

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

American Council of Life Insurers Political Action Committee

ADDRESS (number and street)

101 Constitution Ave., NW

Suite 700

Check if different than previously reported. (ACC)

Washington

DC

20001

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00147066

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Quarterly Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

X

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

08

01

2005

through

08

30

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. L Charles FitzGerald

Signature of Treasurer

Electronically Filed by Mr. L Charles FitzGerald

Date

07

18

2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

**FEC FORM 3X**  
(Rev. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

Report Covering the Period: From: <sup>M</sup>06 <sup>D</sup>01 <sup>Y</sup>2005 To: <sup>M</sup>06 <sup>D</sup>30 <sup>Y</sup>2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2005		51625.41
(b) Cash on Hand at Beginning of Reporting Period .....	20125.15	
(c) Total Receipts (from Line 19) .....	52668.35	172668.09
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	72793.50	224293.50
<hr/>		
7. Total Disbursements (from Line 31) .....	41000.00	192500.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	31793.50	31793.50
<hr/>		
9. Debts and Obligations owed <b>TO</b> the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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. 02/2003)

Page 3

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

Report Covering the Period: From: <sup>M</sup>06 <sup>D</sup>01 <sup>Y</sup>2005 To: <sup>M</sup>06 <sup>D</sup>30 <sup>Y</sup>2005

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) .....	21932.54	53857.74
(ii) Unitemized .....	2735.81	15810.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	24668.35	69668.09
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	28000.00	103000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	52668.35	172668.09
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) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
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 Transfer (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)) .....	52668.35	172668.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	52668.35	172668.09

**DETAILED SUMMARY PAGE**

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	41000.00	189500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	0.00
(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))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	3000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (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))..	41000.00	192500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	41000.00	192500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	52668.35	172668.09
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	52668.35	172668.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 28

(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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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)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Herbert M. Alison, Jr</b>		Date of Receipt M / D / Y 06 / 24 / 2005
Mailing Address 730 Third Avenue		Transaction ID: 7972386
City New York	State NY	Zip Code 10017-3206
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer TIAA-CREF	Occupation Chairman, President & Chief Executive	Aggregate Year-to-Date ▼ 5000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Michael J. Bartholomew</b>		Date of Receipt M / D / Y 06 / 06 / 2005
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77136283599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	Aggregate Year-to-Date ▼ 475.00
Receipt For: Primary General Other (specify) ▼		
		P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Mr. Bruce W. Boyea</b>		Date of Receipt M / D / Y 06 / 14 / 2005
Mailing Address 100 Court Street		Transaction ID: 7837070
City Binghamton	State NY	Zip Code 13501-3479
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Security Mutual Life Insurance Company	Occupation Chr of the Bd, President & CEO	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>5600.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 28  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. William M. Cameron</b>		Date of Receipt M / D / Y 06 / 20 / 2005
Mailing Address P. O. Box 25523		Transaction ID: 7837108
City Oklahoma City	State OK	Zip Code 73125-0523
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer American Fidelity Assurance Company	Occupation Chr of the Bd & CEO	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Eugene Choate</b>		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address 437D Peachtree Road, NE		Transaction ID: 7972360
City Atlanta	State GA	Zip Code 30319-3054
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer Bankers Fidelity Life Insurance Company	Occupation President	Aggregate Year-to-Date ▼ 2000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. G. Bryan Cox</b>		Date of Receipt M / D / Y 06 / 02 / 2005
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR7713768359B
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.10
Name of Employer American Council of Life Insurers	Occupation Senior Legislative Director	Aggregate Year-to-Date ▼ 280.04
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3038.10</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 8 / 28  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Ms. Linda H. Cunningham</b>		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77136243599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 97.16
Name of Employer American Council of Life Insurers	Occupation Director, Conference Development	P/R Deduction (\$48.58 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 582.96	

