<u> </u>							
		State Zip Code					Amou	nt of	Each	Disburs	emen	nt this F	Perio	d
		AL 36103				_					-	1000.0	0	٦.
	Purpose of Disbursement Contribution			0.	11		<u> </u>							_
	Candidate Name Jeff Sessions		C	_	gory/									
		ment For: 2008 Primary General					Contri	buti	ion					
	President	Other (specify)												
_	State: AL District:	· · · · ▼						_					_	
s	UBTOTAL of Disbursements This Page (optional) .				►	•					3	000.0)0	
						-		-			-		-	7
Т	DTAL This Period (last page this line number only)				•	•	L.							

S	CHEDULE B (FEC Form 3X)	Use seperate sched	lule(s)				R:	PA	AGE 362	2 / 395	
IT	EMIZED DISBURSEMENTS	for each category of	the		check on 21b	ly one)	X 23	24	25	20	6
		Detailed Summary F	age		27	28a	28b	28c	29		0 0b
	y Information copied from such Reports and Stateme										_
or	or commercial purposes, other than using the name	and address of any p	olitical co	omm	ittee to s	olicit contri	outions fro	m such o	committe	e	
$ \rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Political	Action Committee	-								
V	New York Life insurance Company Political		5								
_	Full Name (Last, First, Middle Initial)					Transa	action ID:	324511			
А.	Pete Sessions For Congress 2006						f Disburse				
	Mailing Address P.O. Box 38585					11	¹ / ^D 0	7	200	5	
		State Zip Code)			Amour	t of Each	Disburse	ment this	s Period	
		TX 75238				-			2000	00	1
	Purpose of Disbursement Contribution			0	11				2000	.00	1
	Candidate Name				egory/						
	Pete Sessions				/pe						
	Office Sought: X House Disburser		-			Contril	oution				
	Senate X President	Primary Ger Other (specify)	neral								
	State: TX District: 32										
	Full Name (Last, First, Middle Initial)					Transa	action ID:	335711			_
В.	Friends Of Clay Shaw						f Disburse				
	Mailing Address 2600 N. 14th Street Caus	eway				08	[′] ^D 3	^D / Y	ź o ŏ	5 [°]	
		State Zip Code -L 33062	9			Amour	t of Each	Disburse	ment this	s Period	
	Purpose of Disbursement			-					-1000	0.00	
	Voided Check Originally Dated 4/14/05			ī	11						
	Candidate Name E. Clay Shaw, Jr.				egory/ /pe						
	Office Sought: X House Disburser	nent For: 2006	6			- 		.	l		
		· _	neral			Dated	l Check (4/14/05	Jriginal	iy		
	State: FL District: 22	Other (specify)									
	State: FL District: 22 Full Name (Last, First, Middle Initial)					-		04700			—
C.	Friends Of Clay Shaw						action ID: f Disburse				
						09	1 / DO		źoò	F	
	Mailing Address 2600 N. 14th Street Caus	eway				09	0	0	200	5	
		tate Zip Code)			Amour	t of Each	Disburse	ment this	s Period	
		L 33062				-			1000	00	1
	Purpose of Disbursement Contribution			0	11				1000		1
	Candidate Name		I		egory/						
	E. Clay Shaw, Jr.			T	/pe	_					
	Office Sought: X House Disburser Senate X President		6 neral			Contril	oution				
_	State: FL District: 22										
s	JBTOTAL of Disbursements This Page (optional)				. 🕨				2000	0.00]
Т	OTAL This Period (last page this line number only)				►						

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 363 / 395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	y one) 22 X 23 24 25 26 28a 28b 28c 29 30
	y Information copied from such Reports and Statem or commercial purposes, other than using the name			
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica			
Α.	Full Name (Last, First, Middle Initial) Friends Of Clay Shaw Mailing Address 2600 N. 14th Street Caus	seway		Transaction ID: 329029 Date of Disbursement 1 2 / D D / Y Y Y Y Y 2 0 0 5
	City	State Zip Code FL 33062		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name E. Clay Shaw, Jr.		011 Category/	2000.00
	Office Sought: X House Disburse	ment For: 2006 Primary General Other (specify) ▼	Туре	Contribution
в.	Full Name (Last, First, Middle Initial) Shelby For U S Senate			Transaction ID: 326925 Date of Disbursement
	Mailing Address Post Office Box 1091			$\begin{array}{c} \stackrel{M}{1}1 \\ \stackrel{M}{1}1 \\ \stackrel{M}{1} \\ \stackrel{M}{1}$
	Tuscaloosa	State Zip Code AL 35403		Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution Candidate Name Richard C. Shelby		011 Category/ Type	2000.00
	°	ment For: 2010 Primary General Other (specify)		Contribution
C.	Full Name (Last, First, Middle Initial) Simmons For Congress			Transaction ID: 321079 Date of Disbursement
	Mailing Address P.O. Box 268 Drawer 271	1		M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Stonington	State Zip Code CT 06378		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name		011 Category/	2000.00
	Robert R. Simmons		Туре	
		ment For: 2006 Primary General Other (specify) ▼		Contribution
s	UBTOTAL of Disbursements This Page (optional) .		····· •	6000.00
т	OTAL This Period (last page this line number only)		►	
FF(Schedule B (Form 3X) Rev. 02/2003			

ITEMIZED DISBURSEMENTS	S(CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER:	PAGE 364 / 395
ar 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) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initia) A Simmons For Congress Maling Address P.O. Box 268 Drawer 271 Oftic Suggit: X House Office Suggit: X House Disbursement For: 2006 Full Name (Last, First, Middle Initia) B Louise Staughter Re-Election Committee Maling Address P.O. Box 366 City State City State City Other (specify) ▼ Full Name (Last, First, Middle Initia) C andidate Name Contribution Contributi Contribution Contribution Co	IT	EMIZED DISBURSEMENTS	for each category of the	21b	22 🗙 23	
NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) A Simmons For Congress Maling Address P.O. Box 268 Drawer 271 City State Purpose of Disbursement 011 Contribution 011 Cardidate Name Disbursement For: Office Sought: X House Persodent Disbursement For: Office Sought: X House President Disbursement For: State: Transaction ID: 324508 Data of Disbursement Onter (specify) B Louise Slaughter Re-Election Committee Maling Address P.O. Box 366 City State: Purpose of Disbursement 011 Cardidate Name Disbursement For: 2006 City State: Zip Code Maling Address P.O. Box 366 Office (specify) ▼ Cardidate Name Disbursement For: 2006 City X House Disbursement For: 2006 City Senate Pirmary General						
A. Simmons For Congress Date of Disbursement Mailing Address P.O. Box 268 Drawer 271 City State Storington CT City State Cardidate Name Calegory Robert R. Simmons 011 Office Sought: X House Disbursement Disbursement For: Cardidate Name Calegory Robert R. Simmons Disbursement For: Office Sought: X House State: CT Disbursement For: Cardidate Name Calegory Full Name (Last, First, Middle Initial) B. B. Louise Slaughter Re-Election Committee Mailing Address P.O. Box 366 City State Purpose of Disbursement 011 Cardidate Name Disbursement For: Contribution 011 Cardidate Name Full Name (Last, First, Middle Initial) Purpose of Disbursement 011 Cardidate Name Calegory Contribution 011 Cardidate Name Senate Primary General		NAME OF COMMITTEE (In Full)				
City State Zip Code Amount of Each Disbursement this Period Contribution Contribution 1000.00 Contribution Contribution 1000.00 Contribution Contribution Contribution Contribution Senate President Contribution Contribution Contribution Contribution Contribution State: CT District: 2 Disbursement For: 2006 Full Name (Last, First, Middle Initial) B. Coluse Slaughter Re-Election Committee Contribution Mailing Address P.O. Box 366 If 1 If 1 If 2 0 5 City State Zip Code Amount of Each Disbursement If 1 If 2 0 5 City State Zip Code Amount of Each Disbursement Contribution If 1 If 1 If 2 0 5 Colice Sought: X House Disbursement For: 2006 Contribution If 1 Contribution If 1 If 2 0 5 Contribution Senate President Disbursement For: 2006 <t< td=""><td>Α.</td><td></td><td></td><td></td><td>Date of Disburser</td><td>nent</td></t<>	Α.				Date of Disburser	nent
Stonington CT 06378 Purpose of Disbursement Contribution 011 1000.00 Candidate Name Robert R. Simmons 011 1000.00 Office Sought: X House Senate Disbursement For: President 2006 Full Name (Last, First, Middle Initial) Contribution Contribution B. Louise State: CT District: 2 Contribution Mailing Address P.O. Box 366 Transaction ID: 324508 Date of Disbursement City Fairport NY 14450 Amount of Each Disbursement this Perior 1000.00 Office Sought: X House Disbursement For: Purpose of Disbursement 011 Category/ Type 1000.00 Office Sought: X House Disbursement For: President 2006 Contribution Contribution Cortification Discording Senate Disbursement For: President 2006 Contribution Contribution City Senate Disbursement For: President 2006 Amount of Each Disbursement City State: NY District: 28 Amount of Each Disbursement 200.5 City Senate Office Sought: House Z		Mailing Address P.O. Box 268 Drawer 271				5 2005
Outpool of Debusement Contribution 011 Category/ Type Office Sought: X House Senate Disbursement For: President 2006 X Primary Contribution B Louise State: CT District: 2 Disbursement For: President 2006 X Primary Contribution Mailing Address P.O. Box 366 Transaction ID: 324508 Date of Disbursement Transaction ID: 324508 B Louise State; CT Other (specify) State Zip Code NY Transaction ID: 324508 Previous NY 14450 Amount of Each Disbursement this Perior Contribution 011 Category/ Type 1000.00 Office Sought: X House Senate Disbursement For: Prevident 2006 X Primary General Other (specify) Contribution C Friends of Gordon Smith Disbursement For: Prevident 2006 X Prevident Transaction ID: 320056 C Friends of Gordon Smith Other (specify) Amount of Each Disbursement this Perior Mailing Address 5285 S.W. Meadow Road - Suite 181 Amount of Each Disbursement this Perior City State: OR Disbursement For: Prevident 2000 Contribution 011 Category/ Type Contribution Contributi		Stonington			Amount of Each D	
Office Sought: X House Disbursement For: 2006 Contribution State: CT District: 2 Contribution Contribution B. Louise Slaughter Re-Election Committee Transaction ID: 324508 Date of Disbursement Mailing Address P.O. Box 366 Transaction ID: 324508 Date of Disbursement City State: Zip Code Amount of Each Disbursement this Period Purpose of Disbursement 011 Category/ Type Office Sought: X House Disbursement For: 2006 Contribution 011 Category/ Type Contribution Cardidate Name Disbursement For: 2006 Contribution Contribution State: NY Disbursement For: 2006 Contribution Contribution State: NY Disbursement For: 2006 Contribution Contribution Ctity State: President Other (specify) Transaction ID: 320056 Date of Disbursement this Period City State: State Zip Code Amount of Each Disbursement ther: <		Contribution Candidate Name		Category/		1000.00
B. Louise Slaughter Re-Election Committee Mailing Address P.O. Box 366 City State Zip Code Fairport NY 14450 Purpose of Disbursement 011 Candidate Name 011 Louise McIntosh Slaughter 011 Office Sought: X House Senate Disbursement For: 2006 Y District: 28 C Friends of Gordon Smith Mailing Address 5285 S.W. Meadow Road - Suite 181 City State Zip Code Lake OSwego OR 97035 Purpose of Disbursement For: 2008 City State Zip Code Lake OSwego OR 97035 Purpose of Disbursement For: 2008 Category/ Type Other (specify) ▼ Office Sought: House Disbursement For: City Senate Primary General Office Sought: House Disbursement For: 2008 Category/ Type Office Sought: House Disbursement For: 2008 <td></td> <td>Office Sought: X House Disburse Senate X President</td> <td>Primary General</td> <td>Гуре</td> <td>Contribution</td> <td></td>		Office Sought: X House Disburse Senate X President	Primary General	Гуре	Contribution	
Mailing Address P.O. Box 366 City State Zip Code Fairport NY 14450 Purpose of Disbursement 011 Candidate Name 011 Louise McIntosh Slaughter 011 Category/ Type Office Sought: X House Senate Disbursement For: 2006 X Primary General Contribution State: NY District: 28 Contribution Full Name (Last, First, Middle Initial) Transaction ID: 320056 C. Friends of Gordon Smith Transaction ID: 320056 Mailing Address 5285 S.W. Meadow Road - Suite 181 City State Zip Code Lake Oswego OR 97035 Purpose of Disbursement O11 Category/ Contribution O11 Category/ Category/ Y 2 0 0 5 Amount of Each Disbursement this Period Disbursement For: 2006 Amount of Each Disbursement this Period Contribution O11 Category/ Y 2 0 0 5 Quice of Disbursement For: 2008 O11 C	в.				Date of Disburser	nent
Fairport NY 14450 Purpose of Disbursement 011 Contribution 011 Candidate Name 011 Louise McIntosh Slaughter 011 Office Sought: X President Other (specify) State: NY District: 28 C Fuil Name (Last, First, Middle Initial) C Freinds of Gordon Smith Mailing Address 5285 S.W. Meadow Road - Suite 181 City State Lake Oswego OR Office Sought: Y Area Other (specify) Office Sought: State Zip Code Amount of Each Disbursement this Period City State Lake Oswego OR Office Sought: House Office Sought: Disbursement For: 2008 Other (specify) Office Sought: Nouse Version Disbursement For: 2008 Contribution State: OR District: Subtrotat: Other (specify) State: OR District		Mailing Address P.O. Box 366				7 2005
Contribution 011 Candidate Name 011 Louise McIntosh Slaughter Disbursement For: 2006 Senate President President Other (specify) State: NY District: 28 Full Name (Last, First, Middle Initial) Transaction ID: 320056 City State Lake Oswego OR Purpose of Disbursement O11 Contribution 011 Category/ Type 011 City State Lake Oswego OR Purpose of Disbursement O11 Contribution 011 Category/ Gordon Smith Disbursement For: 2008 Office Sought: House Y Senate Primary President Disbursement For: 2008 Contribution 011 Category/ Gordon Smith Disbursement For: 2008 Y Senate President Other (specify) Contribution State: OR District: Subtrotal of Disbursements This Page (optional) 4000.00		Fairport			Amount of Each D	
Office Sought: X House Disbursement For: 2006 Contribution State: NY District: 28 Contribution Contribution Full Name (Last, First, Middle Initial) Friends of Gordon Smith Transaction ID: 320056 Date of Disbursement Mailing Address 5285 S.W. Meadow Road - Suite 181 Mailing Address 5285 S.W. Meadow Road - Suite 181 Mailing Address 5285 S.W. Meadow Road - Suite 181 City State Zip Code Amount of Each Disbursement this Period 2000.00 Lake Oswego OR 97035 Amount of Each Disbursement this Period 2000.00 Contribution 011 Category/ Type 2000.00 Office Sought: House Disbursement For: 2008 Office Sought: N House Disbursement For: 2008 Office Sought: N Fresident Other (specify) ▼ Contribution State: OR District: Disbursement For: 2008 SubtrotAL of Disbursements This Page (optional) Material of Disbursements This Page (optional) Material of Disbursements This Page (optional)		Contribution Candidate Name		Category/		1000.00
Full Name (Last, First, Middle Initial) Transaction ID: 320056 C. Friends of Gordon Smith Date of Disbursement Mailing Address 5285 S.W. Meadow Road - Suite 181 City State Zip Code Lake Oswego OR 97035 Purpose of Disbursement 011 Contribution 011 Cardidate Name 011 Condidate Name Disbursement For: 2008 Office Sought: House Disbursement For: 2008 Office Sought: President Other (specify) Contribution State: OR District: 4000.00		Senate X President	Primary General		Contribution	
Mailing Address 5285 S.W. Meadow Road - Suite 181 0 9 1 6 2 0 0 5 City State Zip Code Amount of Each Disbursement this Perior Lake Oswego OR 97035 011 Purpose of Disbursement 011 Category/ Type 2000.00 Candidate Name 011 Category/ Type Contribution Office Sought: House Disbursement For: 2008 President Other (specify) Contribution Contribution State: OR District: 4000.00	C.	Full Name (Last, First, Middle Initial)			Date of Disburser	nent
Lake Oswego OR 97035 Purpose of Disbursement 011 Contribution 011 Candidate Name 011 Candidate Name 011 Candidate Name 011 Candidate Name 011 Office Sought: House X Senate Primary President Other (specify) State: OR District: SUBTOTAL of Disbursements This Page (optional)		Mailing Address 5285 S.W. Meadow Road	I - Suite 181			5 2005
Contribution 011 Candidate Name 011 Candidate Name Category/ Type Office Sought: House X Senate President Other (specify) State: OR District: SUBTOTAL of Disbursements This Page (optional)					Amount of Each I	
Candidate Name Gordon Smith Category/ Type Office Sought: House X Senate President Disbursement For: 2008 State: OR District: Other (specify) Contribution SUBTOTAL of Disbursements This Page (optional)				011		2000.00
Office Sought: House Disbursement For: 2008 Contribution X Senate Primary X General Contribution State: OR District: Other (specify) ✓ 4000.00 SUBTOTAL of Disbursements This Page (optional) ▲ 4000.00				Category/		
		X Senate President	Primary X General		Contribution	
	SI			•		4000.00

