

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Massachusetts Mutual Life Insurance Company Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		74114.90
(b) Cash on Hand at Beginning of Reporting Period.....	165244.49	
(c) Total Receipts (from Line 19)	29482.80	356308.11
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	194727.29	430423.01
7. Total Disbursements (from Line 31).....	64979.66	300675.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	129747.63	129747.63
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Massachusetts Mutual Life Insurance Company Political Action Committee

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21026.41	254522.41
(ii) Unitemized	7697.35	88407.70
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	28723.76	342930.11
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	28723.76	342930.11
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	656.77	3914.44
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	9000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	102.27	463.56
18. 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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	29482.80	356308.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	29482.80	356308.11

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	279.66	4677.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	279.66	4677.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	64500.00	294500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	200.00	1116.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	200.00	1116.70
29. Other Disbursements	0.00	380.70
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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 .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	64979.66	300675.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	64979.66	300675.38

DETAILED SUMMARY PAGE
of Disbursements

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)	28723.76	342930.11
34. Total Contribution Refunds (from Line 28(d))	200.00	1116.70
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28523.76	341813.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	279.66	4677.98
37. Offsets to Operating Expenditures (from Line 15, page 3).....	656.77	3914.44
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-377.11	763.54

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. COREY L. BASEHORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1785 ELIZA WAY
 City MECHANICSBURG State PA Zip Code 17050-1684
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : 52003541
 Amount of Each Receipt this Period
 1500.00

B. CARL B. COOLIDGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 PIRATES CV
 City SAINT SIMONS IS State GA Zip Code 31522-5718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : 52003543
 Amount of Each Receipt this Period
 300.00

C. JOSEPH EPPY
 Full Name (Last, First, Middle Initial)
 Mailing Address 11798 ISLAND LAKES LN
 City BOCA RATON State FL Zip Code 33498-6803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : 52024061
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2800.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 84
(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

A. LEONARD J. MONTANARI
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 FREDERICK ST
 City NEWINGTON State CT Zip Code 06111-3708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2013
Transaction ID : 52194412
 Amount of Each Receipt this Period
 300.00

B. MARK J. DORMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3980 FAIRWAY DR
 City MEDINA State OH Zip Code 44256-7847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 666.74

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : 52226339
 Amount of Each Receipt this Period
 83.35

C. DONALD G. SCULLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 11133 S LAKESIDE OAKS AVE
 City BATON ROUGE State LA Zip Code 70810-3068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation GENERAL INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : 52226343
 Amount of Each Receipt this Period
 83.35

SUBTOTAL of Receipts This Page (optional)..... ▶ 466.70
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 8 OF 84
(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 (Last, First, Middle Initial)
A. RICHARD C. DIPIPPO

Mailing Address 16619 HARBOUR TOWN DR

City State Zip Code
 SILVER SPRING MD 20905-4082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : 52226344

Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
B. COREY A. SCHNEIDER

Mailing Address 20 STRATTON RD

City State Zip Code
 SCARSDALE NY 10583-7555

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : 52226345

Amount of Each Receipt this Period
 125.00

Full Name (Last, First, Middle Initial)
C. BERNARD GARRAH

Mailing Address 30096 SHADOW CREEK DR

City State Zip Code
 WESTLAKE OH 44145-7802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : 52226346

Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. JOHN T. EISENHARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 3312 BRIDLEPATH RD
 City EASTON State PA Zip Code 18045-2008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 06 / 06 / 2013
Transaction ID : 52226937
 Amount of Each Receipt this Period 0.00
[MEMO ITEM]
 Refund(s) on Schedule B Totaling \$200.00 This changes the YTD Total to \$800.00

B. MR. ERIC H WIETSMA
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 VALLEY VIEW DR
 City WILBRAHAM State MA Zip Code 01095-2363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VP - INVESTMENT SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1120474527870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

C. MR. MARK ROELLIG
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 COBTAIL WAY
 City SIMSBURY State CT Zip Code 06070-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP & GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2499.90

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1120475427870
 Amount of Each Receipt this Period 384.60
 P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	438.44
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 84
(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 (Last, First, Middle Initial)
A. ANDREW W. TODD

Mailing Address 8374 LABONT WAY

City State Zip Code
 EDEN PRAIRIE MN 55344-4305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 687.50

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR1135598727870

Amount of Each Receipt this Period
 125.00

P/R Deduction (\$62.50 Semi-Monthly)

Full Name (Last, First, Middle Initial)
B. MS. DEBRA PALERMINO

Mailing Address 15 NEW ST APT 225

City State Zip Code
 WEST HARTFORD CT 06107-4230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. EVP - HUMAN RESOURCES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1249.95

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR1156272827870

Amount of Each Receipt this Period
 192.30

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. MS. ALETHEA O'DONNELL

Mailing Address 172 SNELL ST

City State Zip Code
 AMHERST MA 01002-2556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. AVP COMPLIANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.35

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR1285752327870

Amount of Each Receipt this Period
 53.90

P/R Deduction (\$26.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 371.20

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. BRADLEY LUCIDO
Full Name (Last, First, Middle Initial)
Mailing Address 65 ROSEWOOD DR

City SUFFIELD	State CT	Zip Code 06078-2014
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SVP CHIEF COMPLIANCE OFF & DEP GEN C
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1249.95

Date of Receipt
06 / 30 / 2013
Transaction ID : PR1285753927870

Amount of Each Receipt this Period
192.30

P/R Deduction (\$96.15 Bi-Weekly)

B. MR. JOHN PHILLIPS
Full Name (Last, First, Middle Initial)
Mailing Address 49 MENDON RD

City SUTTON	State MA	Zip Code 01590-1135
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CORNERSTONE RE ADVISERS LLC	Occupation VICE PRESIDENT
---	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
349.96

Date of Receipt
06 / 30 / 2013
Transaction ID : PR1285754127870

Amount of Each Receipt this Period
53.84

P/R Deduction (\$26.92 Bi-Weekly)

C. MR. JEFFREY T PRINCE
Full Name (Last, First, Middle Initial)
Mailing Address 33 HILLSIDE RD

City NORTHAMPTON	State MA	Zip Code 01060-2119
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FEC ID number of contributing federal political committee. **C**

Name of Employer BABSON CAPITAL MANAGEMENT LLC	Occupation MANAGING DIRECTOR
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt
06 / 30 / 2013
Transaction ID : PR1334223427870

Amount of Each Receipt this Period
76.92

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	323.06
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. PHILIP S WELLMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 150 N BEACON ST
 City HARTFORD State CT Zip Code 06105-2247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP & CHIEF COMP OFFICER INST. FUNDS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **349.96**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1342766127870
 Amount of Each Receipt this Period **53.84**
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. GREGORY E DEAVENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 HENLEY COMMONS
 City FARMINGTON State CT Zip Code 06032-1553
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT & CONTROLLER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.35**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1342771927870
 Amount of Each Receipt this Period **153.90**
 P/R Deduction (\$76.95 Bi-Weekly)

C. MR. JOHN W CHANDLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 118 COLONY RD
 City LONGMEADOW State MA Zip Code 01106-1216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - MARKETING
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.35**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1355574327870
 Amount of Each Receipt this Period **153.90**
 P/R Deduction (\$76.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **361.64**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. MICHAEL R FANNING
 Full Name (Last, First, Middle Initial)
 Mailing Address 140 COLONIAL AVE
 City NORTH ANDOVER State MA Zip Code 01845-6349
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP - U.S. INSURANCE GROUP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2499.90**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1360837727870
 Amount of Each Receipt this Period **384.60**
 P/R Deduction (\$192.30 Bi-Weekly)

B. MR. CHRISTOFER P VANDAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 94 GRAPE ST
 City CHICOPEE State MA Zip Code 01013-2638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation BUSINESS OPERATIONS DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **371.41**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1368717127870
 Amount of Each Receipt this Period **57.14**
 P/R Deduction (\$28.57 Bi-Weekly)

C. MR. HUGH BARRETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 PONDVIEW DR
 City SPRINGFIELD State MA Zip Code 01118-1145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **920.50**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1386532027870
 Amount of Each Receipt this Period **38.50**
 P/R Deduction (\$19.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **480.24**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. CHRISTINE PEASLEE
Full Name (Last, First, Middle Initial)
Mailing Address 38 CIDER MILL HTS
City NORTH GRANBY State CT Zip Code 06060-1430
FEC ID number of contributing federal political committee. **C**
Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP CORPORATE SECRETARY & COUNSEL
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **499.98**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1387601127870
Amount of Each Receipt this Period **76.92**
P/R Deduction (\$38.46 Bi-Weekly)

B. MS. PAULA T RYAN
Full Name (Last, First, Middle Initial)
Mailing Address 28 BELDENWOOD RD
City SIMSBURY State CT Zip Code 06070-2145
FEC ID number of contributing federal political committee. **C**
Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **499.98**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1391580627870
Amount of Each Receipt this Period **76.92**
P/R Deduction (\$38.46 Bi-Weekly)

C. MR. JOHN VACCARO
Full Name (Last, First, Middle Initial)
Mailing Address 18 ANNA MARIE LN
City E LONGMEADOW State MA Zip Code 01028-3018
FEC ID number of contributing federal political committee. **C**
Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VP - SALES & DISTRIBUTION
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.35**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1434639327870
Amount of Each Receipt this Period **153.90**
P/R Deduction (\$76.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **307.74**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 84
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. DAVID J COUTU
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 MELLISSA CIR
 City GREENVILLE State RI Zip Code 02828-1025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR1479403827870
 Amount of Each Receipt this Period 76.92
 P/R Deduction (\$38.46 Bi-Weekly)