Full Name (Last, First, Middle Initial) <b>B. Ms. Joanne S. Daly</b>		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77136253599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer American Council of Life Insurers	Occupation Senior Vice President, Administration	P/R Deduction (\$75.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>C. Nancy S. Davenport</b>		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 101 Constitution Ave, NW Suite 700		Transaction ID: PR77142543599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer American Council of Life Insurers	Occupation Sr. Counsel & Director, NE Region	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>297.16</b>
TOTAL This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: PAGE 9 / 28  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Alane R. Dent</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Ave, NW Suite 700		Transaction ID: PR77144433599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 42.08
Name of Employer American Council of Life Insurers	Occupation Vice President, Federal Relations	P/R Deduction (\$21.04 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.03	

Full Name (Last, First, Middle Initial) <b>B. T. Scott Dixon</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue NW Suite 700 West		Transaction ID: PR77144493599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer American Council of Life Insurers	Occupation Controller	P/R Deduction (\$20.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Kimberly Dorgan</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77139513599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 288.48
Name of Employer American Council of Life Insurers	Occupation Senior Vice President, Federal Relatio	P/R Deduction (\$143.23 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1718.78	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>368.54</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 10 / 29  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Gary L. Eisenbarth</b>		Date of Receipt M / D / Y Y Y Y 06 / 20 / 2005
Mailing Address 1200 Jorie Boulevard		Transaction ID: 7837075
City Oak Brook	State IL	Zip Code 60523-2218
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer MTL Insurance Company	Occupation President & CEO	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. J. Bruce Ferguson</b>		Date of Receipt M / D / Y Y Y Y 06 / 06 / 2005
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77137323590
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 215.62
Name of Employer American Council of Life Insurers	Occupation Senior Vice President, State Relations	Aggregate Year-to-Date ▼ B10.78
Receipt For: Primary      General Other (specify) ▼		
		P/R Deduction (\$107.81 Semi-Monthly)

Full Name (Last, First, Middle Initial) <b>C. Geri Gaughan</b>		Date of Receipt M / D / Y Y Y Y 06 / 20 / 2005
Mailing Address 1200 Jorie Blvd.		Transaction ID: 7839089
City Oak Brook	State IL	Zip Code 60523-2218
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer MTL Insurance Company	Occupation General Counsel	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>965.62</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 29  
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 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. John P. Gemi</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 101 Constitution Ave, NW Suite 700		Transaction ID: PR77142873599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 95.84
Name of Employer American Council of Life Insurers	Occupation Senior Legislative Director	P/R Deduction (\$47.92 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 575.04	

Full Name (Last, First, Middle Initial) <b>B. Mr. Morris Goff</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77141833599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 72.42
Name of Employer American Council of Life Insurers	Occupation Assistant Vice President, Tax	P/R Deduction (\$36.21 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 434.52	

Full Name (Last, First, Middle Initial) <b>C. Ms. Susan Harvey</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 101 Constitution Ave, NW Suite 700 West		Transaction ID: PR77143523599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer American Council of Life Insurers	Occupation Director, Outreach	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>268.26</b>
TOTAL This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
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Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 / 29  
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 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Ms. Shawn Hausman</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77137853599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 39.58
Name of Employer American Council of Life Insurers	Occupation Vice President, Public Affairs	P/R Deduction (\$19.79 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 237.48	

Full Name (Last, First, Middle Initial) <b>B. Mr. Gary E. Hughes</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77135823599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 275.00
Name of Employer American Council of Life Insurers	Occupation Executive Vice Pres & General Counsel	P/R Deduction (\$137.50 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1650.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Michael J. Hunter</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77141883599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer American Council of Life Insurers	Occupation Executive Vice President & COO	P/R Deduction (\$250.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>814.58</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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FOR LINE NUMBER: PAGE 13 / 29  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Gregory F. Jenner</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue Nw Suite 700		Transaction ID: PR77525893599
City Washington	State DC	Zip Code 20080-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 375.00
Name of Employer American Council of Life Insurers	Occupation Executive Vice President, Taxes	P/R Deduction (\$187.50 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) <b>B. Frank Keating</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77141073599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 416.66
Name of Employer American Council of Life Insurers	Occupation President & CEO	P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1688.66	