S(CHEDULE B (FEC Form 3X)	Use seperate schedule(s))	FOR LINE		PAGE 365 / 395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,	(check only 21b 27	22 X 23 28a 28b	24 25 26 28c 29 30
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam					
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica					
Α.	Full Name (Last, First, Middle Initial) Friends of Gordon Smith				Transaction ID: Date of Disburse	ement
	Mailing Address 5285 S.W. Meadow Roa	d - Suite 181			0 9 1	
	City Lake Oswego	State Zip Code OR 97035			Amount of Each	Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name			011 ategory/		1000.00
	X Senate X President	ement For: 2008 Primary General Other (specify) V		Туре	Contribution	
в.	State: OR District: Full Name (Last, First, Middle Initial) Straight Talk America				Transaction ID: Date of Disburse	
	Mailing Address 200 Park Avenue 26th Floor				10 ^M / ^D 2	
	City New York	State Zip Code NY 10166			Amount of Each	Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name		Ca	011 ategory/ Type		5000.00
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) V	I	1)po	Contribution	
C.	Full Name (Last, First, Middle Initial) Sweeney For Congress				Transaction ID: Date of Disburse	ement
	Mailing Address PO Box 1465				12 ^M /1	3 / Y Y Y Y Y Y Y Y Y Y
	City Clifton Park	State Zip Code NY 12065			Amount of Each	Disbursement this Period
	Purpose of Disbursement Contribution			011		1000.00
	Candidate Name John E. Sweeney			ategory/ Type		
		ement For: 2006 Primary General Other (specify) ▼			Contribution	
	UBTOTAL of Disbursements This Page (optional)					7000.00

ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page Image: Control of the Detailed Summary Page Image: Control of the Detailed Summary Page Image: Control of the Detailed Summary Page Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating contributions from such committee Amage: Control of the purpose of solicating contributions from such committee NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Transaction ID: 323495 New York Life Insurance Company Political Action Committee Transaction ID: 323495 Mailing Address Post Office Box 1994 Image: Control of the Disbursement Mailing Address Post Office Box 1994 Amount of Each Disbursement this I City State Zip Code John S. Tanner Disbursement For: 2006 Contribution President Disbursement For: 2006 City Name (Last, First, Middle Initial) Transaction ID: 313491 B Full Name (Last, First, Middle Initial) Transaction ID: 313491 Date of Disbursement Other (specify) ▼ Amount of Each Disbursement for: City State Transaction ID: 313491 Date of Disbursement Other (specify) ▼ </th <th>SC</th> <th>CHEDULE B (FEC Form 3X)</th> <th>lise sen</th> <th>erate schedule(s)</th> <th></th> <th></th> <th>OR LIN</th> <th></th> <th>-</th> <th>R:</th> <th></th> <th></th> <th>PAGI</th> <th>E 366,</th> <th>/ 395</th>	SC	CHEDULE B (FEC Form 3X)	lise sen	erate schedule(s)			OR LIN		-	R:			PAGI	E 366,	/ 395
or for commercial purposes, other than using the name and address of any political committee NAME CF COMMITTEE (in Full of Sum 2000 and Sum	IT	EMIZED DISBURSEMENTS	for each	category of the			21b		22	Х					
NAME OF COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Transaction ID: 323495 A. Friends Of John Tanner Transaction ID: 323495 Mailing Address Post Office Box 1994 City State Zip Code Union City TN 38281 Purpose of Disbursement 011 Cardidate Name 011 Cardidate Name Disbursement For: 2006 Xate: TN Disbursement For: 2006 State: TN District: 8 Disbursement For: 2006 Bruit Name (Last, First, Middle Initial) Transaction ID: 313491 Date of Disbursement Bruit Name (Last, First, Middle Initial) Transaction ID: 313491 Date of Disbursement Bruit Name (Last, First, Middle Initial) Transaction ID: 313491 Date of Disbursement City State: Zip Code Amount of Each Disbursement fiel Off * 2 0 0 f Cheyenne WY State Zip Code Amount of Each Disbursement fiel Cheyenne WY State: Zip Code Amount of Each Disbursement Contribution Contribution 011															s
New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Friends Of John Tanner Mailing Address Post Office Box 1994 City State Zip Code Union City Transaction ID: 323495 Date of Disbursement 110 ⁴ 20 0 f City State Zip Code Union City TN 38281 Purpose of Disbursement 011 Category Contribution 011 Category Contribution 011 Contribution Candidate Name Disbursement For: 2006 Y President State: TN Disbursement For: 2006 State: TN Disbursement Contribution Contribution B. Friends Of Craig Thomas 0ther (specify) ▼ Contribution Mailing Address 1606 Crook Avenue 011 Contribution City State Zip Code Amount of Each Disbursement the I Craididate Name Disbursement For: 2006 Contribution Craididate Name District: Disbursement For: 2006				ss of any politica	COII			SOLICI	CONT	ibut		om suc		millee	
A. Friends Of John Tanner Date of Disbursement Mailing Address Post Office Box 1994 Image: Contribution Image: Contribution City TN 38281 Amount of Each Disbursement this 1 Orfice Sought: X House Disbursement For: 2006 Office Sought: X House Disbursement For: 2006 Office Sought: X House Disbursement For: 2006 City State: Transaction ID: 313491 Date of Disbursement Mailing Address 1606 Crook Avenue Image: Contribution Contribution City State Zip Code Amount of Each Disbursement Mailing Address 1606 Crook Avenue Image: Contribution Image: Contribution City State Zip Code Amount of Each Disbursement Image: Contribution Category/ Craig Thomas Disbursement For: 2006 Contribution Image: Contribution Contribution Image: Contribution Image: Contribution Image: Contribution Contribution Category/ Craig Thomas Disbursement For: 2006 Image: Contribution <	\rangle	· · · · ·	al Action C	Committee											
Mailing Address Post Office Box 1994	^												95		
City State Zip Code City TN 38281 Purpose of Disbursement 011 Candidate Name 011 John S. Tanner 011 Office Sought: X Purpose of Disbursement 011 Cardidate Name Disbursement For: 2006 State: TN Disbursement For: 2006 Christian President Disbursement For: 2006 State: Transaction ID: 313491 Date of Disbursement Mailing Address 1606 Crook Avenue 011 Category/ Type V 2 0 0 5 Office Sought: House State Zip Code Mailing Address 1606 Crook Avenue 011 Category/ Type V 2 0 0 5 Office Sought: House State Zip Code Anount of Each Disbursement this I Office Sought: House Disbursement For: 2006 Contribution Category/ Type Other (specify) Contribution Contribution Contribution Committee To Re-Elect Ed Towns Transaction ID: 329031 Date of Disbursement this I	А.	Friends Of John Tanner								_			V	v v	V
Union City TN 38281 Purpose of Disbursement 011 Caddidate Name 011 Contribution 011 Cadegory/ Type Contribution Office Sought: X House Disbursement For: 2006 Contribution State: TN District: 8 Other (specify) Image: Contribution Contribution B: Friends Of Craig Thomas Transaction ID: 313491 Date of Disbursement Mailing Address 1606 Crook Avenue 011 Category/ Type Contribution City State Zip Code Amount of Each Disbursement this I Purpose of Disbursement 011 Category/ Type 1000. Office Sought: House Disbursement For: 2006 Contribution Candidate Name Craig Thomas Disbursement For: 2006 Contribution Contribution Committee To Re-Elect Ed Towns X Primary General Contribution City State: WY Disbursement 011 Contribution Transaction ID: 329031 Committee To Re-Elect Ed Towns Mailing Address 438 Lewis Avenue 011 Category/ Type 123 / Y		Mailing Address Post Office Box 1994									2	2 Ŏ	Ľ.	2005	5
Purpose of Disbursement Contribution 011 Category/ Type 2500.1 Office Sought: X House Disbursement For: President 2006 X Primary General Contribution State: TN District: 8 Disbursement For: President 2006 X Primary General Contribution B Full Name (Last, First, Middle Initial) Transaction ID: 313491 Date of Disbursement Transaction ID: 313491 B Friends Of Craig Thomas Mailing Address 1606 Crook Avenue 011 City Amount of Each Disbursement this I Disbursement For: Craig Thomas 011 Category/ Type Amount of Each Disbursement this I Disbursement For: Craig Thomas 0011 Category/ Type Contribution C Full Name (Last, First, Middle Initial) Committee To Re-Elect Ed Towns Disbursement For: Disbursement Contribution 2006 X Primary General Other (specify) Transaction ID: 329031 Date of Disbursement Category/ Type C Full Name (Last, First, Middle Initial) Transaction ID: 329031 Date of Disbursement Contribution Transaction ID: 329031 Date of Disbursement Disbursement C Commit Hee To Re-Elect Ed Towns Mailing Address 438 Lewis Avenue 011 Category/ Type Contribution Office Sought: X House Disbursement For: Senate 2006 X Primary General Contribution O		5							Amou	nt o	f Each	Disbu	rseme	ent this I	Period
Contribution 011 Candidate Name 011 John S. Tanner Disbursement For: 2006 President Disbursement For: 2006 State: TN District: 8 Disbursement For: 2006 Full Name (Last, First, Middle Initial) Transaction ID: 313491 Date of Disbursement B. Friends Of Craig Thomas Mailing Address 1606 Crook Avenue City State Zip Code Amount of Each Disbursement Cheyenne WY 82001 Amount of Each Disbursement this I Purpose of Disbursement 011 Category/ Type Office Sought: House Disbursement For: 2006 X Senate President State: Y primary General Office Sought: House Disbursement For: 2006 Contribution Contribution ctill Name (Last, First, Middle Initial) C Committee To Re-Elect Ed Towns Transaction ID: 329031 Mailing Address 438 Lewis Avenue NY 11233 Amount of Each Disbursement this I Chill Name (Last, First, Middle Initial) C Other (specif				38281	_	_		_						2500.	00
John S. Tanner Type Office Sought: X House Senate President Disbursement For: Other (specify) 2006 X Primary General Other (specify) Contribution Full Name (Last, First, Middle Initial) B. Friends Of Craig Thomas Transaction ID: 313491 Date of Disbursement Mailing Address 1606 Crook Avenue 011 Category/ Type Amount of Each Disbursement this I (arcidiate Name Craig Thomas 011 Category/ Type Office Sought: House President Disbursement For: Other (specify) 2006 X Primary General Other (specify) Contribution Contribution 011 Category/ Type Contribution 011 Category/ Type Contribution Full Name (Last, First, Middle Initial) Disbursement For: X Senate President 2006 X Primary General Contribution Committee To Re-Elect Ed Towns Disbursement For: 1011 Category/ Type 2006 X Primary General Amount of Each Disbursement Mailing Address 438 Lewis Avenue 011 Category/ Type 133 / Y 200 S City Brooklyn NY 11233 Amount of Each Disbursement this I Y 20 S Office Sought: X House Senate Disbursement For: 2006 X Primary General Contribution Office Sought: X House Senate Disbursement For: 20						0	11		L		0				
Senate Y Primary General Contribution State: TN District: 8 Cher (specify) ▼ Contribution B. Friends Of Craig Thomas Transaction ID: 313491 Mailing Address 1606 Crook Avenue 0 7 ^M / 2 0 / 2 0 / 2 0 / 2 0 0 (2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0															
Full Name (Last, First, Middle Initial) Transaction ID: 313491 B. Friends Of Craig Thomas Date of Disbursement Mailing Address 1606 Crook Avenue 01 City State Zip Code Cheyenne WY 82001 Purpose of Disbursement 011 Candidate Name 011 Cardidate Name X Y Senate President Disbursement For: State: WY Disbursement For: Committee To Re-Elect Ed Towns Contribution Mailing Address 438 Lewis Avenue City State City State V Disbursement For: 2006 X Y President State: WY District: Full Name (Last, First, Middle Initial) Committee To Re-Elect Ed Towns Mailing Address 438 Lewis Avenue City State Zip Code Brooklyn NY 11233 Purpose of Disbursement 011 Category/ Edolphus Towns Disbursement For: 2006		Senate X President	Primary	General				(Contri	but	ion				
B. Friends Of Craig Thomas Date of Disbursement Mailing Address 1606 Crook Avenue 0 7 4 2 0 7 2 0 0 5 City State Zip Code Cheyenne WY 82001 Amount of Each Disbursement this I Purpose of Disbursement 011 1000.1 Contribution 011 1000.1 Candidate Name President Disbursement For: 2006 Contribution State: WY District: Other (specify) Contribution State: WY District: Contribution Contribution General Other (specify) Transaction ID: 329031 Date of Disbursement this I State: WY District: Transaction ID: 329031 Date of Disbursement this I Mailing Address 438 Lewis Avenue 011 Category/ Y 2 0 0 5 City State Zip Code Amount of Each Disbursement this I Brooklyn NY 11233 Amount of Each Disbursement this I Purpose of Disbursement 011 Category/ 1000.1 Candidate Name Senate Disbursement For: 2006 Contribution <								_							
Mailing Address 1606 Crook Avenue 0.7 2.0 2.0.5 City State Zip Code Amount of Each Disbursement this I Purpose of Disbursement 011 1000. Candidate Name 011 Category/ Type 1000. Office Sought: House Disbursement For: 2006 X Senate Disbursement For: 2006 Y President Other (specify) Contribution State: WY District: Transaction ID: 329031 Date of Disbursement C Committee To Re-Elect Ed Towns Transaction ID: 329031 Date of Disbursement Mailing Address 438 Lewis Avenue 11233 Amount of Each Disbursement this I City State Zip Code Amount of Each Disbursement this I Mailing Address 438 Lewis Avenue 011 Category/ Type 1000. City State Zip Code Amount of Each Disbursement this I Purpose of Disbursement 011 Category/ Type 1000. Office Sought: X House Disbursement For: 2006 Office Sought: X House	В.								Date o	of D	sburs	ement		V · V	V
Cheyenne WY 82001 Purpose of Disbursement Contribution 011 011 Candidate Name Craig Thomas 011 Category/ Type 011 Office Sought: House X Senate Disbursement For: 2006 Contribution State: WY District: Other (specify) Contribution Full Name (Last, First, Middle Initial) Committee To Re-Elect Ed Towns Transaction ID: 329031 Mailing Address 438 Lewis Avenue 11233 Amount of Each Disbursement this I City State Zip Code NY Amount of Each Disbursement this I Purpose of Disbursement Contribution 011 Category/ Type 1000. Office Sought: X House Disbursement For: 2006 Amount of Each Disbursement this I Contribution 011 Category/ Type 1000. Office Sought: X House Disbursement For: 2006 Contribution Office Sought: X House Disbursement For: 2006 Contribution Office Sought: X House Disbursement For: 2006 Contribution		Mailing Address 1606 Crook Avenue									2	20	Ľ	2005	5
Contribution 011 Candidate Name 011 Category/ Craig Thomas 011 Office Sought: House X Senate President Other (specify) State: WY District: Full Name (Last, First, Middle Initial) Committee To Re-Elect Ed Towns Mailing Address 438 Lewis Avenue City State Brooklyn NY Purpose of Disbursement 011 Candidate Name 011 Candidate Name 011 Candidate Name Disbursement For: 2006 Y Y Office Sought: X X House Disbursement For: 2006 Contribution 011 Cardidate Name Disbursement For: Office Sought: X House Disbursement For: 2006 X Primary General									Amou	nt o	f Each	Disbu	rseme		
Craig Thomas Type Office Sought: House X Senate President Disbursement For: 2006 X Primary General Other (specify) Contribution Full Name (Last, First, Middle Initial) Transaction ID: 329031 Committee To Re-Elect Ed Towns Date of Disbursement Mailing Address 438 Lewis Avenue City State Zip Code Brooklyn NY 11233 Purpose of Disbursement 011 Cardidate Name Disbursement For: 2006 Contribution 011 Cardidate Name Disbursement For: 2006 Office Sought: X House Disbursement For: 2006 Office Sought: X House Disbursement For: 2006 Contribution Office Sought: X House Disbursement For: 2006 Contribution		Contribution				0.	11		L.	0				1000.	00
X Senate X Primary General Contribution State: WY District: Other (specify) ✓ Contribution Full Name (Last, First, Middle Initial) Committee To Re-Elect Ed Towns Transaction ID: 329031 Date of Disbursement Mailing Address 438 Lewis Avenue 12 13 ✓ 2005 City State Zip Code Amount of Each Disbursement this I Purpose of Disbursement 011 Category/ 1000.4 Candidate Name Disbursement For: 2006 Contribution Office Sought: X House Disbursement For: 2006 Y Primary General Contribution Contribution		Craig Thomas					• •								
Full Name (Last, First, Middle Initial) Transaction ID: 329031 Committee To Re-Elect Ed Towns Date of Disbursement Mailing Address 438 Lewis Avenue City State Zip Code Brooklyn NY 11233 Purpose of Disbursement 011 Candidate Name 011 Edolphus Towns Disbursement For: 2006 Office Sought: X House V Y Primary General Other (specify) Other (specify) Contribution		X Senate X	Primary	General				(Contri	but	ion				
C. Committee To Re-Elect Ed Towns Date of Disbursement Mailing Address 438 Lewis Avenue City State Zip Code Brooklyn NY 11233 Purpose of Disbursement 011 Candidate Name 011 Edolphus Towns Disbursement For: 2006 Office Sought: X House Disbursement For: 2006 Contribution 011 Category/ Type Contribution Office Sought: X Primary General Contribution															
City State Zip Code Brooklyn NY 11233 Purpose of Disbursement 011 Contribution 011 Candidate Name 011 Edolphus Towns Disbursement For: 2006 Senate Primary General Office Sought: X Primary General Other (specify) V Contribution Contribution	C.												31		
Brooklyn NY 11233 Purpose of Disbursement Contribution 011 Candidate Name Edolphus Towns 011 Office Sought: X House Disbursement For: 2006 Senate Primary General President Other (specify) ▼		Mailing Address 438 Lewis Avenue							[™] 2	М	^D 1	3	Y	² o ò s	5 ^Y
Contribution 011 Candidate Name Category/ Type Contribution 011 Candidate Name Category/ Type Office Sought: X Y Disbursement For: 2006 Senate X President Other (specify)									Amou	nt o	f Each	Disbu	rseme	ent this I	Period
Edolphus Towns Type Office Sought: X House Disbursement For: Senate X President Other (specify)						0.	11		<u> </u>	0				1000.	00
Senate X Primary General President Other (specify)															
		Senate X President	Primary	General				(Contri	but	ion				
SUBTOTAL of Disbursements This Page (optional)	61						•			v				4500.0	00

