

SCHEDULE A

ITEMIZED RECEIPTS

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

Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) American Council of Life Insurance PAC			
Full Name, Mailing Address and ZIP Code Philmore B. Anderson 1001 Pennsylvania Avenue, NW, Suite 500 - South Washington, DC 20004	Name of Employer American Council of Life Insurance Occupation Director, Federal Relations Aggregate Year-to-Date $\$ 829.05$	Date (month, day, year) 4/30/1999	Amount of Each Receipt this Period \$231.46
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code Robert K. Arenberg Washington, DC 20004-2599	Name of Employer American Council of Life Insurance Occupation Director, Political Affairs Aggregate Year-to-Date $\$ 323.64$	Date (month, day, year) 4/30/1999	Amount of Each Receipt this Period \$85.86
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code Angela J. Arnett Washington, DC 20004-2599	Name of Employer American Council of Life Insurance Occupation Senior Counsel Aggregate Year-to-Date $\$ 348.47$	Date (month, day, year) 4/30/1999	Amount of Each Receipt this Period \$87.54
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code Douglas P. Bates Washington, DC 20004-2599	Name of Employer American Council of Life Occupation Director, Federal Relations Aggregate Year-to-Date $\$ 320.00$	Date (month, day, year) 4/30/1999	Amount of Each Receipt this Period \$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code Barbara E. Bey Washington, DC 20004-2599	Name of Employer American Council of Life Occupation Vice President, Public Affairs Aggregate Year-to-Date $\$ 631.56$	Date (month, day, year) 4/30/1999	Amount of Each Receipt this Period \$159.08
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code John H. Biggs 730 Third Avenue New York, NY 10017-3206	Name of Employer Teachers Insurance and Annuity Occupation Chairman, President & CEO Aggregate Year-to-Date $\$ 3,000.00$	Date (month, day, year) 4/23/1999	Amount of Each Receipt this Period \$3,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code Arthur M. Burch CLU 2319 Hough Road Lancaster, SC 29720	Name of Employer Kanawha Insurance Company Occupation Executive Vice President Aggregate Year-to-Date $\$ 250.00$	Date (month, day, year) 4/23/1999	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 3,893.94
TOTAL This Period (last page this line number only)			