Full Name (Last, First, Middle Initial) <b>C. Mr. Richard I. Klein</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700		Transaction ID: PR77142233599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer American Council of Life Insurers	Occupation Vice President and CFO	P/R Deduction (\$40.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>831.66</b>
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 14 / 29  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Ms. Linda L. Lanam</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77137733599
City	State	Zip Code
Washington	DC	20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>60.00</b>
Name of Employer American Council of Life Insurers	Occupation Vice President, Annuities	P/R Deduction (\$30.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>360.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Mr. David M. Leifer</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77137403599
City	State	Zip Code
Washington	DC	20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>89.64</b>
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	P/R Deduction (\$44.82 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>537.84</b>	

Full Name (Last, First, Middle Initial) <b>C. Mr. Daniel J. Mahoney</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77142093599
City	State	Zip Code
Washington	DC	20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>107.50</b>
Name of Employer American Council of Life Insurers	Occupation Vice President, Communications	P/R Deduction (\$53.75 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ <b>645.00</b>	

SUBTOTAL of Receipts This Page (optional) .....	<b>257.14</b>
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 15 / 29  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. John W. Mangan, CEBS</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Ave, NW Suite 700		Transaction ID: PR77137713599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer American Council of Life Insurers	Occupation Regional Vice President, State Relatio	P/R Deduction (\$100.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>B. Charles F. McAleer, III</b>		Date of Receipt M / D / Y
Mailing Address 1200 Jorie Blvd		Transaction ID: 7839088
City Oak Brook	State IL	Zip Code 60523-2218
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Mutual Trust Life Insurance Company	Occupation Senior Vice President, Chief Marketing	P/R Deduction (\$100.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Brands Nation</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77141893599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	550.00
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 29  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Donald G. Preston Jr.</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77136643599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 136.98
Name of Employer American Council of Life Insurers	Occupation Managing Director, Reinsurance	P/R Deduction (\$68.49 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 734.20	

Full Name (Last, First, Middle Initial) <b>B. Ms. Barbara A. Price</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77136603599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer American Council of Life Insurers	Occupation VP, Legislative & Regulatory Informati	P/R Deduction (\$20.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Arthur F. Ryan</b>		Date of Receipt M / D / Y
Mailing Address 751 Broad Street		08 / 13 / 2005
City Newark	State NJ	Zip Code 07102-5714
FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 7837064
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer The Prudential Insurance Company of Am	Occupation Chr of the Bd & CEO	P/R Deduction (\$20.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>5176.98</b>
TOTAL This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: PAGE 17 / 29  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Juan Carlos Scott</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Ave, NW Suite 700 West		Transaction ID: PR77142883599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 104.50
Name of Employer American Council of Life Insurers	Occupation Vice President, Federal Relations	P/R Deduction (\$52.25 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 433.50	

Full Name (Last, First, Middle Initial) <b>B. Mr. David R. Werthworth</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77137603599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 60.00
Name of Employer American Council of Life Insurers	Occupation Vice President, Research	P/R Deduction (\$30.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Dabra K. West</b>		Date of Receipt M / D / Y
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: PR77142103599
City Washington	State DC	Zip Code 20001-2133
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer American Council of Life Insurers	Occupation Senior Counsel & Director, Southern Re	P/R Deduction (\$50.00 Semi-Monthly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>284.50</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 29  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Ms. Dana Davis Young</b>		Date of Receipt M / D / Y Y Y Y 06 / 23 / 2005
Mailing Address One American Row		Transaction ID: 7972393
City Hartford	State CT	Zip Code 06102
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1250.00
Name of Employer The Phoenix Companies	Occupation Chairman, President & CEO	Aggregate Year-to-Date ▼ 1250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. James P. Zachry</b>		Date of Receipt M / D / Y Y Y Y 06 / 08 / 2005
Mailing Address Tower Life Building		Transaction ID: 7834979
City San Antonio	State TX	Zip Code 78205
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Tower Life Insurance Company	Occupation Chairman, President & CEO	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Edward J. Zora</b>		Date of Receipt M / D / Y Y Y Y 06 / 08 / 2005
Mailing Address 720 East Wisconsin Avenue		Transaction ID: 7839085
City Milwaukee	State WI	Zip Code 53202-4797
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1250.00
Name of Employer The Northwestern Mutual Life Insurance	Occupation President & Chief Executive Officer	Aggregate Year-to-Date ▼ 1250.00
Receipt For: Primary      General Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>21932.54</b>