S	CHEDULE B (FEC Form 3X)	erate schedule(s)			OR LIN		-	R:		P	AGE	367	395		
IT	EMIZED DISBURSEMENTS	ZED DISBURSEMENTS										_	1 05		~~~
		Detailed	Summary Page		┝	21b 27	Н	22 28a	X	23 28b	24 28c	_	25 29		26 30b
An	y Information copied from such Reports and Statem	lents may n	ot be sold or used	d by	an		n for t		rpos						
	or commercial purposes, other than using the name														
Ν	NAME OF COMMITTEE (In Full)														
/	New York Life Insurance Company Politica	I Action C	Committee												
<u> </u>	Full Name (Last, First, Middle Initial)							Trane	acti		321080	<u></u>			
Α.	Upton For All Of Us									sburse		,			
	Mailing Address P.O. Box 490							0 ^M 9	M	^D 2	8 /	Ý Ž	0 ð 5	5 ^Y	
		State MI	Zip Code 49085					Amou	nt of	Each	Disburs	emen	t this I	Perioc	k
	Purpose of Disbursement Contribution			Г	0	11		L.					000.	00	
	Candidate Name Fred Upton				ate	egory/ /pe									
		ment For: Primary Other (spe	2006 General ecify) ▼				(Contri	ibut	ion					
	Full Name (Last, First, Middle Initial)						+	_							
В.	Committee To Re-Elect Nydia Velazquez							Date o		on ID: sburse	313492 ement		v	V	
	Mailing Address 315 Inspiration Lane							0 7		2	Ů /	' 2	0 Ó 5	5 '	
		State MD	Zip Code 20878					Amou	nt of	Each	Disburs	0			k
	Purpose of Disbursement Contribution				0	11		L.					000.	00	
	Candidate Name Nydia M. Velazquez					egory/ /pe									
	5 <u>X</u>	ment For: Primary Other (spe	2006 General ecify) ▼				0	Contri	ibut	ion					
	State: NY District: 12														
C.	Full Name (Last, First, Middle Initial) Committee To Re-Elect Nydia Velazquez									on ID: sburse	324502 ement	2			
	Mailing Address 315 Inspiration Lane							^M 1	м	^D 0	^D 7	²²²	0 Ó 5	5 ^Y	
		State MD	Zip Code 20878					Amou	nt of	Each	Disburs				ł
	Purpose of Disbursement Contribution				0	11		L.					000.	00	
	Candidate Name Nydia M. Velazquez					egory/ /pe									
		ment For: Primary Other (spe	2006 General ecify) ▼				(Contri	ibut	ion					
												_	000	20	_
s	UBTOTAL of Disbursements This Page (optional) .		L.		-		3	000.(JU						
Т	OTAL This Period (last page this line number only)					►		L							

S	CHEDULE B (FEC Form 3X)		lule(s) FOR LINE NUMBER: PAGE 368 / 395									
IT	EMIZED DISBURSEMENTS	Use seperate schedule(s for each category of the) (check onl	y one) 22 X 23 24 25 26								
		Detailed Summary Page	210	22 X 23 24 25 26 28a 28b 28c 29 30b								
	y Information copied from such Reports and for commercial purposes, other than using th											
$ \rangle$	NAME OF COMMITTEE (In Full)											
V	New York Life Insurance Company P	'olitical Action Committee										
<u> </u>	Full Name (Last, First, Middle Initial)			Transaction ID: 323497								
Α.	Friends Of Weiner			Date of Disbursement								
	Mailing Address PO Box 290-346											
	Mailing Address PO Box 290-346											
	City	State Zip Code		Amount of Each Disbursement this Period								
	Brooklyn	NY 11229										
	Purpose of Disbursement Contribution		011	1000.00								
	Candidate Name		Category/									
	Anthony D. Weiner		Туре									
		isbursement For: 2006		Contribution								
	Senate President	X Primary General Other (specify)										
	State: NY District: 9											
	Full Name (Last, First, Middle Initial)			Transaction ID: 321081								
В.	Jerry Weller for Congress			Date of Disbursement								
				09 / 28 / Y Y Y Y								
	Mailing Address P.O. Box #37											
	City	State Zip Code		Amount of Each Disbursement this Period								
	Joliet	IL 60434		1000.00								
	Purpose of Disbursement Contribution		011	1000.00								
	Candidate Name		Category/									
	Gerald C. Weller		Type									
	Office Sought: X House D	isbursement For: 2006	!	Contribution								
	Senate	X Primary General										
	President	Other (specify)										
	State: IL District: 11											

SUBTOTAL of Disbursements This Page (optional)	►	2000.00
TOTAL This Period (last page this line number only)	►	201850.00
FEC Schedule B (Form 3X) Rev. 02/2003		

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					R:			PA	AGE	369 /	395	
IT	EMIZED DISBURSEMENTS	check o 7 21b	ć.	e) 22		23		24		25		26		
		Detailed Summary Page		27	X	28a		28b	\square	28c		29		30b
	y Information copied from such Reports and Stateme or commercial purposes, other than using the name												5	
	NAME OF COMMITTEE (In Full)		 											
\rangle	New York Life Insurance Company Political	Action Committee												
Α.	Full Name (Last, First, Middle Initial) Mr. Sharif S. Ali							on ID sburs		8929 nt				
	Mailing Address 13710 Hidden Dell Court		 			[™] 2	M	D (09	/ Y	ź	0 ð 5	Y	
	,	State Zip Code TX 77059-3510			/	Amou	nt o	Each	n Dis	burse	-	this F	-	ł
	Purpose of Disbursement Contribution Refund Candidate Name			10								660.0	. 0	
		mont For		egory/ pe										
	Senate President	Primary General Other (specify)			C	ontri	ibut	ion F	Refu	nd				
	State: District: Full Name (Last, First, Middle Initial)		 											
В.	Mr. Kurt Anderson					Date o		on ID sburs	-	9046 nt		v	Y	
	Mailing Address 13038 Village Chase Circ	le				1 2		Ľ.	16	Ĺ	2	0 ð 5		
		State Zip Code FL 33618-8359				Amou	nt o	Each	ו Dis	burse		this F	-	I
	Purpose of Disbursement Contribution Refund		- i	10								333.3	32	
	Candidate Name			gory/ pe										
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) V			C	ontri	ibut	ion F	Refu	nd				
	State: District:													
C.	Full Name (Last, First, Middle Initial) Mr. Thomas W. Blohm							sburs	eme	8930 nt				
	Mailing Address 2816 Broadview Terrace					^M 2	M		09	/ L	ź	0 ð 5	Y	
		State Zip Code MD 21401-7233			1	Amou	nt o	Each	ו Dis	burse	-	this F	-	1
	Purpose of Disbursement Contribution Refund		_	10								540.0	00	
	Candidate Name			gory/ pe										
	Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼			C	ontri	ibut	ion F	Refu	nd				
							v		-			-00		7
s	UBTOTAL of Disbursements This Page (optional)		 		·		-	•	0		15	533.3	52	
Т	DTAL This Period (last page this line number only)		 		•									

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)			-	IE NUMBE	R:		P	AGE	370 /	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(c	heck o 21b 27	nly one) 22 X 28a		23 28b	24 280		25 29	
	y Information copied from such Reports and Statem											s
	or commercial purposes, other than using the name NAME OF COMMITTEE (In Full)		COL	11111	liee los		ibulic	ons inc	om such	COUL	nillee	
\rangle	New York Life Insurance Company Politica	Action Committee										
Α.	Full Name (Last, First, Middle Initial) Mr. Frank A. Boccio					Trans Date			32893 ement	1		
	Mailing Address 280 Atlantic Avenue Apt. 114					1 ^M 2	M /	0	9 /	° ž	0 ð 5	, Y
	City	State Zip Code NY 11518-1130				Amou	nt of	Each	Disburs	emen		
	Purpose of Disbursement Contribution Refund Candidate Name			01 ate	0 gory/						237.5	
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) V		Ту		Contr	ibuti	on R	efund			
в.	Full Name (Last, First, Middle Initial) Ms. Delma Bolden					Trans			32893	2		
	Mailing Address 4567 Merrill Avenue						M /	D	9 /	Ý Ž	0 ð 5	, Y
		State Zip Code CA 94619-2737				Amou	nt of	Each	Disburs	emen		
	Purpose of Disbursement Contribution Refund			01	-						404.0)1
	Candidate Name			ate Ty	gory/ ce	_						
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼				Contr	ibuti	on R	efund			
	State: District: Full Name (Last, First, Middle Initial)					Trans	actic	on ID:	32893	3		
C.	Ms. Celia N. Boyd					Date		sburse		-		_
	Mailing Address 419A Decatur Street					12	M /	0	^D /	Ý Ž	0 ð 5	; ^Y
		State Zip Code NY 11233-1507				Amou	nt of	Each	Disburs	emen		
	Purpose of Disbursement Contribution Refund			01	0	٦ L.					715.9) 0
	Candidate Name			ate Ty	gory/ ce							
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼				Contr	ibuti	on R	efund			
q	JBTOTAL of Disbursements This Page (optional) .				►		v			1	357.4	16