B. MR. ROGER PUTNAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 ELLIOTT DR
 City SIMSBURY State CT Zip Code 06070-1669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1249.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR1479403927870
 Amount of Each Receipt this Period 192.30
 P/R Deduction (\$96.15 Bi-Weekly)

C. MR. WILLIAM D OBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 99 POKANOKET LN
 City MARSHFIELD State MA Zip Code 02050-8238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.11

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR1479405027870
 Amount of Each Receipt this Period 76.94
 P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 346.16
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. MICHAEL MCKENZIE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 WESTCHESTER DR
 City CANTON State MA Zip Code 02021-2449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - RS OPERATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.50**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1491588227870
 Amount of Each Receipt this Period **77.00**
 P/R Deduction (\$38.50 Bi-Weekly)

B. MR. DOUGLAS RUSSELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 347 N STEELE RD
 City WEST HARTFORD State CT Zip Code 06117-2232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP - STRATEGY AND CORP DEVELOPMEN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.35**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1500908527870
 Amount of Each Receipt this Period **153.90**
 P/R Deduction (\$76.95 Bi-Weekly)

C. MR. JOHN M YOUNG
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 LAMPERCOCK LN
 City LINCOLN State RI Zip Code 02865-4201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **349.96**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1541043527870
 Amount of Each Receipt this Period **53.84**
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **284.74**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. MARK VIVIANO
Full Name (Last, First, Middle Initial)

Mailing Address 481 MAIN ST

City WILBRAHAM State MA Zip Code 01095-1662

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP INVESTMENT OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1541058527870

Amount of Each Receipt this Period 38.50

P/R Deduction (\$19.25 Bi-Weekly)

B. CARLOS HERNANDEZ
Full Name (Last, First, Middle Initial)

Mailing Address 8600 SW 84TH AVE

City MIAMI State FL Zip Code 33143-6912

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 366.85

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1541766127870

Amount of Each Receipt this Period 66.70

P/R Deduction (\$33.35 Semi-Monthly)

C. MARGEE D. MARTINEZ
Full Name (Last, First, Middle Initial)

Mailing Address 11051 SW 46TH ST

City MIAMI State FL Zip Code 33165-4732

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.35

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1541766427870

Amount of Each Receipt this Period 41.70

P/R Deduction (\$20.85 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 146.90

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

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

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

FOR LINE NUMBER: PAGE 18 OF 84
(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

A. MS. TARYN LEONARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 MAGAZINE ST
 City CAMBRIDGE State MA Zip Code 02139-3909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.35

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1560527827870
 Amount of Each Receipt this Period 53.90
 P/R Deduction (\$26.95 Bi-Weekly)

B. MR. HUGH O'TOOLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 402 SUMMER HILL RD
 City MADISON State CT Zip Code 06443-1852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VP - SALES & CLIENT MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.35

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1560531827870
 Amount of Each Receipt this Period 153.90
 P/R Deduction (\$76.95 Bi-Weekly)

C. MR. TODD PICKEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 HAMILTON LN
 City WEATOGUE State CT Zip Code 06089-9764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation CORPORATE VICE PRESIDENT - TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1560539227870
 Amount of Each Receipt this Period 30.80
 P/R Deduction (\$15.40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 238.60
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 19 OF 84
(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

A. MS. RACHEL JAEGGI
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 PINE ACRES DR
 City CANTON State CT Zip Code 06019-2134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - NEW BUSINESS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.50

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1564484327870
 Amount of Each Receipt this Period 77.00
 P/R Deduction (\$38.50 Bi-Weekly)

B. MR. KEVIN RASCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 48 FOX DEN RD
 City WEST SIMSBURY State CT Zip Code 06092-2217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP & ASSISTANT GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.10

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1569232327870
 Amount of Each Receipt this Period 115.40
 P/R Deduction (\$57.70 Bi-Weekly)

C. MS. ANNE-MARIE SZMYT
 Full Name (Last, First, Middle Initial)
 Mailing Address 49 GLENN DR
 City WILBRAHAM State MA Zip Code 01095-1439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP HR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.85

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1581875027870
 Amount of Each Receipt this Period 38.90
 P/R Deduction (\$19.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 231.30
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. DAMON BATES
Full Name (Last, First, Middle Initial)
Mailing Address 5 INGRAHAM RD

City WELLESLEY	State MA	Zip Code 02482-6905
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation VICE PRESIDENT - MARKETING
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **349.96**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR1581880027870

Amount of Each Receipt this Period

53.84

P/R Deduction (\$26.92 Bi-Weekly)

B. MR. DAVID HARLOW
Full Name (Last, First, Middle Initial)
Mailing Address 965 ELM COMMONS DR APT 200

City ROCKY HILL	State CT	Zip Code 06067-1814
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BABSON CAPITAL MANAGEMENT LLC	Occupation MANAGING DIRECTOR
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **349.96**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR1581881427870

Amount of Each Receipt this Period

53.84

P/R Deduction (\$26.92 Bi-Weekly)

C. MR. GARETH ROSS
Full Name (Last, First, Middle Initial)
Mailing Address 82 COTTAGE ST

City AMHERST	State MA	Zip Code 01002-2125
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation GNRLM5VPBSAN
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **742.82**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR1596854827870

Amount of Each Receipt this Period

114.28

P/R Deduction (\$57.14 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	221.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. LORIE VALLE-YANEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 575 MOUNTAIN RD
 City WEST HARTFORD State CT Zip Code 06117-1842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - DIVERSITY & INCLUSION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1300.00**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1606911927870
 Amount of Each Receipt this Period **200.00**
 P/R Deduction (\$100.00 Bi-Weekly)

B. MR. HERBERT WI WHITAKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 INDIAN FIELD RD
 City HEBRON State CT Zip Code 06248-1337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP CHANGE LEADER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.25**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1606915927870
 Amount of Each Receipt this Period **38.50**
 P/R Deduction (\$19.25 Bi-Weekly)

C. MR. KEVIN P SHERIDAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 COUNTRY CLUB LN
 City EAST GRANBY State CT Zip Code 06026-9637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP - WORKSITE UNDERWRITING & ENROLL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.11**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1606916127870
 Amount of Each Receipt this Period **76.94**
 P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **315.44**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. MICHAEL HICKS
Full Name (Last, First, Middle Initial)

Mailing Address 204 CONE MEADOW CT

City WEST GRANBY State CT Zip Code 06090-1421

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - IT EFFECTIVENESS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 221.10

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1606919127870

Amount of Each Receipt this Period 73.70

P/R Deduction (\$36.85 Bi-Weekly)

B. MR. J SCOTT PALMER
Full Name (Last, First, Middle Initial)

Mailing Address 25 DARTMOUTH LN

City E LONGMEADOW State MA Zip Code 01028-3105

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - RS SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.50

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1645210027870

Amount of Each Receipt this Period 77.00

P/R Deduction (\$38.50 Bi-Weekly)

C. MS. AMY LY FERRERO
Full Name (Last, First, Middle Initial)

Mailing Address 42 STONEHILL RD

City E LONGMEADOW State MA Zip Code 01028-1367

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - CAPABILITY DELIVERY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1663791227870

Amount of Each Receipt this Period 53.84

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 204.54

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 84
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. HEATHER SMILEY
Full Name (Last, First, Middle Initial)

Mailing Address 62 KENDALL HILL RD

City State Zip Code
STERLING MA 01564-1515

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MASSACHUSETTS MUTUAL LIFE INS. SVP - RS MARKETING & COMMUNICATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **687.50**

Date of Receipt
MM / DD / YYYY
06 / 30 / 2013

Transaction ID : PR1663792527870

Amount of Each Receipt this Period
125.00

P/R Deduction (\$62.50 Bi-Weekly)

B. MR. SCOTT BUFFINGTON
Full Name (Last, First, Middle Initial)

Mailing Address 13 MARTINS COVE RD

City State Zip Code
HINGHAM MA 02043-1042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MASSACHUSETTS MUTUAL LIFE INS. VICE PRESIDENT - RS NATIONAL SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **315.78**

Date of Receipt
MM / DD / YYYY
06 / 30 / 2013

Transaction ID : PR1688809827870

Amount of Each Receipt this Period
105.26

P/R Deduction (\$52.63 Bi-Weekly)

C. MS. SANDRA SEARS
Full Name (Last, First, Middle Initial)

Mailing Address 10 GARDNER ST

City State Zip Code
MANCHESTER CT 06040-5625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MASSACHUSETTS MUTUAL LIFE INS. AVP PROJECT MGMT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt
MM / DD / YYYY
06 / 30 / 2013

Transaction ID : PR1702290327870

Amount of Each Receipt this Period
38.50

P/R Deduction (\$19.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	268.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. JENNIFER ORZELL
Full Name (Last, First, Middle Initial)

Mailing Address 44 WESTWOODS DR

City CANTON State CT Zip Code 06019-4500

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & ACTUARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1717732327870

Amount of Each Receipt this Period 200.00

P/R Deduction (\$100.00 Bi-Weekly)

B. MS. WENDY BENSON
Full Name (Last, First, Middle Initial)

Mailing Address 270 ALLERTON COMMONS LN

City BRAINTREE State MA Zip Code 02184-8248

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - SALES OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 746.14