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

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

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. CC Services INC Country PAC</b>		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address P.O. Box 2020		Transaction ID: 7838877
City Bloomington	State IL	Zip Code 67102
FEC ID number of contributing federal political committee. <b>C C00390871</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Calgrove Life Re PAC</b>		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address 1200 Bedford Street		Transaction ID: 7838474
City Stamford	State CT	Zip Code 06905
FEC ID number of contributing federal political committee. <b>C C00245001</b>		Amount of Each Receipt this Period 4500.00
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

Full Name (Last, First, Middle Initial) <b>C. Jefferson-Pilot Good Govt Committee</b>		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address P.O. Box 2100B		Transaction ID: 7972385
City Greensboro	State NC	Zip Code 27420
FEC ID number of contributing federal political committee. <b>C C00148528</b>		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>12000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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(check only one)

<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)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Minnesota Life PAC</b>		Date of Receipt M / D / Y 06 / 07 / 2005
Mailing Address c/o Allen Peterson, Treasurer 2385 Apache Court		Transaction ID: 7838468
City Mendota Heights	State MN	Zip Code 55120
FEC ID number of contributing federal political committee. <b>C</b> C00120006		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Phoenix Companies PAC</b>		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address One American Row		Transaction ID: 7972387
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. <b>C</b> C00168203		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>C. Protective Life Corp. PAC</b>		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address P. O. Box 2606		Transaction ID: 7838585
City Birmingham	State AL	Zip Code 35202
FEC ID number of contributing federal political committee. <b>C</b> C00161414		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>13000.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 21 / 29

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial) A. Union Central Life PAC		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address 1876 Waycross Road		Transaction ID: 7972394
City Cincinnati	State OH	Zip Code 45240
FEC ID number of contributing federal political committee. C C00179010		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	3000.00
TOTAL This Period (last page this line number only) .....	▶	28000.00

**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)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial)  
A. Andrews for Congress Committee

Mailing Address 215 Fourth Avenue  
Suite 20D

City Haddon Heights State NJ Zip Code 08035

Purpose of Disbursement  
Contribution: Robert E. Andrews (NJ-1-D)

Candidate Name  
Robert Andrews

Office Sought:  House  Senate  President  
Disbursement For: 2006  
 Primary  General  
Other (specify) ▼

State: NJ District: 1

011  
Category/  
Type

Transaction ID: 7834188  
Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Robert E.  
Andrews (NJ-1-D)

Full Name (Last, First, Middle Initial)  
B. Ben Cardin for Senate

Mailing Address 38 Ivy Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name  
Mr. Benjamin Cardin

Office Sought:  House  Senate  President  
Disbursement For: 2006  
 Primary  General  
Other (specify) ▼

State: MD District:

011  
Category/  
Type

Transaction ID: 7834171  
Date of Disbursement

06 / 06 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
C. Crowley for Congress

Mailing Address PO Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Contribution: Joseph Crowley (NY-7-D)

Candidate Name  
Joseph Crowley

Office Sought:  House  Senate  President  
Disbursement For: 2006  
 Primary  General  
Other (specify) ▼

State: NY District: 7

011  
Category/  
Type

Transaction ID: 7834187  
Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Joseph Crow-  
ley (NY-7-D)

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

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<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)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial)  
A. DeMint for Senate Committee

Mailing Address P.O. Box 2776

City Arlington State VA Zip Code 22202

Purpose of Disbursement  
2004 General Election Debt Retirement Co

Candidate Name  
Jim DeMint

Office Sought: House Disbursement For: 2004  
 Senate Primary  General  
 President  
 State: SC District: 2 Other (specify) ▼

State: SC District: 2

011  
Category/  
Type

Transaction ID: 7834168  
Date of Disbursement

06 / 06 / 2005

Amount of Each Disbursement this Period

500.00

2004 General Election Debt  
Retirement Contribution:  
Jim DeMint (SC-R)

Full Name (Last, First, Middle Initial)  
B. DSCC

Mailing Address 120 Maryland Avenue, NE

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Contribution: DSCC (-D)

