

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

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

FOR LINE NUMBER: PAGE 61 OF 601

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

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

A. King, Jeffery D., , Mr.,

Mailing Address 8037 Lea Court

City
Holland

State
OH

Zip Code
43528-8042

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life Insurance Company

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

638.00

Date of Receipt

11 / 30 / 2019

Transaction ID : PR114322435

Amount of Each Receipt this Period

58.00

☐ Memo Item

P/R Deduction (\$58.00 Monthly)

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

B. Rudolph, Michael A., , Mr.,

Mailing Address 200 Morgan Circle

City
Oxford

State
OH

Zip Code
45056-9403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life Insurance Company

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

11 / 30 / 2019

Transaction ID : PR114422435

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

C. Bieber, Roderick J., , Mr.,

Mailing Address 485 Winthrop Lane

City
Saginaw

State
MI

Zip Code
48638-6260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life Insurance Company

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

715.00

Date of Receipt

11 / 30 / 2019

Transaction ID : PR114822435

Amount of Each Receipt this Period

65.00

☐ Memo Item

P/R Deduction (\$65.00 Monthly)

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

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

173.00