	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)						R:		F	PAGE	371	/ 395	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		F	check o 21b 27		22 28a	\square	23 28b	24		25 29		26 80b
	y Information copied from such Reports and Statem or commercial purposes, other than using the name												S	
	NAME OF COMMITTEE (In Full)													
$\langle \rangle$	New York Life Insurance Company Politica	I Action Committee												
Δ	Full Name (Last, First, Middle Initial)									32893	8			
Λ.	Mr. Jorge Burgoa						М	of D M	sburse		Y	ΥY	Y	
	Mailing Address 3451 Southwest 137 Ave	nue					12		0	9 ⁷		2005	5	
	,	State Zip Code FL 33027-3204					Amou	int o	fEach	Disbur	seme	nt this I	Period	
	Purpose of Disbursement				10		<u> </u>					450.	00	
	Contribution Refund Candidate Name		C	- 0	10 egory/									
					/pe									
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼				(Contr	ibut	ion R	efund				
	State: District:													
В.	Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	32893	9			
ь.	Mr. Clifford G. Canavera							of D M	sburse	ement	Y	y y	Y	
	Mailing Address 448 Pine Point Road						1 2		0	9		žo ò s	5	
	,	State Zip Code KY 40108-7119					Amou	int o	f Each	Disbur	seme	nt this I	Period	
	Purpose of Disbursement Contribution Refund			0	10		L.					275.	00	
	Candidate Name			ate	egory/ vpe									
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼				(Contr	ibut	ion R	efund				
	State: District:													
C.	Full Name (Last, First, Middle Initial) Ms. Cathy Casper						Date	of D	sburse		-1			
	Mailing Address 881 Cupp Ridge Road						[™] 2	М	^D 0	9 ^D	Ŷ	źoós	5 [×]	
		State Zip Code TN 37825-4109					Amou	int o	fEach	Disburs	seme	nt this I	Period	
	Purpose of Disbursement Contribution Refund			0	10							854.	00	
	Candidate Name			ate	egory/									
	Senate President	ment For: Primary General Other (specify) ▼		. 1	<u>177</u>	(Contr	ibut	ion R	efund				
	State: District:								-			v		-
s	UBTOTAL of Disbursements This Page (optional) .						<u> </u>					579.	00	
Т	OTAL This Period (last page this line number only)				►									1

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)				E NUMBI	ER:		P	AGE	372 /	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			спеск о 21b 27	nly one) 22 X 28a		23 28b	24		25 29	26 30b
	y Information copied from such Reports and Statemo or commercial purposes, other than using the name				y persor	n for the p		se of so	blicating	contr	ibution	
	NAME OF COMMITTEE (In Full)						inout			00111		
\rangle	New York Life Insurance Company Politica	Action Committee										
Α.	Full Name (Last, First, Middle Initial) Mr. Jun R. Chen					-	of D	isburse		5		
	Mailing Address 1640 74th Street					1 ^M 2	М	^D 0	9 /	Ŷ Ŷ	0 0 5	, Y
	Brooklyn	State Zip Code NY 11204-5127				Amo	unt o	f Each	Disburs	emen		
	Purpose of Disbursement Contribution Refund Candidate Name			-	10						202.0	0
	Office Sought: House Disburser	ment For			gory/ pe	_						
	Senate President State: District:	Primary General Other (specify)				Cont	ribut	ion R	efund			
	Full Name (Last, First, Middle Initial)											
В.	Mr. Lance Crawford					Date	of D	isburse	D /	-	Ý	Y
	Mailing Address 8290 Lake Drive Apt. 101					1 2			9		2 0 Ŏ 5	
		State Zip Code FL 33166-4670				Amo	unt o	t Each	Disburs	emen	it this F	'eriod
	Purpose of Disbursement Contribution Refund		Γ	0	10	1 L.					660.0	00
	Candidate Name				gory/ pe	_						
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼				Cont	ribut	ion R	efund			
	State: District:											
C.	Full Name (Last, First, Middle Initial) Ms. Cynthia Jo Deberg					Date	of D	isburse		-		X
	Mailing Address 907 Crestridge Drive					1 2	М	0	^D 9	' 2	0 0 5	, T
	Kearney	State Zip Code MO 64060-7174				Amo	unt o	f Each	Disburs	emen		
	Purpose of Disbursement Contribution Refund			0	10						250.0	0
	Candidate Name		Ca	ate	gory/ pe							
	Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) ▼				Cont	ribut	ion R	efund			
s	UBTOTAL of Disbursements This Page (optional)				►					1	112.0	00
Т	OTAL This Period (last page this line number only)				►							

ITEMIZED DISBURSEMENTS for each category of the initial initial initial purpose, other than using the name and address of any political committee to solicit contributions from such committee Any Information copied from such Reports and Statements may not be sold or used by any preson for the purpose of solicit contributions from such committee NAME GC COMMITTEE (In Full) New York Life Insurance Company Political Action Committee Num (Last, First, Middle Initial) Num (Last, First, Middle Initial) Mailing Address 140 E Sonate Oig Gilbort As any other in the using the name and address of any political committee to solicit contributions from such committee Num, Sergy Dorfman Mailing Address 1401 E San Angelo Avenue Oig State Oig State Oig State Office Sought: House Prepose of Disbursement Oither (specify) Office Sought: House District: Disbursement For: Prepose of Disbursement Oither (specify) City State State Oither (specify) Office Sought: House Disbursement Oither (specify)<		CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		PR LINE NUMBER: PAGE 373 / 395					
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) New York Life insurance Company Political Action Committee Full Name (Last, First, Middle Initial) A Malling Address 1401 E San Angelo Avenue Ötiy State Ötiy State Ötiy State Ötig State Ötig State Ötig State Ötig Senate Purpose of Disbursement Other (specify) Contribution Refund Other (specify) State: Distursement For: Office Sought: House Purpose of Disbursement Other (specify) Transaction ID: 328954 Date of Disbursement Cardidate Name Office Sought: House Purpose of Disbursement Cardidate Name Office Sought: House Office Sought: Bisbursement For: Office Sought: House Office Sought: Disbursement For: Office Sought: <th>ITI</th> <th>EMIZED DISBURSEMENTS</th> <th>for each category of the</th> <th>(CHECK</th> <th>22 23</th> <th></th>	ITI	EMIZED DISBURSEMENTS	for each category of the	(CHECK	22 23					
NAME OF COMMITTEE (in Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) A Maling Address 1401 E San Angelo Avenue City State Contribution Refund										
A. Mr. Sergy Dorfman Image: Construction of the constructio		NAME OF COMMITTEE (In Full)								
City State Zip Code Gilbert AZ 85234-3628 Purpose of Disbursement 010 Candidate Name 010 Cattegory Type Office Sought: House B. Mr. Clay Doss, Jr. Disbursement Mailing Address 215 Lakeside Drive City State Office Sought: House President Disbursement For: Candidate Name Q10 Category: Y 2 0 0 5 Purpose of Disbursement Q10 Category: Type Office Sought: House President Disbursement For: City Senate Primary Office Sought: House Disbursement For: City Senate President Other (specify) Contribution					Date of Disburs	sement				
Gilbert AZ 85234-3628 Purpose of Disbursement Contribution Refund 010 Category/ Type 364.11 Office Sought: House Senate Disbursement For: President 010 Category/ Type Contribution Refund State: District: Other (specify) Contribution Refund Contribution Refund B. Mr. Clay Doss, Jr. Mailing Address 215 Lakeside Drive Transaction ID: 328954 Date of Disbursement City State Zip Code GA 30144-3097 Amount of Each Disbursement this Peri Category/ Type Office Sought: House President Disbursement For: Other (specify) Other (specify) Contribution Refund Category/ Type Other (specify) Contribution Refund Contribution Refund Category/ Type Other (specify) Contribution Refund Contribution Refund Category/ Type Disbursement For: Other (specify) Contribution Refund Transaction ID: 328955 Date of Disbursement City State: Disbursement For: North 101 Other (specify) Amount of Each Disbursement this Peri Category/ Type Office Sought: House Senate President Disbursement For: Contribution Refund Other (specify) Contribution Refund<		Mailing Address 1401 E San Angelo Aven	ue			09 / <u>2005</u>				
Ordpose of Disbursement 010 Candidate Name 010 Office Sought: House State: District: District: Disbursement For: Other (specify) Contribution Refund Reful Name (Last, First, Middle Initial) Contribution Refund B. Mr. Clay Doss, Jr. Mailing Address 215 Lakeside Drive City State Kennesaw GA Office Sought: House Disbursement For: 010 Contribution Refund 010 Candidate Name Disbursement For: Office Sought: House District: Disbursement For: Office Sought: House Name (Last, First, Middle Initial) Transaction ID: 328955 Candidate Name Contribution Refund Chr, Khashayar Dowlatshathi		Gilbert	State Zip Code AZ 85234-3628		Amount of Each					
Office Sought: House Disbursement For: Contribution Refund State: District: Other (specify) ▼ Contribution Refund Full Name (Last, First, Middle Initial) Mr. Clay Doss, Jr. Transaction ID: 328954 Mailing Address 215 Lakeside Drive Image: Contribution Refund City State Zip Code Kennesaw GA 30144-3097 Purpose of Disbursement Other (specify) ▼ Office Sought: House Disbursement For: Gradidate Name Other (specify) ▼ Office Sought: House Disbursement For: State: Disbursement For: General Office Sought: House Disbursement For: State: Disbursement For: General Office Sought: House Disbursement For: State: Disbursement Other (specify) ▼ Contribution Refund Transaction ID: 328955 Date of Disbursement Date of Disbursement City State Zip Code Sherman Oaks CA 91423-4057 Purpose of Disbursement Contribution Refund </td <td></td> <td>Contribution Refund</td> <td></td> <td>Category/</td> <td></td> <td>364.11</td>		Contribution Refund		Category/		364.11				
B. Mr. Clay Doss, Jr. Image: Clay Doss, Jr. Mailing Address 215 Lakeside Drive Image: Clay Doss, Jr. Mailing Address 215 Lakeside Drive Image: Clay Doss, Jr. City State Zip Code Kennesaw GA 30144-3097 Purpose of Disbursement Othor Contribution Refund Othor Cardidate Name Disbursement For: Office Sought: House Senate Primary Office Sought: House District: Disbursement For: Office Sought: House District: Contribution Refund City Senate President Other (specify) State: District: Mailing Address 1430 Benefit Street North 101 CA City State Sherman Oaks CA Senate Disbursement For: Office Sought: House Senate Disbursement For: Office Sought: House Disbursement For: General		Senate President	Primary General	Туре	Contribution F	Refund				
Mailing Address 215 Lakeside Drive 12 0.9 2.005 City State Zip Code Amount of Each Disbursement this Peri Contribution Refund 010 Category/ Type 660.00 Candidate Name Disbursement For: Category/ Type Contribution Refund Office Sought: House Disbursement For: Contribution Refund State: District: Other (specify) ▼ Contribution Refund Full Name (Last, First, Middle Initial) Transaction ID: 328955 Date of Disbursement Mailing Address 14430 Benefit Street Mailing Address 14430 Benefit Street Mailing Address 14430 Benefit Street 010 Category/ Type Ý 2.0 0.5 Y Mailing Address 14430 Benefit Street 010 Category/ Type 554.01 Office Sought: House Disbursement For: 010 Category/ Type 554.01 Office Sought: House Disbursement For: Contribution Refund Contribution Refund Contribution Refund Other (specify) ▼ Contribution Refund Contribution Refund Contribution Refund Gandidate Name Di	-									
Kennesaw GA 30144-3097 Purpose of Disbursement Contribution Refund 010 660.00 Candidate Name 010 Category/ Type 660.00 Office Sought: House Disbursement For: Senate Contribution Refund State: District: Contribution Refund Contribution Refund Keinesaw General Other (specify) Contribution Refund Mailing Address 14430 Benefit Street North 101 Transaction ID: 328955 Date of Disbursement City State Zip Code Amount of Each Disbursement this Peri Sherman Oaks Amount of Each Disbursement this Peri Contribution Refund Contribution Refund 010 Category/ Type 554.01 Office Sought: House Senate Disbursement For: Other (specify) Contribution Refund Contribution Refund Other (specify) Contribution Refund Contribution Refund Candidate Name Disbursement For: Senate Disbursement For: Other (specify) Contribution Refund State: District: Disbursement For: Senate Contribution Refund		Mailing Address 215 Lakeside Drive			12 ^M /	09 [′] ^Y				
Contribution Refund 010 Candidate Name 010 Candidate Name 010 Category' Type Office Sought: House Senate Primary Other (specify) Contribution Refund State: Disbursement For: Full Name (Last, First, Middle Initial) Contribution Refund C. Mr. Khashayar Dowlatshahi Mailing Address 14430 Benefit Street North 101 State City State Sherman Oaks CA Office Sought: House Office Sought: Disbursement For: Contribution Refund 010 Cardidate Name 010 Cardidate Name 010 Cardidate Name Disbursement For: Office Sought: House Disbursement For: Other (specify) Office Sought: Disbursement For: Other (specify) Contribution Refund State: District:					Amount of Each					
Office Sought: House Disbursement For: Contribution Refund State: District: Other (specify) Contribution Refund Full Name (Last, First, Middle Initial) Transaction ID: 328955 Date of Disbursement Mailing Address 14430 Benefit Street M2 M / 0 0 / 2 0 0 5 North 101 State Zip Code City State CA 91423-4057 Purpose of Disbursement 010 Candidate Name 010 Office Sought: House Disbursement For: Senate Office Sought: House Disbursement For: Other (specify) Office Sought: House Disbursement For: Contribution Refund Other (specify) Contribution Refund		Contribution Refund				660.00				
C. Mr. Khashayar Dowlatshahi Date of Disbursement Mailing Address 14430 Benefit Street North 101 Date of Disbursement City State Zip Code 91423-4057 Amount of Each Disbursement this Peri Purpose of Disbursement Contribution Refund 010 Category/ Type Amount of Each Disbursement this Peri Office Sought: House Disbursement For: President 010 Other (specify) Contribution Refund State: District: Other (specify) Image: Contribution Refund Contribution Refund		Senate President	Primary General	Туре	Contribution F	Refund				
North 101 State Zip Code Amount of Each Disbursement this Peri Sherman Oaks CA 91423-4057 Amount of Each Disbursement this Peri Purpose of Disbursement 010 554.01 Candidate Name 010 Category/ Type 554.01 Office Sought: House Disbursement For: Contribution Refund Senate Primary General Contribution Refund State: District: Other (specify) ▼ Contribution Refund					Date of Disburs	sement				
Sherman Oaks CA 91423-4057 Purpose of Disbursement 010 Contribution Refund 010 Candidate Name 010 Office Sought: House Disbursement For: Senate President Other (specify) State: District:						0972005				
Contribution Refund 010 Candidate Name 010 Category/ Type Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) State: District:		Sherman Oaks			Amount of Each					
Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District:		Contribution Refund				554.01				
Senate Primary General President Other (specify) ▼			mont For:		_					
1570.10		Senate President	Primary General		Contribution F	Refund				
SUBTOTAL of Disbursements This Page (optional)	SL	JBTOTAL of Disbursements This Page (optional)				1578.12				