Candidate Name

Office Sought: House Disbursement For:  
 Senate Primary  General  
 President  
 State: District: Other (specify) ▼

State: District:

011  
Category/  
Type

Transaction ID: 7834174  
Date of Disbursement

06 / 13 / 2005

Amount of Each Disbursement this Period

5000.00

Contribution: DSCC (-D)

Full Name (Last, First, Middle Initial)  
C. ERICPAC

Mailing Address 209 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution: ERICPAC (-R)

Candidate Name

Office Sought: House Disbursement For:  
 Senate Primary  General  
 President  
 State: District: Other (specify) ▼

State: District:

011  
Category/  
Type

Transaction ID: 7834173  
Date of Disbursement

06 / 13 / 2005

Amount of Each Disbursement this Period

2000.00

Contribution: ERICPAC (-R)

SUBTOTAL of Disbursements This Page (optional) ▶

7500.00

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)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial)  
A. Barney Frank for Congress

Mailing Address 38 Ivy Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution: Barney Frank (MA-4-D)

Candidate Name  
Barney Frank

Office Sought:  House  
Senate  
President

State: MA District 4

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 7834165  
Date of Disbursement

06 / 02 / 2005

Amount of Each Disbursement this Period

1612.88

Contribution: Barney Frank  
(MA-4-D)

Full Name (Last, First, Middle Initial)  
B. Corner Bakery

Mailing Address 529 14th Street, NW  
Suite F11

City Washington State DC Zip Code 20045

Purpose of Disbursement  
In-kind Contribution

Candidate Name  
Barney Frank

Office Sought:  House  
Senate  
President

State: MA District 4

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 7837060  
Date of Disbursement

06 / 02 / 2005

Amount of Each Disbursement this Period

387.12

In-kind Contribution

Full Name (Last, First, Middle Initial)  
C. Pennsylvanians for Kanjorski

Mailing Address 128 South Franklin Street

City Wilkes-Barre State PA Zip Code 18701

Purpose of Disbursement  
Contribution: Paul E. Kanjorski (PA-11-D)

Candidate Name  
Paul Kanjorski

Office Sought:  House  
Senate  
President

State: PA District 11

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 7834170  
Date of Disbursement

06 / 06 / 2005

Amount of Each Disbursement this Period

2000.00

Contribution: Paul E. Kanjorski  
(PA-11-D)

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)

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<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)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial)  
A. Manzullo for Congress

Mailing Address PO Box 16021

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
Contribution: Donald A. Manzullo (IL-16-

Candidate Name  
Donald Manzullo

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  Other (specify) ▼

State: IL District: 16

011  
Category/  
Type

Transaction ID: 7834183  
Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Donald A. Manzullo (IL-16-R)

Full Name (Last, First, Middle Initial)  
B. NRCC

Mailing Address 320 First Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution: NRCC (-R)

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District

011  
Category/  
Type

Transaction ID: 7834179  
Date of Disbursement

06 / 16 / 2005

Amount of Each Disbursement this Period

5000.00

Contribution: NRCC (-R)

Full Name (Last, First, Middle Initial)  
C. NRSC

Mailing Address 425 2nd Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution: NRSC (-R)

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District

011  
Category/  
Type

Transaction ID: 7834180  
Date of Disbursement

06 / 16 / 2005

Amount of Each Disbursement this Period

5000.00

Contribution: NRSC (-R)

SUBTOTAL of Disbursements This Page (optional) ▶

11000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Pomeroy for Congress

Mailing Address Post Office Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement  
Contribution: Earl Pomeroy (ND-1-D)

Candidate Name  
Earl Pomeroy

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
Other (specify) ▼

State: ND District: 1

011  
Category/  
Type

Transaction ID: 7834180

Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

2000.00

Contribution: Earl Pomeroy  
(ND-1-D)

Full Name (Last, First, Middle Initial)

**B.** Rangel for Congress

Mailing Address PO Box 5577  
Manhattanville Station

City New York State NY Zip Code 10027

Purpose of Disbursement  
Contribution: Charles B. Rangel (NY-15-D)