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1728095727870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

C. MR. TIMOTHY BARRY
Full Name (Last, First, Middle Initial)

Mailing Address 246 WOLF SWAMP RD

City LONGMEADOW State MA Zip Code 01106-3240

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP MASSMUTUAL WAY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 464.36

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1737014527870

Amount of Each Receipt this Period 71.44

P/R Deduction (\$35.72 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 348.36

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 84
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. BAVY U. LOPEZ
Full Name (Last, First, Middle Initial)

Mailing Address 2060 ELIZA GLYNNE LN

City KNOXVILLE State TN Zip Code 37931-3681

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.00

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1762108027870

Amount of Each Receipt this Period 54.60

P/R Deduction (\$27.30 Semi-Monthly)

B. MR. DONALD GRIFFITH
Full Name (Last, First, Middle Initial)

Mailing Address 46 PINEWOOD DR

City LONGMEADOW State MA Zip Code 01106-1638

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - COMPLIANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1779022327870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

C. MR. GARY MOELLER
Full Name (Last, First, Middle Initial)

Mailing Address 24 PARK RD

City SIMSBURY State CT Zip Code 06070-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP FINANCIAL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 464.36

Date of Receipt 06 / 30 / 2013
Transaction ID : PR1824631627870

Amount of Each Receipt this Period 71.44

P/R Deduction (\$35.72 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	202.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. GLENN DAVIS
Full Name (Last, First, Middle Initial)
Mailing Address 49 FITZMAURICE CIR

City WINDSOR	State CT	Zip Code 06095-1160
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FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation COMMUNITY RESPONSIBILITY CONSULTAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **557.18**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR1824634227870

Amount of Each Receipt this Period

85.72

P/R Deduction (\$42.86 Bi-Weekly)

B. MR. MAHENDER NARALA
Full Name (Last, First, Middle Initial)
Mailing Address 54 LONGFELLOW DR

City LONGMEADOW	State MA	Zip Code 01106-2310
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation INFORMATION RISK CONSULTANT
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR1841434627870

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C. MR. CHARLES DA TATRO
Full Name (Last, First, Middle Initial)
Mailing Address 49 GEORGE ST

City MENDON	State MA	Zip Code 01756-1139
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FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SVP & ACTUARY - PRODUCT DEVEL
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.11**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2013

Transaction ID : PR1853990027870

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	212.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. JOHN FR KENNEDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 GREAT POND RD
 City SIMSBURY State CT Zip Code 06070-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - DISTRIBUTION STRATEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 568.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR1913873327870
 Amount of Each Receipt this Period 87.50
 P/R Deduction (\$43.75 Bi-Weekly)

B. MR. MELVIN TI CORBETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 MOUNTAIN SPRING RD
 City FARMINGTON State CT Zip Code 06032-1612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP & CHIEF INVESTMENT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2553.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR1929995827870
 Amount of Each Receipt this Period 384.60
 P/R Deduction (\$192.30 Bi-Weekly)

C. MR. ERIC A ENNES
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 RIVERSIDE DR
 City WRENTHAM State MA Zip Code 02093-1455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 406.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR1934311227870
 Amount of Each Receipt this Period 62.50
 P/R Deduction (\$31.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	534.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. CHRISTINE FREDERICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 EMERSON LN
 City GRANBY State CT Zip Code 06035-2713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - COMPLIANCE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **375.05**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1934313127870
 Amount of Each Receipt this Period **57.70**
 P/R Deduction (\$28.85 Bi-Weekly)

B. MR. MOHANA SUNDARAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 SADDLE HILL RD
 City MANCHESTER State CT Zip Code 06040-6958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation PROJECT MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **284.44**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1947061227870
 Amount of Each Receipt this Period **43.76**
 P/R Deduction (\$21.88 Bi-Weekly)

C. MR. DOMINIC BLUE
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 EASTHAM LANE
 City LONGMEADOW State MA Zip Code 01106-2342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP & ASSISTANT GENERAL COUNSEL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **349.96**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR1947062927870
 Amount of Each Receipt this Period **53.84**
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	155.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. IAN M FOWLER		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 301 CHEROKEE RD		Transaction ID : PR2006647527870
City LAKE FOREST	State IL	Zip Code 60045-3062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.26
Name of Employer BABSON CAPITAL MANAGEMENT LLC	Occupation MANAGING DIRECTOR	P/R Deduction (\$52.63 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.78	

Full Name (Last, First, Middle Initial) B. CHRISTOPHE L. HEERDEGEN		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 6862 SECTION RD		Transaction ID : PR789871327870
City OTTAWA LAKE	State MI	Zip Code 49267-9551
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer SELF	Occupation INSURANCE AGENT	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. IVAN C. HINRICHS		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 2418 LA MAISON DR		Transaction ID : PR789935227870
City CHARLOTTE	State NC	Zip Code 28226-6200
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.85
Name of Employer SELF	Occupation INSURANCE AGENT	P/R Deduction (\$20.85 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.50	

SUBTOTAL of Receipts This Page (optional).....▶	176.11
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. J. M. JENSEN
Full Name (Last, First, Middle Initial)

Mailing Address 7903 COPELAND RD

City ODESSA State FL Zip Code 33556-3261

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 30 / 2013
Transaction ID : PR789937127870

Amount of Each Receipt this Period 50.00

P/R Deduction (\$25.00 Semi-Monthly)

B. RICHARD P. VANBENSCHOTEN
Full Name (Last, First, Middle Initial)

Mailing Address 875 5TH AVE APT 3A

City NEW YORK State NY Zip Code 10065-4952

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 454.60

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790069027870

Amount of Each Receipt this Period 90.92

P/R Deduction (\$45.46 Semi-Monthly)

C. STEPHEN D. ESTLER
Full Name (Last, First, Middle Initial)

Mailing Address 2177 NE 63RD ST

City FT LAUDERDALE State FL Zip Code 33308-1330

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 916.85

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790109427870

Amount of Each Receipt this Period 166.70

P/R Deduction (\$83.35 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 307.62

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 84
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. VICTOR IANNELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 134 EDWARDS RD
 City FREEHOLD State NJ Zip Code 07728-1313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 417.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR790134627870
 Amount of Each Receipt this Period 41.70
 P/R Deduction (\$41.70 Semi-Monthly)

B. MR. ALAN L BLAIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 SHADY DELL LN
 City SOMERS State CT Zip Code 06071-2136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR790151827870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

C. MR. ANDREW C DICKEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1183 LONGMEADOW ST
 City LONGMEADOW State MA Zip Code 01106-2201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP & DEPUTY CHIEF INVESTMENT OFFICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 999.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR790159327870
 Amount of Each Receipt this Period 153.84
 P/R Deduction (\$76.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	249.38
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. ANDREW C WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 53 SUNSET BEACH RD
 City BRANFORD State CT Zip Code 06405-5028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.99

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790159627870
 Amount of Each Receipt this Period 38.46
 P/R Deduction (\$19.23 Bi-Weekly)

B. MR. CLIFFORD M NOREEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 95 BENT TREE DR
 City E LONGMEADOW State MA Zip Code 01028-1365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.08

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790184127870
 Amount of Each Receipt this Period 192.32
 P/R Deduction (\$96.16 Bi-Weekly)

C. MR. CRAIG WADDINGTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 SPRING MEADOW DR
 City GRANBY State CT Zip Code 06035-1327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP & ACTUARY - LIFE PRODUCT MANAGEN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790184527870
 Amount of Each Receipt this Period 76.92
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 307.70
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 33 OF 84
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. DAVID J ECHEVERRIA
Full Name (Last, First, Middle Initial)
Mailing Address 36 FARMINGTON AVE
City LONGMEADOW State MA Zip Code 01106-1433
FEC ID number of contributing federal political committee. **C**
Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790188627870
Amount of Each Receipt this Period 53.84
P/R Deduction (\$26.92 Bi-Weekly)

B. MR. DAVID D WHARMBY
Full Name (Last, First, Middle Initial)
Mailing Address 34 VERPLANK AVE
City STAMFORD State CT Zip Code 06902-8216
FEC ID number of contributing federal political committee. **C**
Name of Employer CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790192627870
Amount of Each Receipt this Period 76.92
P/R Deduction (\$38.46 Bi-Weekly)

C. MR. DAVID J REILLY
Full Name (Last, First, Middle Initial)
Mailing Address 32 JOSHUA DR
City WEST SIMSBURY State CT Zip Code 06092-2124
FEC ID number of contributing federal political committee. **C**
Name of Employer CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 999.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790206327870
Amount of Each Receipt this Period 153.84
P/R Deduction (\$76.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 284.60
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. DONALD J PHELAN
Full Name (Last, First, Middle Initial)

Mailing Address 24 HAMMERSMITH

City AVON State CT Zip Code 06001-2915

FEC ID number of contributing federal political committee. **C**

Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790207827870

Amount of Each Receipt this Period 53.84

P/R Deduction (\$26.92 Bi-Weekly)

B. MR. DOUGLAS J JANGRAW
Full Name (Last, First, Middle Initial)

Mailing Address 17 CLIFFORD LN

City LONGMEADOW State MA Zip Code 01106-2919

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP & ACTUARY-PRODUCT MGMT/UNDERV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790208227870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

