

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

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

FOR LINE NUMBER: PAGE 257 OF 577

(check only one)

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

New York Life Insurance Company Political Action Committee

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

A. Seguin, Brian, , Mr.,

Mailing Address 48 Fengler Road

City  
ScarboroughState  
MEZip Code  
04074-8490FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New York Life Insurance CompanyOccupation (for Individual)  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2019

Transaction ID : PR412386522325

Amount of Each Receipt this Period

19.24

☐ Memo Item

P/R Deduction (\$9.62 Bi-Weekly)

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

B. Chavez, Victor, , Mr.,

Mailing Address 12321 Louis Avenue

City  
WhittierState  
CAZip Code  
90605-4141FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New York Life Insurance CompanyOccupation (for Individual)  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2019

Transaction ID : PR412405422325

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Monthly)

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

C. Wang, Hailu, , Ms.,

Mailing Address 11 Schenck Avenue Apt. 1G

City  
Great NeckState  
NYZip Code  
11021-3607FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
New York Life Insurance CompanyOccupation (for Individual)  
Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

416.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2019

Transaction ID : PR412407422325

Amount of Each Receipt this Period

41.67

☐ Memo Item

P/R Deduction (\$41.67 Monthly)

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

85.91

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