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					R:		PA	AGE	374 /	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			heck or 21b 27	22 X 28a		23 28b	24 28c		25 29	26 30b
	y Information copied from such Reports and Statem or commercial purposes, other than using the name											5
	NAME OF COMMITTEE (In Full)	and address of any pointea	CON				ibuti		JIII SUCIT	John		
\rangle	New York Life Insurance Company Politica	Action Committee										
Α.	Full Name (Last, First, Middle Initial) Ms. Violet Ertel					Date	of Dis	sburse		;		
	Mailing Address 33 Zion Street					12	M /	^D 0	9 /	Ź	0 ð 5	Y
	Kenner	State Zip Code LA 70065-1040				Amou	int of	Each	Disburse			
	Purpose of Disbursement Contribution Refund Candidate Name			01							381.4	ю
	Office Sought: House Disburser	ment For:		Ту	gory/ ce			_				
	Senate President	Primary General Other (specify)				Contr	ibuti	on Re	efund			
	State: District:											
В.	Full Name (Last, First, Middle Initial) Ms. Olivia Fischer					Date		on ID: sburse	328957 ement		Y	Y
	Mailing Address 15461 3 Fathoms Bk					12		0	9	A	0 ð 5	
	Crps Christi	State Zip Code TX 78418-0000				Amou	int of	Each	Disburse		this P 468.1	
	Purpose of Disbursement Contribution Refund Candidate Name			01	0 gory/				a a		400.1	0
				Ту								
	Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼				Contr	ibuti	on Re	efund			
	State: District:											
C.	Full Name (Last, First, Middle Initial) Ms. Susan D'Ettorre Friedman					Date	of Dis	sburse				
	Mailing Address 10923 NW 18th Place					12	M /	^D 0	^D /	Ź	0 ð 5	Ŷ
	Plantation	State Zip Code FL 33322-3455				Amou	int of	Each	Disburse	-		
	Purpose of Disbursement Contribution Refund			01	0		0				210.0	
	Candidate Name				gory/							
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼				Contr	ibuti	on Re	efund			
s	UBTOTAL of Disbursements This Page (optional)				►				• •	10)59.6	6
	OTAL This Period (last page this line number only)				•							

ITEMIZED DISBURSEMENTS for each category of the bealaid Summary Page (b) (b) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	S	CHEDULE B (FEC Form 3X)	Use seperate sched	lule(s)				R:		P	AGE	375 /	395
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME CF COMMITTEE (in Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) A Malling Address 6100 W Stonehedge Drive Apl. 322B City Greenfield W1 State Contribution Refund Contribution Refund Contribution Refund Contribution Refund Office Sought: Provident President Disbursement for: Office Sought: Provident Office Sought: B Malling Address 609 Meadow Willow Drive City State: Disbursement for: Office Sought: House State: Disbursement for: Office Sought: House State: Disbursement for: Contribution Refund Contribution Refund Con	IT	EMIZED DISBURSEMENTS	for each category of	the	F	21b	22		L		\square		
NAME OF COMMITTEE (in Full) New York Life Insurance Company Political Action Committee Full Name (Latt, First, Middle Initial) A. Mr. Kenneth Heise Maling Address 6100 W Stonehedge Drive Apt. 322B City State Cardidate Name 010 Cardidate Name 010 Cardidate Name 010 Cardidate Name 010 Category/ Type State Office Sought: House President Disbursement For: Other (specify) State: Disbursement For: President Office Sought: House President B. Mr. Ernesto Herrera Contribution Refund Maling Address 609 Meadow Willow Drive City State: Disbursement for: Contribution Refund Contribution Refund Cardidate Name 010 Category/ Type Contribution Refund Contribution Refund Contribution Refund Contribution Refund Contribution Refund Cardidate Name Disbursement For: Contribution Refund Contribution Refund Cardidate Name Disbursement For: President Contribution Re													5
New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) Mailing Address 6100 W Stonehedge Drive Apt. 322B City State Cardidate Name 010 State: 010 bisbursement For: Full Name (Last, First, Middle Initial) Transaction ID: 328963 B. Mr. Ernesto Herrera Mailing Address 609 Meadow Willow Drive City State Disbursement for: 010 Cardidate Name 010 Cardidate Name 010 Cardidate Name 010 Office Sought: House			and address of any p		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			indutio	15 110	in such	COMIN	iiiiee	
A Mr. Kenneth Heise Date of Disbursement Mailing Address 6100 W Stonehedge Drive Apt. 322B Date of Disbursement City State Zip Code Greenfield WI 53220-4602 Purpose of Disbursement 010 Contribution Refund 010 Candidate Name Disbursement For: Office Sought: House President District: B Mr. Ernesto Herrera Mailing Address 609 Meadow Willow Drive City State Contribution Refund 010 Candidate Name Transaction ID: 328963 Date of Disbursement Disbursement For: Office Sought: State Paso TX Office Sought: Ose of TX Office Sought: House Disbursement For: Other (specify) ▼ Candidate Name TX Office Sought: House Disbursement For: Other (specify) ▼ Candidate Name Tit Mr. Jostelyn Heslop Miding Address Mailing Address 2	\rangle		Action Committee	9									
City State Zip Code City State Zip Code Purpose of Disbursement 010 Candidate Name 010 Office Sought: House Disbursement For: Other (specify) Full Name (Last, First, Middle Initial) President B. Mr. Ernesto Herrera Mailing Address 609 Meadow Willow Drive City State Zip Code Transaction ID: 328963 Date of Disbursement Other (specify) Mailing Address 609 Meadow Willow Drive City State Zip Code Amount of Each Disbursement this Period Office Sought: House President Disbursement For: Contribution Refund Category/ Type Office Sought: House Disbursement Disbursement For: City State: Disbursement For: Office Sought: House Disbursement For: Office Sought: House Disbursement For: Office Sought: House Disbursement For: Contribution Refund	Α.										2		
Greenfield WI 53220-4602 Purpose of Disbursement 010 Candidate Name 010 Candidate Name 010 Office Sought: House State: Disbursement For: President Other (specify) ▼ Full Name (Last, First, Middle Initial) Transaction ID: 328963 Mailing Address 609 Meadow Willow Drive City State Contribution Refund 010 Candidate Name 010 Candidate Name 010 Candidate Name 010 Cate Opisoursement 112 Contribution Refund 010 Candidate Name 010 Cate Opisoursement 615.15 Chick State Disbursement For: 010 Cate Opisoursement 010 Category/ 7200		Mailing Address 6100 W Stonehedge Drive	e Apt. 322B				[™] 2	M /	^D 0	9 /	řŽ	0 ð 5	Y
Otion Befund Otion Candidate Name 010 Candidate Name Otion Office Sought: House State: District: Full Name (Last, First, Middle Initial) Image: Contribution Refund B. Mr. Ernesto Herrera Mailing Address 609 Meadow Willow Drive City State Disbursement For: Otion Contribution Refund Otion Candidate Name Transaction ID: 328963 Date of Disbursement Disbursement Transaction ID: 328963 Date of Disbursement Otion Contribution Refund Otion Candidate Name Disbursement For: Office Sought: House President Disbursement For: Office Sought: House President Disbursement For: Office Sought: House Transaction ID: 328964 Date of Disbursement Mailing Address 2181 Madison Avenue City State Disbursement For: 010 Candidate Name 010 O							Amou	unt of	Each	Disburse			
Office Sought: House Disbursement For: Contribution Refund State: District: District: Transaction ID: 328963 B. Mr. Encesto Herrera Transaction ID: 328963 Mailing Address 609 Meadow Willow Drive Transaction ID: 328963 City State Zip Code Purpose of Disbursement TX 79922-2216 Purpose of Disbursement 010 Candidate Name Disbursement For: Office Sought: House State: District: Mailing Address 2181 Madison Avenue City State Zip Code Mailing Address 2181 Madison Avenue Mailing Address 2181 Madison Avenue City State Zip Code Mailing Address 2181 Madison Avenue Mount of Each Disbursement this Period Mailing Address 2181 Madison Avenue Mount of Each Disbursement this Period City State Zip Code Amount of Each Disbursement this Period Mailing Address 2181 Madison Avenue Mount of Each Disbursement this Period City Senate Disburse		Contribution Refund] L.					459.9	9
Senate Primary General Other (specify) Other (specify) Full Name (Last, First, Middle Initial) Transaction ID: 328963 Mr. Ernesto Herrera Image: Senate Mailing Address 609 Meadow Willow Drive City State Zip Code 79922-2216 Purpose of Disbursement 010 Cardidate Name 010 Cardidate Name 010 Category/ Type Office Sought: House State: Disbursement For: Office Sought: House State: Disbursement For: Office Sought: House State: Disbursement For: Other (specify) Contribution Refund Mailing Address 2181 Madison Avenue City State Zip Code New York NY 10037-2301 Purpose of Disbursement Other (specify) Amount of Each Disbursement this Period Cardidate Name Disbursement For: Other (specify) Amount of Each Disbursement this Period Mailing Address 2181 Madison Avenue Other		Office Sought: House Disburser					Cont	ributio	on Re	efund			
B. Mr. Ernesto Herrera Mailing Address 609 Meadow Willow Drive City State Zip Code El Paso TX 79922-2216 Purpose of Disbursement 010 Cardidate Name 010 Cardidate Name 010 Category/ Type 615.15 Office Sought: House Disbursement For: Other (specify) Office Sought: Disbursement For: President Other (specify) State: Distoresement Mailing Address 2181 Madison Avenue City State Mailing Address 2181 Madison Avenue City State New York NY NY 10037-2301 Purpose of Disbursement for: Other (specify) Cardidate Name 010 Cardidate Name 010 Cardidate Name 010 Cardidate Name 010 City State Purpose of Disbursement 010 Cardidate Name 010 Cardidate Name Disb		President	·	neral				libutio	51111				
B. Mr. Ernesto Herrera Date of Disbursement Mailing Address 609 Meadow Willow Drive If 2 m / 0 g / 2 0 0 5 Y City State Zip Code Purpose of Disbursement 010 615.15 Candidate Name Disbursement For: 010 Cardidate Name Disbursement For: Contribution Refund Office Sought: House Disbursement For: Contribution Refund State: District: Other (specify) ▼ Contribution Refund Ctip Full Name (Last, First, Middle Initial) Transaction ID: 328964 Date of Disbursement Oig 9 / 2005 Amount of Each Disbursement Mailing Address 2181 Madison Avenue Transaction ID: 328964 City State Zip Code New York NY 10037-2301 Purpose of Disbursement Oilo Category/ Type Office Sought: House Disbursement For: Contribution Refund Candidate Name Oilo Category/ Type Contribution Refund Office Sought: House Disbursement For: Contribution Refund Office Sought: Hous		Full Name (Last, First, Middle Initial)					Tran	sactio	n ID·	328963	3		
City State Zip Code Purpose of Disbursement 010 Candidate Name 010 Candidate Name 010 Candidate Name Disbursement For: President Other (specify) ▼ Full Name (Last, First, Middle Initial) C Mailing Address 2181 Madison Avenue City State New York NY Purpose of Disbursement 010 Candidate Name 010 Cardidate Name Disbursement For: Office Sought: House Senate Primary General 010 Cardidate Name 010 Cardidate Name 010 Category/ Type 010 Office Sought: House	В.						Date	of Dis	burse	ment		٥Å۶	Y
El Paso TX 79922-2216 Purpose of Disbursement Contribution Refund 010 615.15 Candidate Name 010 Category/ Type 615.15 Office Sought: House Disbursement For: Other (specify) Contribution Refund State: District: Other (specify) Contribution Refund Mailing Address 2181 Madison Avenue Transaction ID: 328964 Date of Disbursement Mailing Address 2181 Madison Avenue 12 0 0 9 / 2 0 0 5 × City State Zip Code New York Amount of Each Disbursement this Period Purpose of Disbursement Contribution Refund 010 Category/ Type 429.99 Office Sought: House Disbursement For: Senate Other (specify) ▼ Contribution Refund Office Sought: House Disbursement For: Other (specify) ▼ Contribution Refund Contribution Refund Cardidate Name Disbursement For: Other (specify) ▼ Contribution Refund Contribution Refund State: District: Other (specify) ▼ Contribution Refund Contribution Refund													
Contribution Refund 010 Candidate Name 010 Cadidate Name Disbursement For: Senate Primary General Other (specify) ▼ Contribution Refund Contribution Refund State: District: Full Name (Last, First, Middle Initial) Transaction ID: 328964 C. Mr. Jostelyn Heslop Date of Disbursement Mailing Address 2181 Madison Avenue City State New York NY Purpose of Disbursement 010 Candidate Name 010 Category/ Type 010 Category/ New York State Contribution Refund 010 Category/ Type 010 Category/ New York Disbursement For: Contribution Refund 010 Category/ Type 010 Category/ New York Disbursement For: Senate Primary General Other (specify) ▼ Contribution Refund Category/ Type Other (specify) ▼		El Paso					Amou	unt of	Each	Disburse			
Office Sought: House Disbursement For: Contribution Refund State: District: Other (specify) Contribution Refund Full Name (Last, First, Middle Initial) Transaction ID: 328964 Date of Disbursement Mailing Address 2181 Madison Avenue 12 0 0 9 / 2 0 0 5 City State Zip Code New York NY 10037-2301 Purpose of Disbursement 010 Candidate Name 010 Office Sought: House Disbursement For: Other (specify) Other (specify) Contribution Refund		Contribution Refund									0	015.1	5
Senate Primary General Contribution Refund State: District: Other (specify) Image: Contribution Refund C. Mr. Jostelyn Heslop Transaction ID: 328964 Date of Disbursement Mailing Address 2181 Madison Avenue Image: Contribution Refund City State Zip Code New York State Zip Code New York NY 10037-2301 Purpose of Disbursement Contribution Refund 010 Candidate Name Disbursement For: 010 Office Sought: House Disbursement For: Contribution Refund Office Sought: House Disbursement For: Contribution Refund Other (specify) Image: Contribution Refund Contribution Refund State: District: Other (specify) Contribution Refund				(
Full Name (Last, First, Middle Initial) Transaction ID: 328964 Date of Disbursement Mailing Address 2181 Madison Avenue City State Zip Code New York NY 10037-2301 Purpose of Disbursement Contribution Refund 010 Candidate Name Disbursement For: Senate Primary President Other (specify) State: District:		Senate	Primary Ger	neral			Contr	ributio	on Re	efund			
C. Mr. Jostelyn Heslop Date of Disbursement Mailing Address 2181 Madison Avenue 12 09 2005 City State Zip Code Amount of Each Disbursement this Period New York NY 10037-2301 Amount of Each Disbursement this Period Purpose of Disbursement 010 Category/ 429.99 Contribution Refund 010 Category/ Type Office Sought: House Disbursement For: Contribution Refund State: District: Other (specify) Contribution Refund													
Mailing Address 2181 Madison Avenue 12 09 2005 City State Zip Code Amount of Each Disbursement this Period New York NY 10037-2301 429.99 Purpose of Disbursement 010 429.99 Contribution Refund 010 Category/ Type 429.99 Office Sought: House Disbursement For: Contribution Refund Office Sought: President Other (specify) Contribution Refund State: District: Contribution Refund Contribution Refund	C.										1		
New York NY 10037-2301 Purpose of Disbursement Contribution Refund 010 Candidate Name 010 Candidate Name 010 Office Sought: House Senate Primary President Other (specify) State: District:		Mailing Address 2181 Madison Avenue					[™] 2	M /	^D 0	^D 9	°²2	0 ð 5	Y
Contribution Refund 010 Candidate Name 010 Candidate Name Category/ Type Office Sought: House Senate Primary President Other (specify) State: District:							Amou	unt of	Each	Disburse			
Office Sought: House Disbursement For: Contribution Refund Office Sought: Primary General Contribution Refund State: District: Other (specify) ▼					C	10	- L.					429.9	9
Senate Primary General President Other (specify) ▼													
		Senate President	Primary Ger	neral			Conti	ributio	on Re	efund			
						. 🕨					15	505.1	3
	Ľ	OTAL This Period (last page this line number only)											