C. MR. EDWARD D YOUNELL
Full Name (Last, First, Middle Initial)

Mailing Address 15 KENSINGTON DR

City WILBRAHAM State MA Zip Code 01095-2800

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT-BROKERAGE/ALLIANCE S

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.10

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790209527870

Amount of Each Receipt this Period 115.40

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

SUBTOTAL of Receipts This Page (optional).....▶ 246.16

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. ELIZABETH CANAVAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 HAVENHURST RD
 City WEST SPRINGFIELD State MA Zip Code 01089-2160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP PROGRAM MGMT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.25**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR790211627870
 Amount of Each Receipt this Period **38.50**
 P/R Deduction (\$19.25 Bi-Weekly)

B. MR. HARVEY BR HOFFMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 DEVONSHIRE TER
 City E LONGMEADOW State MA Zip Code 01028-3139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation CORP VICE PRESIDENT - GENERAL RISK M
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1250.08**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR790231427870
 Amount of Each Receipt this Period **192.32**
 P/R Deduction (\$96.16 Bi-Weekly)

C. MR. ISADORE JERMYN
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 DUXBURY LN
 City LONGMEADOW State MA Zip Code 01106-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT & CHIEF ACTUAR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.10**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR790232527870
 Amount of Each Receipt this Period **115.40**
 P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **346.22**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. JAMES R WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3938 DIANE RD
 City State Zip Code
 BIG PINE KEY FL 33043-6105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. SECOND VP & ASSOC. GENERAL COUNSEL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 349.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR790236827870
 Amount of Each Receipt this Period
 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

B. MS. JOANNE M DENVER
 Full Name (Last, First, Middle Initial)
 Mailing Address 48 VAIL ST
 City State Zip Code
 SPRINGFIELD MA 01118-2161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORNERSTONE RE ADVISERS LLC VICE PRESIDENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 499.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR790244927870
 Amount of Each Receipt this Period
 76.92
 P/R Deduction (\$38.46 Bi-Weekly)

C. MR. JOHN E DEITELBAUM
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 MIDDLE RD
 City State Zip Code
 ELLINGTON CT 06029-3615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. SVP & DEPUTY GEN COUNS USIG LAW
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1750.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR790248227870
 Amount of Each Receipt this Period
 269.24
 P/R Deduction (\$134.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. JOHN R TAILLIE
Full Name (Last, First, Middle Initial)

Mailing Address 151 MCKENZIE DR

City SOUTHINGTON State CT Zip Code 06489-4117

FEC ID number of contributing federal political committee. **C**

Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 30 / 2013**

Transaction ID : PR790252027870

Amount of Each Receipt this Period **50.00**

P/R Deduction (\$25.00 Bi-Weekly)

B. MR. JOSEPH A CALABRESE
Full Name (Last, First, Middle Initial)

Mailing Address 28 CANTERBURY LN

City FEEDING HILLS State MA Zip Code 01030-1718

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **349.96**

Date of Receipt **06 / 30 / 2013**

Transaction ID : PR790253227870

Amount of Each Receipt this Period **53.84**

P/R Deduction (\$26.92 Bi-Weekly)

C. MR. JAMES J NASCIMENTO
Full Name (Last, First, Middle Initial)

Mailing Address 432 LYON ST

City LUDLOW State MA Zip Code 01056-1133

FEC ID number of contributing federal political committee. **C**

Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **349.96**

Date of Receipt **06 / 30 / 2013**

Transaction ID : PR790260227870

Amount of Each Receipt this Period **53.84**

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **157.68**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. JAMES P PUHALA III
 Full Name (Last, First, Middle Initial)
 Mailing Address 68 HOLCOMB ST
 City EAST GRANBY State CT Zip Code 06026-9531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790260427870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. JEFFREY T ROBINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 DONAMOR LN
 City E LONGMEADOW State MA Zip Code 01028-2220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSMUTUAL INTERNATIONAL Occupation MANAGING DIRECTOR - MMI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790261627870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

C. MS. KATHY S REEVE
 Full Name (Last, First, Middle Initial)
 Mailing Address EDGEMERE HILLS BLDG 14
 85 N MAIN ST UNIT 14A
 City EAST HAMPTON State CT Zip Code 06424-1448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.99

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790272727870
 Amount of Each Receipt this Period 38.46
 P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 146.14
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 84
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. KATHLEEN LYNCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 136 MONTCLAIR DR
 City WEST HARTFORD State CT Zip Code 06107-1255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.01**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR790277627870
 Amount of Each Receipt this Period **61.54**
 P/R Deduction (\$30.77 Bi-Weekly)

B. MR. KENNETH M RICKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 CYPRESS LN
 City WILBRAHAM State MA Zip Code 01095-1507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - SALES RISK MANAGEME
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **349.96**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR790278527870
 Amount of Each Receipt this Period **53.84**
 P/R Deduction (\$26.92 Bi-Weekly)

C. MR. MARK ACKERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 385 GREEN HILL RD
 City LONGMEADOW State MA Zip Code 01106-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **349.96**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR790296027870
 Amount of Each Receipt this Period **53.84**
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **169.22**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. MATTHEW P NATCHARIAN
Full Name (Last, First, Middle Initial)

Mailing Address 3 RIDGEBURY RD

City AVON State CT Zip Code 06001-3825

FEC ID number of contributing federal political committee. **C**

Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790301427870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

B. MR. MICHAEL H GATELY
Full Name (Last, First, Middle Initial)

Mailing Address 134 FAIRVIEW TER

City S GLASTONBURY State CT Zip Code 06073-3304

FEC ID number of contributing federal political committee. **C**

Name of Employer CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790304927870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

C. MR. MICHAEL L KLOFAS
Full Name (Last, First, Middle Initial)

Mailing Address 64 WINDHAM DR

City E LONGMEADOW State MA Zip Code 01028-2668

FEC ID number of contributing federal political committee. **C**

Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790314027870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.76

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. PAMELA J DELANEY
Full Name (Last, First, Middle Initial)

Mailing Address 72 HILLCREST RD

City WINDSOR State CT Zip Code 06095-3301

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP - STRATEGY & BUS DEVEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt
06 / 30 / 2013
Transaction ID : PR790320627870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

B. MR. PAUL T PROKO
Full Name (Last, First, Middle Initial)

Mailing Address 49 TIMBER LN

City HOLDEN State MA Zip Code 01520-1943

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - DISABILITY CLAIMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 249.99

Date of Receipt
06 / 30 / 2013
Transaction ID : PR790332227870

Amount of Each Receipt this Period 38.46

P/R Deduction (\$19.23 Bi-Weekly)

C. MR. ROBERT CASALE
Full Name (Last, First, Middle Initial)

Mailing Address 30 THISTLE LN

City BRISTOL State CT Zip Code 06010-8057

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP & CHIEF INFORMATION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2499.90

Date of Receipt
06 / 30 / 2013
Transaction ID : PR790342227870

Amount of Each Receipt this Period 384.60

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 499.98

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. RHA E A KENNEDY		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 322 OLD FARM RD		Transaction ID : PR790351827870
City SPRINGFIELD	State MA	Zip Code 01119-2825
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation VICE PRESIDENT - INVESTMENT ANALYSIS	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

Full Name (Last, First, Middle Initial) B. MR. RICHARD P BARNHART		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 344 WESTCHESTER RD		Transaction ID : PR790352027870
City COLCHESTER	State CT	Zip Code 06415-2426
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 53.84
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation VICE PRESIDENT - ACCOUNTING POLICY	P/R Deduction (\$26.92 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.96	

Full Name (Last, First, Middle Initial) C. MR. RICHARD D BOURGEOIS		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 11 ECHO HILL RD		Transaction ID : PR790352227870
City WILBRAHAM	State MA	Zip Code 01095-2663
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 153.84
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation SENIOR VICE PRESIDENT - TAX	P/R Deduction (\$76.92 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 999.96	

SUBTOTAL of Receipts This Page (optional).....▶	284.60
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 43 OF 84
(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

A. MR. RICHARD F BUCKLEY Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 CEDAR RDG
 City SOUTH HADLEY State MA Zip Code 01075-1795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790352327870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. ROBERT J BRODERICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 ACADEMY DR
 City LONGMEADOW State MA Zip Code 01106-2154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790353127870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

C. MR. ROBERT G LABUN
 Full Name (Last, First, Middle Initial)
 Mailing Address 84 WILDFLOWER CIR
 City WESTFIELD State MA Zip Code 01085-4590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - FINANCIAL REPORTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790354527870
 Amount of Each Receipt this Period 76.92
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 184.60
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. ROBERT S ROSENTHAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 SHERWOOD LN
 City AVON State CT Zip Code 06001-3215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP & ASSISTANT GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.10

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790355427870
 Amount of Each Receipt this Period 115.40
 P/R Deduction (\$57.70 Bi-Weekly)

B. MR. ROGER W CRANDALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 447 TRAFTON RD
 City SPRINGFIELD State MA Zip Code 01108-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation CHAIRMAN PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2499.90

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790355927870
 Amount of Each Receipt this Period 384.60
 P/R Deduction (\$192.30 Bi-Weekly)

C. MS. SUSAN A MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 BROOKS RD
 City LONGMEADOW State MA Zip Code 01106-2129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.06

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790370127870
 Amount of Each Receipt this Period 269.24
 P/R Deduction (\$134.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 769.24
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. STEVEN N LAVALLEY
Full Name (Last, First, Middle Initial)

