

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

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

FOR LINE NUMBER: PAGE 155 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. Wallace, Richard S., , Mr.,

Mailing Address 3025 Eagles Claw Avenue Northwest

City
Salem

State
OR

Zip Code
97304-4224

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 ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2019

Transaction ID : PR2136022435

Amount of Each Receipt this Period

30.00

☐ Memo Item

P/R Deduction (\$30.00 Monthly)

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

B. Werner, Richard J., , Mr.,

Mailing Address 2154 Crespi Lane

City
Westlake Village

State
CA

Zip Code
91361-1722

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 ▼

1921.37

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2019

Transaction ID : PR213622435

Amount of Each Receipt this Period

174.67

☐ Memo Item

P/R Deduction (\$174.67 Monthly)

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

C. Beaulieu, Jeffrey R., , Mr.,

Mailing Address 9479 Newbridge Drive

City
Riverside

State
CA

Zip Code
92508-8003

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

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2019

Transaction ID : PR2136622435

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

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

254.67