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		-	E NUMBE	R:		P	AGE	376 /	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		спеск о 21b 27	nly one) 22 X 28a	\square	23 28b	24	,	25 29	26 30b
	y Information copied from such Reports and Statem or commercial purposes, other than using the name										s
	NAME OF COMMITTEE (In Full)		 								
\rangle	New York Life Insurance Company Politica	Action Committee									
Α.	Full Name (Last, First, Middle Initial) Mr. Matthew Hill				Date	of Di	sburse		5		
	Mailing Address 673 2nd Place S				12	M	D 0	9 /	źź	2 0 Å 5	5 [°]
	Garden City	State Zip Code NY 11530-5203			Amou	unt of	Each	Disburs	emer		
	Purpose of Disbursement Contribution Refund		-	10	L.					202.0	0
	Candidate Name Office Sought: House Disburser	ment For		gory/ pe	_						
	Senate President	Primary General Other (specify)			Conti	ribut	ion R	efund			
	State: District: Full Name (Last, First, Middle Initial)										
В.	Ms. Swee Lin Hines				Date	of Di	sburse	D /		(Y	Y
	Mailing Address 3494 Hines Circle				1 2		1	2		2 0 Ò 5	
		State Zip Code AK 99516-7615			Amou	unt of	Each	Disburs	emer		
	Purpose of Disbursement Contribution Refund		-	10						225.0	00
	Candidate Name			gory/ pe							
	Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼			Contr	ribut	ion R	efund			
	State: District:										
C.	Full Name (Last, First, Middle Initial) Mr. Ronald A. Hoffman Clu				Date	of Di	sburse		6		
	Mailing Address 7 Wilma Drive				12	M	D 0	9 /	2	2 0 Ò 5	5
		State Zip Code NY 14086-2709			Amou	unt of	Each	Disburs	emer		
	Purpose of Disbursement Contribution Refund		0	10						810.0	00
	Candidate Name			gory/ pe							
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼			Conti	ribut	ion R	efund			
s	UBTOTAL of Disbursements This Page (optional)		 	•					_1	237.0	00
	OTAL This Period (last page this line number only)			•							

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)			-	E NUMBE	R:		P	AGE	377 /	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	nly one) 22 X 28a	П	23 28b	24 280		25 29	26 30b
	y Information copied from such Reports and Stateme or commercial purposes, other than using the name											s
K	NAME OF COMMITTEE (In Full)		0011				induti			00111		
\rangle	New York Life Insurance Company Political	I Action Committee										
Α.	Full Name (Last, First, Middle Initial) Mr. Asif Huda						of Di	sburse		8		
	Mailing Address 3625 Santa Elena Circle					12	M	1	^D 2	Ź	0 Å 5	j ^Y
	,	StateZip CodeCA92882-7913				Amou	unt of	Each	Disburs	emen		
	Purpose of Disbursement Contribution Refund			-	10						499.9	97
	Candidate Name				gory/ pe	_						
	President	ment For: Primary General Other (specify) ▼				Contr	ribut	ion R	efund			
	State: District:											
В.	Full Name (Last, First, Middle Initial) Mr. Donald Jackson							on ID: sburse	32896 ment	-		Y
	Mailing Address 1610 S Bonham St.					<u>1</u> ″2		1	2 /	Ż	0 Ŏ 5	5 ⁻
	Amarillo	State Zip Code TX 79102-2410				Amou	unt of	Each	Disburs	emen		
	Purpose of Disbursement Contribution Refund Candidate Name			0							225.4	+2
	Candidate Name				gory/ pe							
		ment For: Primary General Other (specify) ▼				Contr	ribut	ion R	efund			
	State: District:											
C.	Full Name (Last, First, Middle Initial) Mr. Hagop Nerses Kazizian							sburse		0		
	Mailing Address 2516 Redfish Drive					12	M	1	^D 2	Ŷ 2	0 Ŏ 5	, Y
		State Zip Code TX 77591-9242				Amou	unt of	Each	Disburs	emen		
	Purpose of Disbursement Contribution Refund			0.	10						202.0	00
	Candidate Name		Ca	ate	gory/ pe							
		ment For: Primary General Other (specify) V				Conti	ribut	ion R	efund			
s	UBTOTAL of Disbursements This Page (optional)				•						927.3	39
	OTAL This Period (last page this line number only).				•							

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					R:		Р	AGE	378 /	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b	lly one) 22 X 28a		23 28b	24 28c		25 29	26 30b
	y Information copied from such Reports and Stateme or commercial purposes, other than using the name				person	for the pu	rpose	e of so	licating	contrik	outions	
	NAME OF COMMITTEE (In Full)	and address of any pointear	com				ibutic	/13 110	in Such	comm	muce	
\rangle	New York Life Insurance Company Political	Action Committee										
Α.	Full Name (Last, First, Middle Initial) Mr. Tariq N. Khan					Trans Date of		burse		1		
	Mailing Address 4610 Sylvan Glen Drive					^M 2	M /	^D 1	^D 2	°2	0 ð 5	Y
	,	State Zip Code TX 77084-3641				Amou	nt of	Each	Disburs	-		
	Purpose of Disbursement Contribution Refund Candidate Name			01	-						260.0	0
	Office Sought: House Disburser	ment For:		Тур	jory/ je			_	<i>.</i> .			
	Senate President	Primary General Other (specify)				Contri	ibutio	on Re	etund			
	State: District:											
В.	Full Name (Last, First, Middle Initial) Mr. Terry L. Lewis					Date			32897 ment		Y	Y
	Mailing Address 20010 Kingsland					1"2		1	Ž	2	0 ð 5	
	Katy	State Zip Code TX 77450-3005				Amou	nt of	Each	Disburs	v	this P	
	Purpose of Disbursement Contribution Refund Candidate Name			01	0 Jory/						400.0	
				Тур								
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼				Contri	ibuti	on Re	efund			
	State: District:											
C.	Full Name (Last, First, Middle Initial) Mr. Jim Littlefield					Trans Date of	of Dis	burse			X	X
	Mailing Address 11 Potters Avenue					1 2		□ 1	2	Ź	0 ð 5	T
	St. Albans	State Zip Code VT 05478-5121				Amou	nt of	Each	Disburs	-	this P	
	Purpose of Disbursement Contribution Refund Candidate Name			01							520.0	,0
	Calduale Name			агед Тур	lory/ e							
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼				Contri	ibuti	on Re	efund			
_	State: District:											
s	UBTOTAL of Disbursements This Page (optional)				•					12	279.6	8
Т	OTAL This Period (last page this line number only)				►	L.						

S	CHEDULE B (FEC Form 3X)	Use seperate sche	edule(s)				R:	P	AGE 379	/ 395
IT	EMIZED DISBURSEMENTS	for each category of Detailed Summary		F	(check or 21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
	y Information copied from such Reports and Statem or commercial purposes, other than using the name									
\square	NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , , ,								
$\langle \rangle$	New York Life Insurance Company Politica	Action Committe	e							
<u> </u>	Full Name (Last, First, Middle Initial)							: 328975	5	
Α.	Mr. Chien-Te Lu						of Disburs		N N N	X
	Mailing Address 20318 Julliard Drive					12	M / D	1 ^D /	200	5
		State Zip Cod				Amou	nt of Eacl	n Disburse	ement this	Period
		CA 91789	-2433						569	97
	Purpose of Disbursement Contribution Refund			(010				000	
	Candidate Name				egory/					
				Т	уре	_				
	Office Sought: House Disburser Senate		eneral			Contri	bution F	Refund		
	President	Other (specify)	onora							
	State: District:									
в.	Full Name (Last, First, Middle Initial)							: 328978	3	
υ.	Mr. Kutty Mathai						of Disburs	D /	v v v	v
	Mailing Address 3182 Allison Court					1 2		1Ž	Ŷ ŽOŎ	5
	,	State Zip Cod =L 32304				Amou	nt of Eacl	n Disburse	ement this	Period
	Purpose of Disbursement Contribution Refund			()10	1 L.			705	.00
	Candidate Name			Cat	egory/					
	Office Sought: House Disburser Senate		eneral			Contri	bution F	Refund		
	President	Other (specify)								
	State: District:									
C.	Full Name (Last, First, Middle Initial) Mr. Matthew McGuire					Date o	of Disburs)	
	Mailing Address 10401 Cascade Drive					1 ^M 2	M / D.	1 ^D /	Ŷ ŽOŎ	5 [°]
		State Zip Cod TX 76207				Amou	nt of Eacl	n Disburse	ement this	Period
	Purpose of Disbursement Contribution Refund			6)10	1 L.			810	.00
	Candidate Name			Cat	egory/					
	Office Sought: House Disburser Senate President		eneral			Contri	bution F	Refund		
_	State: District:									
s	UBTOTAL of Disbursements This Page (optional)				🕨				2084.	.97
Т	OTAL This Period (last page this line number only)				. 🕨					

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					R:		Р	AGE	380 /	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			heck or 21b 27	22 X 28a		23 28b	24 28c	П	25 29	26 30b
	y Information copied from such Reports and Stateme											5
	NAME OF COMMITTEE (In Full)		0011				loan					
\rangle	New York Life Insurance Company Political	Action Committee										
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas R. Melendy							sburse		1		
	Mailing Address 218 Tirrell Hill Road					1 ^M 2	M /	^D 1	^D 2	ř ž	0 ð 5	Y
	Goffstown I	State Zip Code NH 03045-2727				Amou	int of	Each	Disburs			
	Purpose of Disbursement Contribution Refund Candidate Name			01	-						520.6	07
	Office Sought: House Disburser	ment For:		Ту	gory/ De			_				
	Senate President	Primary General Other (specify) ▼				Contr	ibuti	on Re	etund			
	State: District:											
В.	Full Name (Last, First, Middle Initial) Mr. Lawrence Miller					Date		on ID: sburse	328982 ment		V	Y
	Mailing Address 4 Horseshoe Lane					1 2		1	2	2	0 ð 5	
	Commack I	State Zip Code NY 11725-5507				Amou	int of	Each	Disburs		this P 520.6	
	Purpose of Disbursement Contribution Refund Candidate Name		_	01	0 gory/						520.0	
				Ty								
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼				Contr	ibuti	on Re	efund			
	State: District:											
C.	Full Name (Last, First, Middle Initial) Mr. Mozaffar Morowati					Date	of Dis	sburse				X
	Mailing Address 5736 Wallis Lane					1 ^M 2	M /	D 1	^D [/]	Ź	0 ð 5	Ť
	Woodland Hills	State Zip Code CA 91367-5325				Amou	int of	Each	Disburs	-		_
	Purpose of Disbursement Contribution Refund			01	0						540.3	52
	Candidate Name		Ca	_	gory/							
	Office Sought: House Disburser Senate President State: District:	nent For: Primary General Other (specify) V				Contr	ibuti	on Re	efund			
s	UBTOTAL of Disbursements This Page (optional)				►					15	581.6	6
	OTAL This Period (last page this line number only)				•							

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					R:		Р	AGE	381 /	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		Ē	heck or 21b 27	22 X 28a		23 28b	24 280	\square	25 29	26 30b
	Information copied from such Reports and Statemer or commercial purposes, other than using the name											S
	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Company Politica	I Action Committee										
Α.	Full Name (Last, First, Middle Initial) Mr. Narendra Parikh					Date	of Di	sburse		6		
	Mailing Address 1363 Omara Drive					12	M /	[□] 1	^D 2	Ý Ž	0 ð 5	Y
	Union	State Zip Code NJ 07083-5210				Amou	int of	Each	Disburs	-		
	Purpose of Disbursement Contribution Refund Candidate Name			0.	-						810.0	0
	Office Sought: House Disburser	ment For:		ate Ty	gory/ pe	-						
	Senate President	Primary General Other (specify)				Contr	ibuti	ion Re	efund			
	State: District:											
В.	Full Name (Last, First, Middle Initial) Mr. Brian D. Parker					Date	of Di	sburse			X	X
	Mailing Address 2211 May Wine Lane					12	M /	[□] 1	^D [/]	žŽ	0 ð 5	Ŷ
	O'Fallon I	State Zip Code MO 63366-8242				Amou	int of	Each	Disburs	ement	t this F 440.4	
	Purpose of Disbursement Contribution Refund Candidate Name			0 [.]	0 gory/						440.4	+0
				Ty	• •							
	Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼				Contr	ibuti	ion Re	əfund			
	State: District:											
C.	Full Name (Last, First, Middle Initial) Mr. Bhaveshkumar Patel						of Di	sburse		-	Y	X
	Mailing Address 41-15 50th Street Apt. 1A					1 2		1	^D /	<u>2</u>	0 ð 5	
	Woodside	State Zip Code NY 11377-4300				Amou	int of	Each	Disburs		t this F 468.1	
	Purpose of Disbursement Contribution Refund			0.	0						400.	
	Candidate Name		Ca	_	gory/							
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼				Contr	ibuti	ion R	efund			
s	JBTOTAL of Disbursements This Page (optional)				►					1	718.6	64
	DTAL This Period (last page this line number only)				•					·		