Mailing Address 31 WEST ST

City EASTHAMPTON State MA Zip Code 01027-1325

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SECOND VP - MARKETING RESEARCH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.20

Date of Receipt
06 / 30 / 2013
Transaction ID : PR790374527870

Amount of Each Receipt this Period
30.80

P/R Deduction (\$15.40 Bi-Weekly)

B. MR. THOMAS H JURKOWSKI
Full Name (Last, First, Middle Initial)

Mailing Address 40 OLD SAWMILL RD

City BELCHERTOWN State MA Zip Code 01007-9344

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - SALES & DISTRIBUTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt
06 / 30 / 2013
Transaction ID : PR790378527870

Amount of Each Receipt this Period
76.92

P/R Deduction (\$38.46 Bi-Weekly)

C. MR. THOMAS P KELLEY
Full Name (Last, First, Middle Initial)

Mailing Address 114 STEELE RD

City WEST HARTFORD State CT Zip Code 06119-1156

FEC ID number of contributing federal political committee. **C**

Name of Employer CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt
06 / 30 / 2013
Transaction ID : PR790384027870

Amount of Each Receipt this Period
76.92

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 184.64

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. THOMAS F O'CONNOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 WOODFIELD DR
 City TOLLAND State CT Zip Code 06084-3034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & ACTUARY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **349.96**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR790384627870
 Amount of Each Receipt this Period **53.84**
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. VICTOR WOOLRIDGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 146 LONGHILL ST
 City SPRINGFIELD State MA Zip Code 01108-1438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **349.96**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR790387627870
 Amount of Each Receipt this Period **53.84**
 P/R Deduction (\$26.92 Bi-Weekly)

C. SCOTT H. SILVER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2591 OBSERVATORY AVE
 City CINCINNATI State OH Zip Code 45208-2009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **273.14**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR790418727870
 Amount of Each Receipt this Period **50.00**
 P/R Deduction (\$23.14 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... **157.68**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. ROBERT M. CORNETT
Full Name (Last, First, Middle Initial)

Mailing Address 115 STEELMAN RD

City PURVIS State MS Zip Code 39475-3325

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 366.85

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790467727870

Amount of Each Receipt this Period 66.70

P/R Deduction (\$33.35 Semi-Monthly)

B. JERRY D. VESSELL
Full Name (Last, First, Middle Initial)

Mailing Address 911 CALLOWAY DR

City BRENTWOOD State TN Zip Code 37027-6539

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 458.70

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790470127870

Amount of Each Receipt this Period 83.40

P/R Deduction (\$41.70 Semi-Monthly)

C. JASON H. JONES
Full Name (Last, First, Middle Initial)

Mailing Address 6840 WRIGHT RD

City ATLANTA State GA Zip Code 30328-2134

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 229.35

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790541527870

Amount of Each Receipt this Period 41.70

P/R Deduction (\$20.85 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 191.80

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. THOMAS G DUDECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 WINTERBERRY RD
 City DEEP RIVER State CT Zip Code 06417-2126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 749.97

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790544527870
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$57.69 Bi-Weekly)

B. MR. JEFFREY R HUG
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 WHITCOMB DR
 City SIMSBURY State CT Zip Code 06070-1119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP - EXECUTIVE BENEFITS RESEARCH/SUI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790545127870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

C. MR. DEAN DULCHINOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 ABBEY LN
 City E LONGMEADOW State MA Zip Code 01028-3206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.50

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790568527870
 Amount of Each Receipt this Period 77.00
 P/R Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	246.22
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. PATRICK F OLEARCEK
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 MUNGER HILL RD
 City WESTFIELD State MA Zip Code 01085-4575
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP ADVANCED MARKETS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 365.54

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790573127870
 Amount of Each Receipt this Period 38.50
 P/R Deduction (\$19.25 Bi-Weekly)

B. MS. ANGELA S OTIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 612 EAST ST
 City WILLIAMSBURG State MA Zip Code 01096-9773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - SALES SUPPORT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790574027870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

C. MS. KATHLEEN L KRAEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 ASHFORD RD
 City LONGMEADOW State MA Zip Code 01106-2515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790579427870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 146.18
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 50 OF 84
(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

A. MR. DOUGLAS M TREVALLION II
 Full Name (Last, First, Middle Initial)
 Mailing Address 30 COVENTRY LN
 City AGAWAM State MA Zip Code 01001-3569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790590327870
 Amount of Each Receipt this Period 76.92
 P/R Deduction (\$38.46 Bi-Weekly)

B. MR. ROGER M ROBERGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 ROCKINGHAM CIR
 City EAST LONGMEADOW State MA Zip Code 01028-3197
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790594527870
 Amount of Each Receipt this Period 76.92
 P/R Deduction (\$38.46 Bi-Weekly)

C. MR. ROBERT M SHETTLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 65 KELSEY LN
 City GLASTONBURY State CT Zip Code 06033-5040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.99

Date of Receipt 06 / 30 / 2013
Transaction ID : PR790597127870
 Amount of Each Receipt this Period 38.46
 P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 192.30
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. JAMES O LACEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 MAGNOLIA TER
 City SPRINGFIELD State MA Zip Code 01108-2533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP - COMMUNICATIONS & MEDIA RELATIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR790616227870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. SCOTT C WESTPHAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 WELLS HILL RD
 City WESTON State CT Zip Code 06883-2625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORNERSTONE RE ADVISERS LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.99

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR790637427870
 Amount of Each Receipt this Period 38.46
 P/R Deduction (\$19.23 Bi-Weekly)

C. MR. ROLAND P FAWTHROP
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 HORSESHOE LN
 City SOMERS State CT Zip Code 06071-2235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SECOND VP & ACTUARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR790658227870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 146.14
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. MICHELE M WHITE
Full Name (Last, First, Middle Initial)

Mailing Address 46 HARVEST HILL RD

City SOMERS State CT Zip Code 06071-1685

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - POLICYHOLDER SERVIC

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 535.73

Date of Receipt
06 / 30 / 2013
Transaction ID : PR790665627870

Amount of Each Receipt this Period 82.42

P/R Deduction (\$41.21 Bi-Weekly)

B. MR. TODD M GISH
Full Name (Last, First, Middle Initial)

Mailing Address 139 MELROSE RD

City BROAD BROOK State CT Zip Code 06016-9617

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt
06 / 30 / 2013
Transaction ID : PR790677127870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

C. MS. JOANNE LEARY
Full Name (Last, First, Middle Initial)

Mailing Address 44 COPLEY RD

City S GLASTONBURY State CT Zip Code 06073-2632

FEC ID number of contributing federal political committee. **C**

Name of Employer CORNERSTONE RE ADVISERS LLC Occupation DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 349.96

Date of Receipt
06 / 30 / 2013
Transaction ID : PR790684027870

Amount of Each Receipt this Period 53.84

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 213.18

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. JOHN BYERS
Full Name (Last, First, Middle Initial)

Mailing Address 4680 MEDINA LAKE DR

City HAMEL State MN Zip Code 55340-4610

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **687.50**

Date of Receipt **06 / 30 / 2013**

Transaction ID : PR790684827870

Amount of Each Receipt this Period **125.00**

P/R Deduction (\$62.50 Semi-Monthly)

B. EDWARD I. WIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 804 KATESFORD RD

City COCKEYSVILLE State MD Zip Code 21030-2246

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **458.70**

Date of Receipt **06 / 30 / 2013**

Transaction ID : PR790710927870

Amount of Each Receipt this Period **83.40**

P/R Deduction (\$41.70 Semi-Monthly)

C. MS. SYLENA G ECHEVARRIA
Full Name (Last, First, Middle Initial)

Mailing Address 35 CLEMENT ST

City SPRINGFIELD State MA Zip Code 01118-1511

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP CALL CENTER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.25**

Date of Receipt **06 / 30 / 2013**

Transaction ID : PR790779927870

Amount of Each Receipt this Period **38.50**

P/R Deduction (\$19.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **246.90**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. DONALD G CARTEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 654 MOUNTAIN RD
 City CHESHIRE State CT Zip Code 06410-3306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - IT SERVICE MANAGEME
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR790808227870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

B. MR. NORMAN A SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 LAUREL ST
 City LONGMEADOW State MA Zip Code 01106-1124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VICE PRESIDENT - USIG FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 749.97

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR790808627870
 Amount of Each Receipt this Period 115.38
 P/R Deduction (\$57.69 Bi-Weekly)

C. MR. DAVID S ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 FOUR MILE RD
 City WEST HARTFORD State CT Zip Code 06107-2710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP-DEP GEN COUN DISP RES & CORP TA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.10

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR790809727870
 Amount of Each Receipt this Period 115.40
 P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 284.62
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. SCOTT PICCONE		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 33 TROTWOOD DR		Transaction ID : PR790815827870
City WEST HARTFORD	State CT	Zip Code 06117-1644
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer CORNERSTONE RE ADVISERS LLC	Occupation DIRECTOR	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) B. MR. JAMES J O'SHAUGHNESSY		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 591 MAIN ST		Transaction ID : PR791165927870
City CONCORD	State MA	Zip Code 01742-3303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer CORNERSTONE RE ADVISERS LLC	Occupation DIRECTOR	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) C. MR. DOUGLAS W TAYLOR		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 12 ERSKINE DR		Transaction ID : PR791193727870
City LONGMEADOW	State MA	Zip Code 01106-1614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 53.84
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation VICE PRESIDENT & ACTUARY	P/R Deduction (\$26.92 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.96	

