

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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**NAME OF COMMITTEE (In Full)**

National Association of Life Underwriters Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James H. Krueger, CLU, ChFC, MSM 4321 West College Ave. Ste 395 Appleton, WI 54914-3989	Self-employed	11/14/96	21.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance agent	Aggregate Year-to-Date \$ 273.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry M. Lambert, CLU, CFP 3780 Kilroy Airport Way Suite 510 Long Beach, CA 90806-6801	Self-employed	11/05/96	125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance agent	Aggregate Year-to-Date \$ 375.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leon L. Levy, CLU Broad and Walnut St 4th Fl Philadelphia, PA 19102-3803	Self-employed	11/05/96	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance agent	Aggregate Year-to-Date \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce C. Lichtenberg, LUTCF 4725 First Street #225 Pleasanton, CA 94566-7366	Self-employed	11/14/96	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance agent	Aggregate Year-to-Date \$ 550.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence E. Lounds, CLU G-3526 Miller Rd. Ste-B Flint, MI 48507-1236	Self-employed	11/14/96	42.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance agent	Aggregate Year-to-Date \$ 462.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Peter Lyons, CLU, ChFC, MSFS 800 South Street, Suite 660 Watermill Center Waltham, MA 02154-1439	Self-employed	11/14/96	33.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance agent	Aggregate Year-to-Date \$ 368.50	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis J. Manning, CLU, ChFC 201 Park Avenue S. #16-B New York, NY 10003-1601	Self-employed	11/25/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance agent	Aggregate Year-to-Date \$ 500.00	

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

1071.50

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