S	CHEDULE B (FEC Form 3X)	Use seperate sch	nedule(s)				R:	PA	GE 382	2 / 395
IT	EMIZED DISBURSEMENTS	for each category Detailed Summar	of the		(check or 21b	ly one)	23	24	25	26
					27	X 28a	28b	28c	29	30
	y Information copied from such Reports and Statem or commercial purposes, other than using the name									
	NAME OF COMMITTEE (In Full)		, pontiour of							
\rangle	New York Life Insurance Company Politica	Action Committ	iee							
_	Full Name (Last, First, Middle Initial)					Trans	action ID:	328990		
А.	Mr. Ulric Phillip						of Disburse		· · · · · · · · · · · · · · · · · · ·	X
	Mailing Address 1860 Flushing Avenue Apt. 3L					1 ^M 2	M / D	2	ź o ò	5
	,	State Zip Co	de 5 1050			Amou	nt of Each	Disburse	ment this	s Period
	Ridgewood Purpose of Disbursement	NY 1138	5-1059						530).02
	Contribution Refund			()10					
	Candidate Name		L	Ca	egory/ ype					
	Office Sought: House Disburser	ment For:		-	76-5	Caratri	huting D	o fu uo ol		
	Senate		General			Contri	bution R	eluna		
	State: District:	Other (specify)								
	State: District: Full Name (Last, First, Middle Initial)									
в.	Mr. JERRY N PHILLIPS						action ID: of Disburse			
						М	M / D	D /)	ź o ò	E Y
	Mailing Address 375 E Manley Avenue Un	it 5				12		2	200	5
		State Zip Co NC 2838	de 7-4900			Amou	nt of Each	Disburse	ment this	Period
	Purpose of Disbursement	NC 2030	7-4900						520	0.70
	Contribution Refund			()10					
	Candidate Name				egory/ ype					
	Office Sought: House Disburser					Contri	bution R	efund		
	Senate President	Primary Other (specify) ▼	General							
	State: District:									
	Full Name (Last, First, Middle Initial)					Trans	action ID:	328992		
C.	Ms. Kimberly Pillow						of Disburse			
	Mailing Address 2503 W River Rd. Ex					[™] 2	M / D 1	^D /)	ź o ŏ	5 [×]
	City	State Zip Co	de			Amou	nt of Each	Disburse	ment this	Period
		MS 3893	0-4947			-				
	Purpose of Disbursement Contribution Refund		1	6)10				416	6.00
	Candidate Name		L	Ca	egory/					
	Office Sought: House Disburse	ment For:			уре	-				
	Senate		General			Contri	bution R	efund		
	President	Other (specify)								
_	State: District:									
s	UBTOTAL of Disbursements This Page (optional)				🕨				1466	6.72
Т	OTAL This Period (last page this line number only)				. 🕨					

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER:	PAGE 383/395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 23	24 25 26 28c 29 30k
	y Information copied from such Reports and Statem for commercial purposes, other than using the name				
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica				
Α.	Full Name (Last, First, Middle Initial) Mr. Mike Presley			Transaction ID: 328 Date of Disbursemen 1 2 1 2 1 2	
	Mailing Address 441 Towne Lake Place				2000
	Montgomery	State Zip Code AL 36117-6013		Amount of Each Disk	
	Purpose of Disbursement Contribution Refund Candidate Name		010 Category/ Type		445.00
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼	Туре	Contribution Refur	ıd
в.	Full Name (Last, First, Middle Initial) Mr. Mark S. Proman			Transaction ID: 328 Date of Disbursemer	•••
	Mailing Address 6383 Northwest 23rd Wa	у		12 ^M /12 ^D /12 ^D	Ý 2005 ^Y
		State Zip Code FL 33496-3611		Amount of Each Disk	
	Purpose of Disbursement Contribution Refund Candidate Name		010 Category/		1404.00
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼	Туре	Contribution Refur	d
C.	Full Name (Last, First, Middle Initial) Ms. Sonia Roman			Transaction ID: 328 Date of Disbursemer	t
	Mailing Address 144 Central Avenue Apt. 2			1 ^M 2 ^M / 1 ^D 2	Ý 2005 [°]
	Jersey City	State Zip Code NJ 07306-2119		Amount of Each Disk	oursement this Period
	Purpose of Disbursement Contribution Refund		010		288.10
	Candidate Name		Category/ Type		
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		Contribution Refur	ıd
					2137.10
	UBTOTAL of Disbursements This Page (optional) . OTAL This Period (last page this line number only)				
<u>ا</u>					

	CHEDULE B (FEC Form 3X)	Use seperate schedul	e(s)				R:		P/	AGE 3	384 / 3	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pa			check or 21b 27	22 X 28a		3 8b	24 28c		25 29	26 30b
	y Information copied from such Reports and Statemory or commercial purposes, other than using the name											
\square	NAME OF COMMITTEE (In Full)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
$\langle \rangle$	New York Life Insurance Company Politica	Action Committee										
Α.	Full Name (Last, First, Middle Initial)								328998	}		
	Mr. Robert Rosenberg					Date o	of Disk M /			YY	Y_	Y
	Mailing Address 171 E 84th Street					12		^D 1	2	2 0	o 5	
	,	State Zip Code NY 10028-20	000			Amou	nt of E	Each I	Disburse	ement tl	his Pe	eriod
	Purpose of Disbursement	10020-20				-				4	74.9	7
	Contribution Refund				10							
	Candidate Name				egory/ /pe							
	Office Sought: House Disburser	ment For:				Contri	ibutio	n Re	fund			
	Senate President	Primary Gene Other (specify)	ral			Contin	ioutio					
	State: District:											
в.	Full Name (Last, First, Middle Initial)								329000)		
Б.	Ms. Rajini Saggar					Date o	of Disk	D		Y Y	Y	Y
	Mailing Address 1783 Somerset Lane					1 2		1	Ž	20	ð 5	
	,	State Zip Code	362			Amou	nt of E	Each I	Disburse	ement tl	his Pe	eriod
	Purpose of Disbursement Contribution Refund		Тг	0	10	1 L.				4	16.0	0
	Candidate Name			Cate	egory/ /pe							
	Office Sought: House Disburser	nent For: Primary Gene	rol			Contri	ibutio	n Re	efund			
	President	Other (specify)	a									
	State: District:											
C.	Full Name (Last, First, Middle Initial) Mr. Arish Kumar Sahani					Trans Date of			329001 ment			
	Mailing Address 54-15 108th Street					[™] 2	M /	^D 1	^D / `	ź ó	٥́5	Y
		State Zip Code NY 11368-39	913			Amou	nt of E	Each I	Disburse	ement ti	his P	eriod
	Purpose of Disbursement Contribution Refund			0	10					5	00.0	4
	Candidate Name			Cate	egory/ /pe							
	Office Sought: House Disburser Senate President	nent For: Primary Gene Other (specify) ▼	ral	- ,		Contri	ibutio	n Re	fund			
_	State: District:											
s	UBTOTAL of Disbursements This Page (optional)				. ►					139	91.0	1
т	OTAL This Period (last page this line number only)				►							

	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)			OR LIN			R:		F	AGE	385 /	/ 395	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		F	21b 27		22 28a		23 28b	24	,	25 29		26 30b
	y Information copied from such Reports and Statem or commercial purposes, other than using the name												s	
	NAME OF COMMITTEE (In Full)		0011				00110				00111			
$\langle \rangle$	New York Life Insurance Company Politica	Action Committee												
Α.	Full Name (Last, First, Middle Initial) Ms. Molly K. Sammons								on ID:	32900	2			
	Mailing Address 5978 Annaberg Place					1.1		M		^D / 2	Y	2005	5 ^Y	
	,	State Zip Code VA 22015-2832				A	\mou	int o	f Each	Disburs	emei			1
	Purpose of Disbursement Contribution Refund			0	10							225.	00	_
	Candidate Name				gory/ pe									
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼				с	ontr	ibut	ion R	efund				
	State: District:													
в.	Full Name (Last, First, Middle Initial) Mr. Kenneth P. Scott, Jr., Jr.								isburse		3			
	Mailing Address 5804 Christopher Lane					- [[™] 2	М	/ 1	^D 2	Y	źoós	5	
		State Zip Code VA 23226-2626				A	mou	int o	f Each	Disburs	eme	nt this I	Perioc	ł
	Purpose of Disbursement Contribution Refund		Γ	0	10							275.	00	
	Candidate Name				gory/ pe									
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼				С	ontr	ibut	ion R	efund				
	State: District:	· · · · · · · · · · · · · · · · · · ·												
C.	Full Name (Last, First, Middle Initial) Mr. Michael Shinn								on ID: isburse	32900 ement	5			
	Mailing Address 11781 N Lower Sacrame	nto Road				[[™] 2	М	/ ^D 1	^D 2	Y	2005	5 ^Y	
		State Zip Code CA 95242-9547				Α	mou	int o	fEach	Disburs	eme	nt this I	Perioc	ł
	Purpose of Disbursement Contribution Refund			0	10							215.	00	
	Candidate Name			_	gory/									
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼				С	ontr	ibut	ion R	efund				
	State: District:						-		-					_
s	UBTOTAL of Disbursements This Page (optional) .				•	ļ						715.0	70	
т	OTAL This Period (last page this line number only)				►									

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					R:		Ρ	AGE	386 /	395	
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			check or 21b 27	22 X 28a		23 28b	24 28c		25 29		26 30b
	y Information copied from such Reports and Stateme or commercial purposes, other than using the name											5	
\square	NAME OF COMMITTEE (In Full)												
$\langle \rangle$	New York Life Insurance Company Political	I Action Committee											
<u> </u>	Full Name (Last, First, Middle Initial)					Trans	sacti	on ID:	32900	7			
Α.	Mr. Den Stubblefield						_	sburse					
	Mailing Address 5727 N Farris					l [™] 2	M /	^D 1	^D 2	źź	0 ⁰ 5	Y	
	,	State Zip Code				Amou	int of	Each	Disburs	emen	t this P	Period	ł
		CA 93711-2426								4	1500.2	2	٦
	Purpose of Disbursement Contribution Refund			0	10								_
	Candidate Name		С	_	gory/								
				Ту	/pe	_							
	Office Sought: House Disburser Senate	ment For: Primary General				Contr	ibuti	ion Re	efund				
	President	Other (specify)											
	State: District:												
в.	Full Name (Last, First, Middle Initial)								32900	В			
υ.	Mr. Jerry Sullivan						of Di	sburse	D /	Y Y	Y	Y	
	Mailing Address 204 Paseo Arboles					1 2		1	Ž	2	0 ð 5		
	,	State Zip Code CA 94534-1514				Amou	int of	Each	Disburs	emen	t this P	erioc	ţ
	Purpose of Disbursement Contribution Refund			0	10					. 3	3132.1	6	
	Candidate Name				egory/ /pe								
	Office Sought: House Disburser	ment For:		-	-	Contr	ibuti	ion R	efund				
	Senate President	Primary General				Conti	ibut		ciulia				
	State: District:	Other (specify)											
С.	Full Name (Last, First, Middle Initial) Mr. Leon Tacher							on ID: sburse	329009	9			
							-		2 /	Y Y	0 ð 5	Y	
	Mailing Address 3155 Avenue W												
		State Zip Code NY 11229-5962				Amou	int of	Each	Disburs	emen	t this P	erioc	ł
	Purpose of Disbursement Contribution Refund				10						680.0	00	
	Candidate Name			ate	10 egory/ /pe								
	Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼				Contr	ibuti	ion Re	efund				
_	State: District:												
s	UBTOTAL of Disbursements This Page (optional)									8	312.3	8	
т	OTAL This Period (last page this line number only)				►								

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)				R:		P	AGE	387 /	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(cn	еск on 21b	ly one) 22	 2	23 Г	24		25	26
				27	X 28a		28b	28c		29	30b
	y Information copied from such Reports and Stateme for commercial purposes, other than using the name										6
\square	NAME OF COMMITTEE (In Full)										
\backslash	New York Life Insurance Company Political	I Action Committee									
Δ.	Full Name (Last, First, Middle Initial)							327922	2		
	Mr. Anthony J. Taylor						Durser		Y Y	, Y -	Y
	Mailing Address 4672 Country Club Drive				11		2	2	2 (0 ð 5	
	,	State Zip Code UT 84003-9593			Amou	nt of E	Each [Disburs	ement	this P	eriod
	Purpose of Disbursement		-	_					1	125.0	0
	Contribution Refund		010								
	Candidate Name		atego Type	•							
	Office Sought: House Disburser				Contri	butic	on Re	fund			
	Senate President	Primary General Other (specify)									
	State: District:	····									
в.	Full Name (Last, First, Middle Initial)							329010)		
	Mr. Wyllys Taylor				Date o	DISI	D	D /	Y Y	Y	Y
	Mailing Address PO Box 248 Oad				12		1	2	2 (0 ð 5	
		State Zip Code SC 29356-0248			Amou	nt of E	Each [Disburs	ement	this P	eriod
	Purpose of Disbursement Contribution Refund		010						e	648.0	0
	Candidate Name		atego	·							
			Туре)	_						
	Office Sought: House Disburser Senate	ment For: Primary General			Contri	butic	on Re	fund			
	President	Other (specify)									
	State: District: Full Name (Last, First, Middle Initial)										
C.	Mr. Jerome A. Timmermann				Date of			323487 ment	7		
	Mailing Address 64 Windsor Lane		 		[™] 0	M /	D 1	^D /	Ý Ž(0 ở 5	Y
		State Zip Code IL 62230-3512			Amou	nt of E	ach l	Disburs	ement	this P	eriod
	Purpose of Disbursement Contribution Refund		010						3	300.0	0
	Candidate Name		010 atego	· · · · · ·							
			Туре)	_						
	Office Sought: House Disburser Senate	Primary General			Contri	butic	on Re	fund			
	President	Other (specify)									
Г	State: District:		 								
s	UBTOTAL of Disbursements This Page (optional)		 	►					10	73.0	0
	OTAL This Period (last page this line number only).		 	•					Ū.		
Ľ	(~							

	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)					BER:				PAGE	E 388 /	/ 395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	nly one) 22 X 28a	Ē	2:	3 3b	24 28		25 29	
	Information copied from such Reports and Statem or commercial purposes, other than using the name												S
	NAME OF COMMITTEE (In Full)												
\rangle	New York Life Insurance Company Politica	al Action Committee											
Α.	Full Name (Last, First, Middle Initial) Mr. Kenneth Tooke					-				3245 ment	16		
	Mailing Address 3033 Curry Lane					1	м	/	^D 0		Y	ž o ò 5	5 ^Y
		State Zip Code				Am	ount	of F	ach	Disbu	rseme	nt this F	Perior
	Carmel	IN 46033-9064					Jant					500.0	
	Purpose of Disbursement Contribution Refund			01	0							000.	00
	Candidate Name			ate Ty	gory/ ce								
	Senate President	ement For: Primary General Other (specify) ▼				Con	trib	utio	n Re	efund			
	State: District: Full Name (Last, First, Middle Initial)					Tree				0000	10		
В.	Mr. Robert Vest								urse	3290 ment		v v	Y
	Mailing Address 4303 E Cactus Road Apt. 1088					1		/	1	ž		ž o ò 5	5'
	City Phoenix	State Zip Code AZ 85032-7638				Am	ount	of E	ach	Disbu	rseme	nt this F	Period
	Purpose of Disbursement Contribution Refund			01	0							660.0	00
	Candidate Name			ate Ty	gory/ ce								
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify) ▼	<u> </u>			Con	trib	utio	n Re	efund			
	State: District:												
C.	Full Name (Last, First, Middle Initial) Mr. Juan Villarreal					Dat	e of		urse	3290 ment	14		
	Mailing Address 2442 S Oakley Avenue #	1				1	2	/	^D 1	^D 2	Y	² 0 ồ 5	5 Y
	City Chicago	State Zip Code IL 60608-4930				Am	ount	of E	ach	Disbu	rseme	nt this F	Period
	Purpose of Disbursement Contribution Refund			01	0	1 L		a(268.	77
	Candidate Name			_	gory/								
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	<u> </u>	,		Con	trib	utio	n Re	efund			
								•				1428.7	77
S	JBTOTAL of Disbursements This Page (optional)											1428.	<u>.</u>