SUBTOTAL of Receipts This Page (optional).....▶	130.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. MELISSA MILLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 SEMINARY RD
 City SIMSBURY State CT Zip Code 06070-2010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SVP - WORKSITE AND VOLUNTARY INSUR/

Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791207727870
 Amount of Each Receipt this Period 269.24
 P/R Deduction (\$134.62 Bi-Weekly)

B. MR. MICHAEL J STCLAIR
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 E RED BRIDGE LN
 City SOUTH HADLEY State MA Zip Code 01075-2287
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - SALES & DISTRIBUTION

Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1030.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791235427870
 Amount of Each Receipt this Period 77.00
 P/R Deduction (\$38.50 Bi-Weekly)

C. MS. DEBRA L ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 46 GLENDALE RD
 City HAMPDEN State MA Zip Code 01036-9121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSMUTUAL TRUST COMPANY Occupation VICE PRESIDENT - TRUST OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791239027870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.08
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)
A. JULIA L. BIRD

Mailing Address 2273 E CONTINENTAL BLVD

City SOUTHLAKE State TX Zip Code 76092-9796

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.00

Date of Receipt
06 / 30 / 2013
Transaction ID : PR791255827870

Amount of Each Receipt this Period
54.60

P/R Deduction (\$27.30 Semi-Monthly)

Full Name (Last, First, Middle Initial)
B. MR. MARK R GIEBNER

Mailing Address 186 LYON ST

City LUDLOW State MA Zip Code 01056-1151

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation FINANCIAL PLANNING CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.25

Date of Receipt
06 / 30 / 2013
Transaction ID : PR791264227870

Amount of Each Receipt this Period
38.50

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. MR. PAUL BACON

Mailing Address 11 RAVINE CIR

City WESTFIELD State MA Zip Code 01085-5005

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - CORPORATE STRATEG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt
06 / 30 / 2013
Transaction ID : PR791276827870

Amount of Each Receipt this Period
76.92

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 170.02

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. CHRISTOPHER P DOWD
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 SUNSET TER
 City WEST HARTFORD State CT Zip Code 06107-2737
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 249.99

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791281127870
 Amount of Each Receipt this Period 38.46
 P/R Deduction (\$19.23 Bi-Weekly)

B. MS. NICOLE EI MARKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 425 TRAFTON RD
 City SPRINGFIELD State MA Zip Code 01108-2647
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation AVP CHANGE LEADER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791327127870
 Amount of Each Receipt this Period 30.80
 P/R Deduction (\$15.40 Bi-Weekly)

C. MS. SUSAN E SCHECHTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 60 LEDGEWOOD RD
 City WEST HARTFORD State CT Zip Code 06107-3731
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VP & ASSISTANT GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791332827870
 Amount of Each Receipt this Period 76.92
 P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	146.18
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. AUDREY MEYERLAMPERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 LOOMIS ST
 City NORTH GRANBY State CT Zip Code 06060-1202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 499.98

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791334827870
 Amount of Each Receipt this Period 76.92
 P/R Deduction (\$38.46 Bi-Weekly)

B. MS. ELIZABETH W CHICARES
 Full Name (Last, First, Middle Initial)
 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 MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP & CHIEF ENTERPRISE RISK OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791351727870
 Amount of Each Receipt this Period 192.32
 P/R Deduction (\$96.16 Bi-Weekly)

C. MR. CHRISTOPHER DEFRANCIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 MAYNARD RD
 City NORTHAMPTON State MA Zip Code 01060-2809
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791365027870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 323.08
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. MICHAEL T ROLLINGS			Date of Receipt
Mailing Address 5 DURHAM RD			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : PR791365827870
LONGMEADOW	MA	01106-1507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="384.60"/>
Name of Employer	Occupation		P/R Deduction (\$192.30 Bi-Weekly)
MASSACHUSETTS MUTUAL LIFE INS.	EVP & CHIEF FINANCIAL OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="2499.90"/>		

Full Name (Last, First, Middle Initial) B. MS. ERIN L BECK			Date of Receipt
Mailing Address 35 PLEASANT ST			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : PR791439827870
E LONGMEADOW	MA	01028-2440	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="58.34"/>
Name of Employer	Occupation		P/R Deduction (\$29.17 Bi-Weekly)
MASSACHUSETTS MUTUAL LIFE INS.	COMPLIANCE CONSULTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="379.21"/>		

Full Name (Last, First, Middle Initial) C. MS. SUSAN BEAUDIN			Date of Receipt
Mailing Address 9 OLD POOR FARM RD			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : PR791510427870
WARE	MA	01082-9780	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		P/R Deduction (\$25.00 Bi-Weekly)
MASSACHUSETTS MUTUAL LIFE INS.	AVP BUSINESS OPERATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
	<input type="text" value="325.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="492.94"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. RUSSELL D MORRISON		Date of Receipt
Mailing Address 5419 GORHAM DR		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Transaction ID : PR791511127870
CHARLOTTE	NC	Amount of Each Receipt this Period
	Zip Code	<input type="text" value="53.84"/>
	28226-6411	
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	P/R Deduction (\$26.92 Bi-Weekly)
Name of Employer	Occupation	
BABSON CAPITAL MANAGEMENT LLC	MANAGING DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="349.96"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR. CHIN-JUNG V YANG		Date of Receipt
Mailing Address 18524 ROLLINGDALE LN		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Transaction ID : PR791511527870
DAVIDSON	NC	Amount of Each Receipt this Period
	Zip Code	<input type="text" value="76.92"/>
	28036-7862	
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	P/R Deduction (\$38.46 Bi-Weekly)
Name of Employer	Occupation	
BABSON CAPITAL MANAGEMENT LLC	MANAGING DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="499.98"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR. THOMAS M FINKE		Date of Receipt
Mailing Address 4920 HARDISON RD		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Transaction ID : PR791511927870
CHARLOTTE	NC	Amount of Each Receipt this Period
	Zip Code	<input type="text" value="384.60"/>
	28226-6418	
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	P/R Deduction (\$192.30 Bi-Weekly)
Name of Employer	Occupation	
BABSON CAPITAL MANAGEMENT LLC	MANAGING DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2499.90"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="515.36"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. NICHOLAS FYNTRILAKIS			Date of Receipt
Mailing Address 5 RIDGE RD			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : PR791550227870
HAMPDEN	MA	01036-9518	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="53.84"/>
Name of Employer	Occupation		P/R Deduction (\$26.92 Bi-Weekly)
MASSACHUSETTS MUTUAL LIFE INS.	VICE PRESIDENT - COMMUNITY RESPONSI		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
			<input type="text" value="349.96"/>

Full Name (Last, First, Middle Initial) B. MR. RICHARD GOLDSTEIN			Date of Receipt
Mailing Address 197 LYNNWOOD DR			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : PR791591627870
LONGMEADOW	MA	01106-2013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="76.92"/>
Name of Employer	Occupation		P/R Deduction (\$38.46 Bi-Weekly)
MASSACHUSETTS MUTUAL LIFE INS.	VICE PRESIDENT - BENEFITS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
			<input type="text" value="499.98"/>

Full Name (Last, First, Middle Initial) C. MS. CAMILLE DONALD			Date of Receipt
Mailing Address 501 HOLLAND LN UNIT 1012			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code	Transaction ID : PR791608127870
ALEXANDRIA	VA	22314-3565	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="38.50"/>
Name of Employer	Occupation		P/R Deduction (\$19.25 Bi-Weekly)
MASSACHUSETTS MUTUAL LIFE INS.	AVP & COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
			<input type="text" value="444.99"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="169.26"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. DENNIS MILES
Full Name (Last, First, Middle Initial)

Mailing Address 25 TIMBER RIDGE RD

City W SPRINGFIELD State MA Zip Code 01089-1654

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - SALES SUPPORT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR791623327870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

B. MS. MARY S BLOCK
Full Name (Last, First, Middle Initial)

Mailing Address 67 PERSHING RD

City WINDSOR LOCKS State CT Zip Code 06096-2122

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & SENIOR COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt 06 / 30 / 2013
Transaction ID : PR791784427870

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

C. MR. ROBERT ERWIN
Full Name (Last, First, Middle Initial)

Mailing Address 185 COVENTRY LN

City LONGMEADOW State MA Zip Code 01106-1629

FEC ID number of contributing federal political committee. **C**

Name of Employer BABSON CAPITAL MANAGEMENT LLC Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR791800227870

Amount of Each Receipt this Period 53.84

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 207.68

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. WILLIAM SILVANIC
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 CREAMERY HILL RD
 City GRANBY State CT Zip Code 06035-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SENIOR VP - RS FINANCE & TARGET MARK
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **499.98**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR791800427870
 Amount of Each Receipt this Period **76.92**
 P/R Deduction (\$38.46 Bi-Weekly)

B. MS. ANNEMARIE SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 26 LAST LEAF CIR
 City WINDSOR State CT Zip Code 06095-4733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSMUTUAL TRUST COMPANY Occupation RELATIONSHIP MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.25**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR791801827870
 Amount of Each Receipt this Period **38.50**
 P/R Deduction (\$19.25 Bi-Weekly)

C. MS. DIANE LOPES
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 LITTLE SORREL LN
 City SOMERS State CT Zip Code 06071-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT - MASSMUTUAL WAY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.35**

