

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

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

FOR LINE NUMBER: PAGE 44 OF 63

(check only one)

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

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

A. Allen, David, S, MR.,

Mailing Address 8 Winhall Ln

City
Hartford

State
CT

Zip Code
06105-1000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MASSACHUSETTS MUTUAL LIFE INS.

Occupation (for Individual)
SVP - DGC Dispute Resolution & Legal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

02 / 29 / 2020

Transaction ID : PR790809769598

Amount of Each Receipt this Period

115.40

☐ Memo Item

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

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

B. Collins, Stephen, K., ,

Mailing Address 236 STANFORD DR

City
SAN ANTONIO

State
TX

Zip Code
78212-2010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
General Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 29 / 2020

Transaction ID : PR791191569598

Amount of Each Receipt this Period

250.00

☐ Memo Item

P/R Deduction (\$250.00 Monthly)

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

C. Chicares, Elizabeth, , MS.,

Mailing Address 186 Belle Woods Dr

City
Glastonbury

State
CT

Zip Code
06033-1667

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Massachusetts Mutual Life Insurance Co

Occupation (for Individual)
EVP - CFO & Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

384.64

Date of Receipt

02 / 29 / 2020

Transaction ID : PR791351769598

Amount of Each Receipt this Period

192.32

☐ Memo Item

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

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

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

557.72