Candidate Name  
Charles Rangel

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
Other (specify) ▼

State: NY District: 15

011  
Category/  
Type

Transaction ID: 7834182

Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Charles B.  
Rangel (NY-15-D)

Full Name (Last, First, Middle Initial)

**C.** Rogers for Congress

Mailing Address P.O. Box 65796

City Washington State DC Zip Code 20035

Purpose of Disbursement  
Contribution: Mike Rogers (MI-8-R)

Candidate Name  
Mike Rogers

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
Other (specify) ▼

State: MI District: 8

011  
Category/  
Type

Transaction ID: 7834184

Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Mike Rogers  
(MI-8-R)

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial)  
A. Royce Campaign Committee

Mailing Address P.O. Box 2525

City Orange State CA Zip Code 92859

Purpose of Disbursement  
Contribution: Ed R. Royce (CA-40-R)

Candidate Name  
Ed Royce

Office Sought:  House  
Senate  
President

State: CA District: 40

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 7834166  
Date of Disbursement

06 / 06 / 2005

Amount of Each Disbursement this Period

2000.00

Contribution: Ed R. Royce  
(CA-40-R)

Full Name (Last, First, Middle Initial)  
B. Paul Ryan for Congress

Mailing Address 29 West Milwaukee Street  
Suite 201

City Janesville State WI Zip Code 53545

Purpose of Disbursement  
Contribution: Paul Ryan (WI-1-R)

Candidate Name  
Paul Ryan

Office Sought:  House  
Senate  
President

State: WI District: 1

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 7834172  
Date of Disbursement

06 / 06 / 2005

Amount of Each Disbursement this Period

2000.00

Contribution: Paul Ryan  
(WI-1-R)

Full Name (Last, First, Middle Initial)  
C. Pete Sessions for Congress

Mailing Address P O Box 38585

City Dallas State TX Zip Code 75238

Purpose of Disbursement  
Contribution: Pete Sessions (TX-32-R)

Candidate Name  
Pete Sessions

Office Sought:  House  
Senate  
President

State: TX District: 32

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 7834169  
Date of Disbursement

06 / 06 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Pete Sessions  
(TX-32-R)

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<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)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial)  
A. Simmons for Congress

Mailing Address P.O. Box 2776

City Arlington State VA Zip Code 22202

Purpose of Disbursement  
Contribution: Rob Simmons (CT-2-R)

Candidate Name  
Rob Simmons

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
Other (specify) ▼

State: CT District 2

011  
Category/  
Type

Transaction ID: 7834185  
Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Rob Simmons  
(CT-2-R)

Full Name (Last, First, Middle Initial)  
B. Talent for Senate

Mailing Address 507 Capitol Court, NE  
#100

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution: Jim M. Talent (MO-R)

Candidate Name  
Jim Talent

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
Other (specify) ▼

State: MO District 2

011  
Category/  
Type

Transaction ID: 7834186  
Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Jim M. Talent  
(MO-R)

Full Name (Last, First, Middle Initial)  
C. The Freedom Project

Mailing Address 111 C Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution: Freedom Project (OH-8-R)

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  
Other (specify) ▼

State: District

011  
Category/  
Type

Transaction ID: 7834167  
Date of Disbursement

06 / 06 / 2005

Amount of Each Disbursement this Period

2500.00

Contribution: Freedom Pro-  
ject (OH-8-R)

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
American Council of Life Insurers Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** Tiberi for Congress

Mailing Address 1200 Trinity Drive

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution: Patrick J. Tiberi (OH-12-R)

Candidate Name  
Patrick Tiberi

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
Other (specify) ▼

State: OH District: 12

011  
Category/  
Type

Transaction ID: 7834188

Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Patrick J. Tiberi (OH-12-R)

Full Name (Last, First, Middle Initial)

**B.** Jerry Weller For Congress

Mailing Address PO Box 15283

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution: Jerry Weller (IL-11-R)

Candidate Name  
Jerry Weller

Office Sought:  House  Senate  President  
Disbursement For: 2006  Primary  General  
Other (specify) ▼

State: IL District: 11

011  
Category/  
Type

Transaction ID: 7834189

Date of Disbursement

06 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

Contribution: Jerry Weller (IL-11-R)

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

41000.00