Date of Receipt **06 / 30 / 2013**
Transaction ID : PR791902627870
 Amount of Each Receipt this Period **53.90**
 P/R Deduction (\$26.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **169.32**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. THOMAS OSWALD
Full Name (Last, First, Middle Initial)

Mailing Address 665 CENTER ST
UNIT 713

City LUDLOW State MA Zip Code 01056-1534

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation SECOND VP - TAX

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt
06 / 30 / 2013
Transaction ID : PR791903227870

Amount of Each Receipt this Period
76.92

P/R Deduction (\$38.46 Bi-Weekly)

B. ERIC S. ABOWD
Full Name (Last, First, Middle Initial)

Mailing Address 1525 STAR WAY

City RENO State NV Zip Code 89511-8691

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
458.70

Date of Receipt
06 / 30 / 2013
Transaction ID : PR791913727870

Amount of Each Receipt this Period
83.40

P/R Deduction (\$41.70 Semi-Monthly)

C. MR. DOUGLAS ENDORF
Full Name (Last, First, Middle Initial)

Mailing Address 27 STRAWBERRY FIELDS

City GRANBY State CT Zip Code 06035-2927

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
349.96

Date of Receipt
06 / 30 / 2013
Transaction ID : PR791938627870

Amount of Each Receipt this Period
53.84

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 214.16

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MR. WILLIAM F MONROEJR
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 GENERAL HOBBS RD
 City State Zip Code
 JEFFERSON MA 01522-1565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. VICE PRESIDENT - MMLISI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.11

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR791969127870
 Amount of Each Receipt this Period 76.94
 P/R Deduction (\$38.47 Bi-Weekly)

B. MR. IAN HAWKINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 36 PRESCOTT AVE
 City State Zip Code
 GLEN RIDGE NJ 07028-1918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BABSON CAPITAL MANAGEMENT LLC MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 349.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR792000727870
 Amount of Each Receipt this Period 53.84
 P/R Deduction (\$26.92 Bi-Weekly)

C. MR. ANTHONY PIERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 ARNOLDALE RD
 City State Zip Code
 WEST HARTFORD CT 06119-1702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CORNERSTONE RE ADVISERS LLC MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : PR792042027870
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	170.78
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. JONATHAN LAU
Full Name (Last, First, Middle Initial)

Mailing Address 824 BENNAVILLE AVE

City BIRMINGHAM State MI Zip Code 48009-3665

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 30 / 2013
Transaction ID : PR792101327870

Amount of Each Receipt this Period 50.00

P/R Deduction (\$25.00 Semi-Monthly)

B. MR. MICHAEL O'CONNOR
Full Name (Last, First, Middle Initial)

Mailing Address 41 BELLECLAIRE AVE

City LONGMEADOW State MA Zip Code 01106-1415

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation CVP - CORPORATE DEVELOPMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.95

Date of Receipt 06 / 30 / 2013
Transaction ID : PR792107727870

Amount of Each Receipt this Period 192.30

P/R Deduction (\$96.15 Bi-Weekly)

C. MR. PAUL J STRONG
Full Name (Last, First, Middle Initial)

Mailing Address 85 SHORE RD

City STURBRIDGE State MA Zip Code 01566-1328

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT & ACTUARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 349.96

Date of Receipt 06 / 30 / 2013
Transaction ID : PR792119727870

Amount of Each Receipt this Period 53.84

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 296.14

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MS. ELLEN S CONLIN
Full Name (Last, First, Middle Initial)

Mailing Address 20 WELLESLEY DR

City State Zip Code
LONGMEADOW MA 01106-2833

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MASSACHUSETTS MUTUAL LIFE INS. VP & ASSISTANT GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
349.96

Date of Receipt
06 / 30 / 2013
Transaction ID : PR792129527870

Amount of Each Receipt this Period
53.84

P/R Deduction (\$26.92 Bi-Weekly)

B. MS. JAE JUNKUNC
Full Name (Last, First, Middle Initial)

Mailing Address 221 TRUMBULL STREET APT 502

City State Zip Code
HARTFORD CT 06103-1511

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MASSACHUSETTS MUTUAL LIFE INS. VICE PRESIDENT - GENERAL RISK MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.10

Date of Receipt
06 / 30 / 2013
Transaction ID : PR792144327870

Amount of Each Receipt this Period
115.40

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

C. BRIAN LARGE
Full Name (Last, First, Middle Initial)

Mailing Address 141 WOLFPIT AVE

City State Zip Code
NORWALK CT 06851-3429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.00

Date of Receipt
06 / 30 / 2013
Transaction ID : PR792732627870

Amount of Each Receipt this Period
54.60

P/R Deduction (\$27.30 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 223.84

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

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

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

FOR LINE NUMBER: PAGE 69 OF 84
(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 (Last, First, Middle Initial)
A. KEVIN W. PAASCH

Mailing Address 3956 SHADY OAKS DR

City State Zip Code
 VIRGINIA BCH VA 23455-1628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 458.70

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR794020427870

Amount of Each Receipt this Period
 83.40

P/R Deduction (\$41.70 Semi-Monthly)

Full Name (Last, First, Middle Initial)
B. WALTER E. KATZ

Mailing Address 4414 BREAKWOOD DR

City State Zip Code
 HOUSTON TX 77096-3505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR795359627870

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial)
C. EDWARD J. WIRTZ

Mailing Address 12 BRANDING IRON LN

City State Zip Code
 ROLLING HILLS ESTATES CA 90274-2501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF INSURANCE AGENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 478.50

Date of Receipt
 06 / 30 / 2013
Transaction ID : PR796003927870

Amount of Each Receipt this Period
 87.00

P/R Deduction (\$43.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 270.40

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. EDGAR F. WHITMORE
Full Name (Last, First, Middle Initial)

Mailing Address 25535 CUMBERLAND LN

City CALABASAS State CA Zip Code 91302-3158

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 458.70

Date of Receipt 06 / 30 / 2013
Transaction ID : PR796010127870

Amount of Each Receipt this Period 83.40

P/R Deduction (\$41.70 Semi-Monthly)

B. MAX A. ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 2666 NW 83RD WAY

City PEMBROKE PINES State FL Zip Code 33024-3230

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.30

Date of Receipt 06 / 30 / 2013
Transaction ID : PR796324627870

Amount of Each Receipt this Period 83.40

P/R Deduction (\$41.70 Semi-Monthly)

C. MS. ELAINE A SARSYNSKI
Full Name (Last, First, Middle Initial)

Mailing Address 75 BARNDOR HILLS RD

City SUFFIELD State CT Zip Code 06078-1360

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EVP - RETIREMENT SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.08

Date of Receipt 06 / 30 / 2013
Transaction ID : PR796671827870

Amount of Each Receipt this Period 192.32

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

SUBTOTAL of Receipts This Page (optional)..... ▶ 359.12

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. DAVID R. NELSON
Full Name (Last, First, Middle Initial)

Mailing Address 4794 BORDAGES RD

City BEAUMONT State TX Zip Code 77705-7675

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation INSURANCE AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 30 / 2013
Transaction ID : PR796717227870

Amount of Each Receipt this Period 25.00

P/R Deduction (\$25.00 Semi-Monthly)

B. MR. MICHAEL HIRSCHBERG
Full Name (Last, First, Middle Initial)

Mailing Address 122 PASADENA PL

City HAWTHORNE State NJ Zip Code 07506-2806

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation EXTERNAL WHOLESALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.25

Date of Receipt 06 / 30 / 2013
Transaction ID : PR811444927870

Amount of Each Receipt this Period 38.50

P/R Deduction (\$19.25 Bi-Weekly)

C. MS. JEANNE G YOUNG
Full Name (Last, First, Middle Initial)

Mailing Address 10 PONDVIEW LN

City SOUTHWICK State MA Zip Code 01077-9264

FEC ID number of contributing federal political committee. **C**

Name of Employer MASSACHUSETTS MUTUAL LIFE INS. Occupation VICE PRESIDENT-CORPORATE ADMINISTR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 527.28

Date of Receipt 06 / 30 / 2013
Transaction ID : PR904834627870

Amount of Each Receipt this Period 81.12

P/R Deduction (\$40.56 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 144.62

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 84
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. CINDY BELMORE		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 7 CRYSTAL DR		Transaction ID : PR932682127870
City SOUTHWICK	State MA	Zip Code 01077-9613
FEC ID number of contributing federal political committee.	C	
Name of Employer MASSACHUSETTS MUTUAL LIFE INS.	Occupation VICE PRESIDENT - COMPLIANCE	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. CHRISTOPHE C. COCORES		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 9 HUNT PL		Transaction ID : PR934761027870
City MECHANICSBURG	State PA	Zip Code 17050-2912
FEC ID number of contributing federal political committee.	C	
Name of Employer SELF	Occupation INSURANCE AGENT	Amount of Each Receipt this Period 41.70
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.35	P/R Deduction (\$20.85 Semi-Monthly)

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	241.70
TOTAL This Period (last page this line number only).....▶	21026.41

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 73 OF 84
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Mutual Life Insurance Company Political Action Committee

A. MassMutual Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 1295 State Street

City Springfield	State MA	Zip Code 01111
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FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3598.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2013

Transaction ID : 5222560

Amount of Each Receipt this Period
340.77

Refund of PaymenTech Processing Fees

B. MassMutual Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 1295 State Street

City Springfield	State MA	Zip Code 01111
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3914.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2013

Transaction ID : 5222561

Amount of Each Receipt this Period
316.00

Fed Operating Exp. Reimb: AMEX Processing Fees

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	656.77
TOTAL This Period (last page this line number only).....▶	656.77

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 OF 84
(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

A. Full Name (Last, First, Middle Initial)
MassMutual Federal Credit Union

Mailing Address 1295 State Street

City Springfield State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
463.56

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2013
Transaction ID : 52193617

Amount of Each Receipt this Period
 102.27

Jun-13 Interest - Money Market Acct.