S	CHEDULE B (FEC Form 3X)	Use seper	ate schedule(s)					IUMBE	R:			PA	GE	389 /	395	
IT	EMIZED DISBURSEMENTS	for each ca	ategory of the ummary Page		F	check o 21b 27		22 28a	\square	23 28b	П	24 28c	\square	25 29		6 0b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name														s	
	NAME OF COMMITTEE (In Full)		s of any political	COII			50110		ibut		UIIIS		,01111	nilee		
\rangle	New York Life Insurance Company Political	I Action Co	ommittee													
Α.	Full Name (Last, First, Middle Initial) Ms. Michelle T. Wang							Trans Date o		isburs	emer					
	Mailing Address 11945 Long Leaf Lane							^м 2	м	/ D	1 ^D	/ Y	ž	0 ð 5	5 Y	
	Houston	State TX	Zip Code 77024-7105					Amou	nt o	f Each	n Dist	ourse	-	-		1
	Purpose of Disbursement Contribution Refund Candidate Name			C		10 gory/		L						520.	57	1
	Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spec	General ify) ▼			pe		Contri	ibut	ion F	Refur	nd				
в.	Full Name (Last, First, Middle Initial) Mr. David Weber							Trans Date of								
	Mailing Address 6 Getzel Berger Boulevard Unit 201	d						^м 2	М	/ D	1 2 1	/ Y	ž	0 ð 5	5 ^Y	
	Monroe	State NY	Zip Code 10950-6315					Amou	nt o	f Each	n Dist	ourse				1
	Purpose of Disbursement Contribution Refund Candidate Name			Са	ate	10 gory/ pe		L						468.	10	1
	Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spec	General ify) ▼					Contri	ibut	ion F	Refur	nd				
C.	Full Name (Last, First, Middle Initial) Ms. Ying Wei							Trans Date o	of D	isburs	emer					
	Mailing Address 171 Lawn Lane							[™] 2	м	/ D	12	/ Y	ž	0 ð 5	5 ^Y	
		State NY	Zip Code 11771-2805					Amou	nt o	f Each	n Dist	ourse	-	-		1
	Purpose of Disbursement Contribution Refund Candidate Name				_	10		L.						275.	0	1
		mont For:				egory/ pe										
	Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spec	General ify) ▼					Contri	ibut	ion F	Refur	nd				
s	UBTOTAL of Disbursements This Page (optional)												1	263.8	35]
	OTAL This Period (last page this line number only)				•	•]	

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)			E NUMBER:	PAGE 390 / 395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check or 21b 27	22 23 X 28a 28	
	y Information copied from such Reports and Statem or commercial purposes, other than using the name					
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica	I Action Committee				
Α.	Full Name (Last, First, Middle Initial) Mr. William E. Weimer				Transaction Date of Disbu	ursement
	Mailing Address 1122 Bentwater Drive				12	^D 1 2 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	State Zip Code TX 77356-8295			Amount of Ea	ach Disbursement this Period
	Purpose of Disbursement Contribution Refund Candidate Name		Ca	010 ategory/ Type	L	312.59
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		i ype	Contribution	Refund
в.	Full Name (Last, First, Middle Initial) Mr. Steven G. Weinkle				Transaction Date of Disbu	ursement
	Mailing Address 1657 Passion Vine Circle				12 ^M /	
	Weston	State Zip Code FL 33327-3661			Amount of Ea	ach Disbursement this Period 480.00
	Purpose of Disbursement Contribution Refund Candidate Name		Ca	010 ategory/ Type		+00.00
	Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼			Contribution	Refund
C.	Full Name (Last, First, Middle Initial) Mr. Terance Weis				Transaction Date of Disbu	ursement
	Mailing Address 3630 Arrow Avenue				12	^D 1 2 / Y 2 0 0 5 Y
		State Zip Code ND 58504-9643			Amount of Ea	ach Disbursement this Period
	Purpose of Disbursement Contribution Refund Candidate Name			010 ategory/	L	355.47
		ment For: Primary General Other (specify) ▼		туре	Contribution	Refund
s	UBTOTAL of Disbursements This Page (optional)			►		1148.06
	OTAL This Period (last page this line number only)			🕨		
FEC	Schedule B (Form 3X) Rev. 02/2003					

SCHEDULE B (FEC Form 3X) Use seperate schedule(s) FOR LINE NUMBER: (check only one)	PAGE 391/395
ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 21b 22 23 27 X 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solic or for commercial purposes, other than using the name and address of any political committee to solicit contributions from	
NAME OF COMMITTEE (In Full)	
New York Life Insurance Company Political Action Committee	
Full Name (Last, First, Middle Initial) Transaction ID: 32	29023
A. Ms. Fern D. Weizner Date of Disburseme	
Mailing Address 27 Gatto Lane	Ý ŽOŎ5
CityStateZip CodeAmount of Each DiaPearl RiverNY10965-1002	isbursement this Period
Purpose of Disbursement Contribution Refund 010	543.96
Candidate Name Category/ Type	
Office Sought: House Disbursement For: Contribution Refu	und
Senate Primary General General	
State: District: Other (specify) ▼	

1	
SUBTOTAL of Disbursements This Page (optional)	543.96
TOTAL This Period (last page this line number only)	38033.88
FEC Schedule B (Form 3X) Rev. 02/2003	

S	CHEDULE B (FEC Form 3X)	llea sana	rate schedule(s)			-	IE NUM	BER	:		PA	AGE 392	2 / 395
IT	EMIZED DISBURSEMENTS	for each c	category of the Summary Page		(c	heck or 21b 27	nly one) 22 28		23 28b	,	24 28c	25 X 29	26
	Information copied from such Reports and Statem					persor	n for the	purp	ose of	solic	ating c	ontributio	ons
or	or commercial purposes, other than using the name	and addres	is of any political	com	nmı	ttee to s	Solicit co	ntrib	utions	from	such	committee	9
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica	I Action C	ommittee										
<u> </u>	Full Name (Last, First, Middle Initial)						Tra	insa	ction I	D : 32	29026		
Α.	Citizens For Bill Brady						Da		Disbu				V
	Mailing Address 1 North LaSalle Street Suite 2850						1	2		13		200	5
	City	State	Zip Code				An	nount	t of Ead	ch Di	sburse	ement this	Period
		IL	60602					-		-		1000	00
	Purpose of Disbursement Non-Federal Contribution				01	1						1000	.00
	Candidate Name William Brady, Jr.			Ca	ate	gory/							
	Office Sought: House Disburse	ment For:			Ту	be	_						
	X Senate	Primary	General				No	ו-Fe	ederal	Con	tribut	ion	
	President	Other (spec	cify) 🔻										
	State: IL District: 44 Full Name (Last, First, Middle Initial)												
В.	Ron Calderon for Assembly 2006								ction I Disbu	-			
	Mailing Address 44004 Laws D							9 ^M	/ [1 ^D	/	ź o ŏ	5 ^Y
	Mailing Address 14991 Lago Drive							5		10		200	5
		State CA	Zip Code 95683				An	nount	t of Ea	ch Di	sburse	ment this	Period
	Purpose of Disbursement			_	-							1000	.00
	Non-Federal Contribution				01								
	Candidate Name Ronald Calderon				ate Ty	gory/ ce							
	Office Sought: X House Disburse						No	n-Fe	deral	Con	tribut	ion	
	Senate President	Primary Other (spec	General						aorai	001	linout		
	State: CA District: 58	Other (sper	ciry) 🔻										
c.	Full Name (Last, First, Middle Initial)								ction I	-			
•	Taxpayers for Dave Cox - Senate 2008							м	Disbu			Y Y	Y
	Mailing Address 1014 11th Street #106						0	9		16		200	5
		State CA	Zip Code 95814				An	nount	t of Ea	ch Di	sburse	ment this	Period
	Purpose of Disbursement		55014		-							1000	.00
	Non-Federal Contribution Candidate Name				01	1 gory/							
	Dave Cox				Ty								
		ment For:					No	ו-Fe	ederal	Con	ıtribut	ion	
	Senate President	Primary Other (spec	cifv)										
	State: CA District: 5												
9	JBTOTAL of Disbursements This Page (optional)					►			• •		• •	3000	.00
F	UPIONAL OF DISOURSEMENTS THIS FAGE (OPIIONAL)							-		-	* *		
Т	DTAL This Period (last page this line number only)					•							

	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		FOR LINE		PAGE 393 / 395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check only 21b 27	22 23 28a 28l	24 25 26 28c X 29 30t
	y Information copied from such Reports and Statem for commercial purposes, other than using the name					
	NAME OF COMMITTEE (In Full) New York Life Insurance Company Politica					
κ Α.	Full Name (Last, First, Middle Initial) Life Insurance Political Action Committee				Transaction	
	Mailing Address 720 Brazos Street #202					D 0 $\overline{7}$ / $\overset{Y}{2}$ 0 $\overset{Y}{0}$ 5
		State Zip Code TX 78701			Amount of Ea	ch Disbursement this Period
	Purpose of Disbursement	10/01				3000.00
	Non-Federal Contribution Candidate Name		С	011 ategory/ Type		
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		1,100	Non-Federal	Contribution
в.	Full Name (Last, First, Middle Initial) Friends of Kevin McCarthy for Assembly 20	006			Transaction Date of Disbu	
	Mailing Address 1201 K Street, Suite 470				1 ² ^{//}	
	, , , , , , , , , , , , , , , , , , ,	State Zip Code CA 95814			Amount of Ea	ch Disbursement this Period
	Purpose of Disbursement Non-Federal Contribution			011		1000.00
	Candidate Name Kevin McCarthy		С	ategory/ Type		
	Office Sought: X House Disburse Senate President State: CA District: 32	ment For: Primary General Other (specify) ▼			Non-Federal	Contribution
c.	Full Name (Last, First, Middle Initial) Friends of Nick Micozzie				Transaction Date of Disbu	
	Mailing Address PO Box 234				08 /	24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		State Zip Code PA 19018			Amount of Ea	ch Disbursement this Period
	Purpose of Disbursement Non-Federal Contribution			011		500.00
	Candidate Name Nicholas Micozzie		С	ategory/ Type		
	Office Sought: X House Disburse Senate President State: PA District: 16	ment For: Primary General Other (specify) ▼			Non-Federal	Contribution
s	UBTOTAL of Disbursements This Page (optional) .			►		4500.00
	OTAL This Period (last page this line number only)					
FE(Schedule B (Form 3X) Rev. 02/2003					

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)			OR LI		-	R:		P	AGE 3	94 / 3	395
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			check (21b 27	ć	ne) 22 28a		23 28b	24 28c	29 X 29		26 30b
	/ Information copied from such Reports and Statem												
or	or commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	and address of any political	com	nm	Ittee to	SOLICI	t contr	DUTIC	ons tro	om such	committ	ee	
\rangle	New York Life Insurance Company Politica	Action Committee											
A.	Full Name (Last, First, Middle Initial)									32006	2		
А.	Friends of Fabian Nunez 2006						Date o	of Dis			vv	v	V
	Mailing Address 2005 N Street						09		1	6	ŶŽ0	0 ₅	
		State Zip Code					Amou	nt of	Each	Disburs	ement th	nis Pe	eriod
	Sacramento Purpose of Disbursement	CA 95814	_	_		_					200	0.0	0
	Non-Federal Contribution			0	11			0				0	
	Candidate Name Fabian Nunez				gory/ pe								
	Office Sought: X House Disburse					1	Non-F	ede	ral C	ontribu	tion		
	Senate President	Primary General Other (specify)											
	State: CA District: 46												
В.	Full Name (Last, First, Middle Initial)									326924	4		
ь.	Perdue for a New Georgia						Date c	of Dis	burse	ement	vv	V	V
	Mailing Address P.O. Box 12369						1 1		1	8	ŶŶ 20	ό ₅	
		State Zip Code GA 30355-2369					Amou	nt of	Each	Disburs	ement th	nis Pe	eriod
	Purpose of Disbursement Non-Federal Contribution			0	4.4	1	L.				500	0.0	0
	Candidate Name Sonny Perdue		Ca		11 gory/ pe								
	Office Sought: House Disburse	I ment For:		• ,	<u> </u>	┤.							
	Senate	Primary General					NOU-L	eae	rai C	ontribu	tion		
	State: GA District:	Other (specify)											
C.	Full Name (Last, First, Middle Initial)									32450	5		
0.	The Gene Seaman Campaign Fund						Date c	of Dis			y y	Y	Y
	Mailing Address 2222 Airline Suite A9						11		0	^D 7	ŶŽ0	05	
		State Zip Code TX 78414					Amou	nt of	Each	Disburs	ement th	nis Pe	eriod
	Purpose of Disbursement Non-Federal Contribution			0	11	1					100	0.0	0
	Candidate Name Gene Seaman		Ca	ate	gory/ pe								
	Office Sought: X House Disburser Senate President	ment For: Primary General Other (specify) ▼				1	Non-F	ede	ral C	ontribu	tion		
_	State: TX District: 32												
s	JBTOTAL of Disbursements This Page (optional)										800	0.0	0
т	DTAL This Period (last page this line number only)						L						

SCHEDULE B (FEC Form 3X)	Use seperate schedule(s) for each category of the Check only		
ITEMIZED DISBORSEMENTS	Detailed Summary Page	22 23 24 25 26 28a 28b 28c X 29 30b	
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating 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)			
New York Life Insurance Company Political Action Committee			
Full Name (Last, First, Middle Initial)		Transaction ID: 324507	
A. Kathleen Sebelius Committee		Date of Disbursement	
Mailing Address PO Box 4302		$111 ^{M} / 07 / Y2005^{Y}$	
)	State Zip Code KS 66604	Amount of Each Disbursement this Period	
Purpose of Disbursement Non-Federal Contribution	011	2000.00	
Candidate Name Kathleen Sebelius	Category/ Type		
Office Sought: House Disburse Senate	ment For: Primary General	Non-Federal Contribution	
President	Other (specify)		
State: KS District:			

SUBTOTAL of Disbursements This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	►	17500.00
FEC Schedule B (Form 3X) Rev. 02/2003		