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	102.27
TOTAL This Period (last page this line number only).....▶	102.27

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Chase PaymenTech

Mailing Address P.O. Box 29534

City Phoenix State AZ Zip Code 85038

Purpose of Disbursement
Jun-13 PaymenTech Processing Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	3

Transaction ID : 52226353

Amount of Each Disbursement this Period

2	7	9	.	6	6
---	---	---	---	---	---

Jun-13 PaymenTech Processing Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2	7	9	.	6	6
---	---	---	---	---	---

2	7	9	.	6	6
---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Roskam For Congress Committee

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement
PLWG Event: July 24, 2013

011
Category/
Type

Candidate Name

Rep. Peter Roskam

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

MM / DD / YYYY
06 / 17 / 2013

Transaction ID : 51103642

Amount of Each Disbursement this Period

5000.00

PLWG Event: July 24, 2013

Full Name (Last, First, Middle Initial)

B. Terri Sewell For Congress

Mailing Address P.O. Box 1964

City Birmingham State AL Zip Code 35201

Purpose of Disbursement
District Event: June 6, 2013

011
Category/
Type

Candidate Name

Terri Sewell

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AL District: 07

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2013

Transaction ID : 51620528

Amount of Each Disbursement this Period

1000.00

District Event: June 6, 2013

Full Name (Last, First, Middle Initial)

C. Texans For Senator John Cornyn Inc

Mailing Address PO Box 13026

City Austin State TX Zip Code 78711

Purpose of Disbursement
ACLI Event: 6/13/13

011
Category/
Type

Candidate Name

Sen. John Cornyn

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2013

Transaction ID : 51657661

Amount of Each Disbursement this Period

2000.00

ACLI Event: 6/13/13

SUBTOTAL of Disbursements This Page (optional)..... ▶

8000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert Hurt For Congress

Mailing Address PO Box 8

City Chatham State VA Zip Code 24531

Purpose of Disbursement
Event: June 18, 2013

011
Category/
Type

Candidate Name
Robert Hurt

Office Sought: House
 Senate
 President
State: VA District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2013

Transaction ID : 51770481

Amount of Each Disbursement this Period

1000.00

Event: June 18, 2013

Full Name (Last, First, Middle Initial)

B. Kind For Congress Committee

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement
Event: June 18, 2013

011
Category/
Type

Candidate Name
Rep. Ron Kind

Office Sought: House
 Senate
 President
State: WI District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2013

Transaction ID : 51770483

Amount of Each Disbursement this Period

1000.00

Event: June 18, 2013

Full Name (Last, First, Middle Initial)

C. Moderate Democrats PAC (ModSquad)

Mailing Address 426 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
2013 PAC Contribution

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 17 / 2013

Transaction ID : 51770535

Amount of Each Disbursement this Period

5000.00

2013 PAC Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Andrews For Congress

Mailing Address 215 Fourth Avenue

City Haddon Heights State NJ Zip Code 07076

Purpose of Disbursement
Event: June 19, 2013

Candidate Name
Rep. Robert E. Andrews

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NJ District: 01

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2013

Transaction ID : 51770542

Amount of Each Disbursement this Period

2000.00

Event: June 19, 2013

Full Name (Last, First, Middle Initial)

B. Adrian Smith For Congress

Mailing Address 3321 Avenue I
Suite 6

City Scottsbluff State NE Zip Code 69361

Purpose of Disbursement
PLWG Event: June 27, 2013

Candidate Name
Rep. Adrian Smith

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NE District: 03

Date of Disbursement

MM / DD / YYYY
06 / 17 / 2013

Transaction ID : 51770714

Amount of Each Disbursement this Period

5000.00

PLWG Event: June 27, 2013

Full Name (Last, First, Middle Initial)

C. Ruben Hinojosa For Congress

Mailing Address 10125 N. 10th Street, Suite E

City Mcallen State TX Zip Code 78504

Purpose of Disbursement
Event: June 17, 2013

Candidate Name
Rep. Ruben Hinojosa

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: TX District: 15

Date of Disbursement

MM / DD / YYYY
06 / 17 / 2013

Transaction ID : 51770720

Amount of Each Disbursement this Period

3000.00

Event: June 17, 2013

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rodney For Congress

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568

Purpose of Disbursement
Roskam Around the World Event: 6/17/13

Candidate Name

Rep. Rodney L. Davis

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	3

Transaction ID : 51770721

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

Roskam Around the World Event: 6/17/13

Full Name (Last, First, Middle Initial)

B. Holding Onto Oregon's Priorities

Mailing Address P.O. Box 3314

City Portland State OR Zip Code 97208

Purpose of Disbursement
PLWG Event: June 12, 2013

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	3

Transaction ID : 51770725

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

PLWG Event: June 12, 2013

Full Name (Last, First, Middle Initial)

C. Larson For Congress

Mailing Address PO Box 479

City Glastonbury State CT Zip Code 06033

Purpose of Disbursement
Event: June 3, 2013

Candidate Name

Rep. John B. Larson

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CT District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	3

Transaction ID : 51770729

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

Event: June 3, 2013

SUBTOTAL of Disbursements This Page (optional)..... ▶

8	5	0	0	0	0	0	0	0	0

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

8	5	0	0	0	0	0	0	0	0

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Perlmutter For Congress

Mailing Address 3440 Youngfield Street
#264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
Events: June 4, 2013

011

Candidate Name

Rep. Edwin Perlmutter

Category/
Type

Office Sought: House
 Senate
 President
State: CO District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2013

Transaction ID : 51770736

Amount of Each Disbursement this Period

1000.00

Events: June 4, 2013

Full Name (Last, First, Middle Initial)

B. Friends Of Jim Clyburn

Mailing Address Post Office Box 12567

City Columbia State SC Zip Code 29211

Purpose of Disbursement
Event: June 25, 2013

011

Candidate Name

Rep. James E. Clyburn

Category/
Type

Office Sought: House
 Senate
 President
State: SC District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2013

Transaction ID : 51829601

Amount of Each Disbursement this Period

1000.00

Event: June 25, 2013

Full Name (Last, First, Middle Initial)

C. Steve Israel For Congress Committee

Mailing Address PO Box 1400

City Melville State NY Zip Code 11747

Purpose of Disbursement
Event: June 25, 2013

011

Candidate Name

Rep. Steve J. Israel

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2013

Transaction ID : 51829602

Amount of Each Disbursement this Period

2000.00

Event: June 25, 2013

SUBTOTAL of Disbursements This Page (optional)..... ▶

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ann Wagner For Congress

Mailing Address PO Box 50

City Ballwin State MO Zip Code 63022

Purpose of Disbursement
Event: 5/23/13

Candidate Name

Rep. Ann Wagner

Office Sought: House
 Senate
 President
State: MO District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2013

Transaction ID : 51846581

Amount of Each Disbursement this Period

2000.00

Event: 5/23/13

Full Name (Last, First, Middle Initial)

B. Tiberi For Congress

Mailing Address 2931 E Dublin Granville Road
Suite 190

City Columbus State OH Zip Code 43231

Purpose of Disbursement
ACLI Event

Candidate Name

Rep. Pat J. Tiberi

Office Sought: House
 Senate
 President
State: OH District: 12

Disbursement For: 2014
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2013

Transaction ID : 51855472

Amount of Each Disbursement this Period

1000.00

ACLI Event

Full Name (Last, First, Middle Initial)

C. ERIC PAC

Mailing Address 25 E. Main Street, Suite 200

City Richmond State VA Zip Code 23219

Purpose of Disbursement
Event: Sept. 27-29

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 12 / 2013

Transaction ID : 51971431

Amount of Each Disbursement this Period

5000.00

Event: Sept. 27-29

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

8000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cantor For Congress

Mailing Address PO Box 17813

City Richmond State VA Zip Code 23226

Purpose of Disbursement
Event: Sept. 27-29

011

Candidate Name

Rep. Eric I. Cantor

Category/
Type

Office Sought: House
 Senate
 President
State: VA District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	3

Transaction ID : 51971436

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Event: Sept. 27-29

Full Name (Last, First, Middle Initial)

B. Alamo PAC

Mailing Address 1919 Congress Avenue, Suite 14
Frost Bank Plaza

City Austin State TX Zip Code 78701

Purpose of Disbursement
Event: ACLI 6/13/13

011

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	3

Transaction ID : 51972008

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Event: ACLI 6/13/13

Full Name (Last, First, Middle Initial)

C. Perlmutter For Congress

Mailing Address 3440 Youngfield Street
#264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
Event: June 4, 2013

011

Candidate Name

Rep. Edwin Perlmutter

Category/
Type

Office Sought: House
 Senate
 President
State: CO District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	3

Transaction ID : 51972018

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Event: June 4, 2013

SUBTOTAL of Disbursements This Page (optional)..... ▶

6	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

6	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JOHN T. EISENHARD

Mailing Address 3312 BRIDLEPATH RD

City EASTON State PA Zip Code 18045-2008

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 52193628

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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