

# 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  
AEGON USA, LLC PAC

ADDRESS (number and street) 1001 Pennsylvania Avenue, NW  
Suite 500A South  
 Check if different than previously reported. (ACC)  
Washington DC 20004

2. **FEC IDENTIFICATION NUMBER** C00236414  
**3. IS THIS REPORT**  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)  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 (12G)  
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 04 01 2008 through 06 30 2008

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 Ms. Jeanne de Cervens

Signature of Treasurer Electronically Filed by Ms. Jeanne de Cervens Date 06 07 2011

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							
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**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

During review of our contributions and limits on the FEC reports on FEC.gov we noticed that a \$2,000 contribution to Bob Corker for Senate for the purpose of 2006 debt retirement was tied to the 2012 Primary Election.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
AEGON USA, LLC PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	X	Y	Y	Y	2	0	0	8		72390.69
X	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	93666.25									
(c) Total Receipts (from Line 19) .....	43564.68	80340.24								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	137230.93	152730.93								
7. Total Disbursements (from Line 31) .....	88000.00	103500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	49230.93	49230.93								
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**

Write or Type Committee Name  
AEGON USA, LLC PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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) .....	37528.00	59366.00
(ii) Unitemized .....	6025.16	20950.44
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	43553.16	80316.44
(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) .....	43553.16	80316.44
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.) .....	11.52	23.80
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)) .....	43564.68	80340.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	43564.68	80340.24

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.....	80000.00	95500.00
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.....	8000.00	8000.00
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 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))..	88000.00	103500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	88000.00	103500.00

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) .....	43553.16	80316.44
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	43553.16	80316.44
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 63
	<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"/>	<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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Patrick Patrick S Baird	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 549 Knollwood Dr SE	<b>Transaction ID:</b> 4619707
	City State Zip Code Cedar Rapids IA 52403	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Transamerica Life Insurance Co	Occupation Pres & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Diane Diane D Meiners	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 4202 Morelle Road NE	<b>Transaction ID:</b> 4619708
	City State Zip Code Cedar Rapids IA 52411	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Transamerica Life Insurance Co	Occupation Corp Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jill Jill A Handley	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 3551 Morel Court	<b>Transaction ID:</b> PR21028552596
	City State Zip Code Marion IA 52302	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Transamerica Life Insurance Co	Occupation Division General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6175.00</b>
<b>TOTAL</b> 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 / 63  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Ralph Ralph Lee Arnold

Mailing Address 2500 Silver Meadow Lane

City State Zip Code  
Westminster MD 21158

FEC ID number of contributing federal political committee. C

Name of Employer Monumental Life Insurance Co      Occupation SVP & COO

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21029532596

Amount of Each Receipt this Period 245.00

P/R Deduction (\$40.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Ross Ross J Bagshaw

Mailing Address 104 Van Buren Court

City State Zip Code  
Colleyville TX 76034

FEC ID number of contributing federal political committee. C

Name of Employer Transamerica Life Insurance Co      Occupation LTC President

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21030332596

Amount of Each Receipt this Period 539.00

P/R Deduction (\$77.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
James James A Beardsworth

Mailing Address 4899 Oak Grove Ct NE

City State Zip Code  
Cedar Rapids IA 52411

FEC ID number of contributing federal political committee. C

Name of Employer Transamerica Life Insurance Co      Occupation SVP, Treasurer & Corp Develop

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21032292596

Amount of Each Receipt this Period 406.00

P/R Deduction (\$58.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... 1190.00

**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 / 63
	<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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Todd Todd M Bergen	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 3190 Old Orchard Rd NE	<b>Transaction ID:</b> PR21033452596
	City State Zip Code Cedar Rapids IA 52402	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$58.00 Weekly)
Name of Employer Transamerica Life Insurance Co	Occupation Dir, Acquisitions	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) David David L Blankenship	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 4405 Oak Leaf Court NE	<b>Transaction ID:</b> PR21034772596
	City State Zip Code Cedar Rapids IA 52411	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$20.00 Weekly)
Name of Employer AEGON USA Realty Advisors, Inc	Occupation Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Kent Kent G Callahan	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 300 Stanyan Place	<b>Transaction ID:</b> PR21039972596
	City State Zip Code Alpharetta GA 30022	Amount of Each Receipt this Period 539.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$77.00 Weekly)
Name of Employer Transamerica Life Insurance Co	Occupation Mgr - Pension Sales & Mktg RU1	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>854.00</b>
<b>TOTAL</b> 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 / 63  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Thomas R Carey

Mailing Address 706 Ithica Ct.

City State Zip Code  
Fallston MD 21047-0000

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

Name of Employer Monumental Life Insurance Co  
Occupation District Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21040732596

Amount of Each Receipt this Period  
120.00

P/R Deduction (\$20.00 Semi-Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Marilyn Marilyn Carp

Mailing Address 7019 Pheasant Cross Dr.

City State Zip Code  
Baltimore MD 21209

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

Name of Employer Stonebridge Life Insurance Co  
Occupation Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2080.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21040952596

Amount of Each Receipt this Period  
1120.00

P/R Deduction (\$160.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Brenda Brenda K Clancy

Mailing Address 4060 Eagle Ridge Drive

City State Zip Code  
Cedar Rapids IA 52411

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

Name of Employer Transamerica Life Insurance Co  
Occupation EVP & COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21043402596

Amount of Each Receipt this Period  
700.00

P/R Deduction (\$100.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1940.00**

**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 11 / 63
	<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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Michele Michele M Coan	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 1904 Rolling Hills Trail	<b>Transaction ID:</b> PR21044042596
	City State Zip Code Fisherville KY 40023	Amount of Each Receipt this Period 210.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Monumental Life Insurance Co	Occupation Director, Business Support	P/R Deduction (\$30.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Arthur R Cohen	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 1150 South Olive St.	<b>Transaction ID:</b> PR21044412596
	City State Zip Code Los Angeles CA 91436	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Transamerica Life Insurance Co	Occupation Pro - Life Actuarial	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Robert F Colby	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 3 South Ridge Road	<b>Transaction ID:</b> PR21044462596
	City State Zip Code Larchmont NY 10538	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Transamerica Fincl Life Ins Co	Occupation Senior Vice President	P/R Deduction (\$20.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>500.00</b>
<b>TOTAL</b> 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 / 63
	<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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Catherine Catherine Collinson		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 1645 Vine St. Unit #713		<b>Transaction ID:</b> PR21044862596
	City Los Angeles	State CA	Zip Code 90028
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
	Name of Employer Transamerica Life Insurance Co Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Mgr - Strategic Planning Aggregate Year-to-Date ▼ 1300.00	P/R Deduction (\$110.00 Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) James Came James Cook		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 915 Round Hill Road		<b>Transaction ID:</b> PR21045382596
	City Fort Worth	State TX	Zip Code 76131
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 175.00
	Name of Employer Transamerica Life Insurance Co Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Vice Pres-Underwriting & Claim Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Glenn Glenn F Cunningham		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 14808 Henry Harrison Stillwell Dr		<b>Transaction ID:</b> PR21047382596
	City Huntersville	State NC	Zip Code 28078-8972
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 406.00
	Name of Employer Transamerica Life Insurance Co Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VP Executive I Aggregate Year-to-Date ▼ 754.00	P/R Deduction (\$58.00 Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1281.00
<b>TOTAL</b> 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 13 / 63  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Duane Duane A Davies

Mailing Address 11179 Willow Green Way

City State Zip Code  
Marriottsville MD 21104

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

Name of Employer Monumental Life Insurance Co  
Occupation VP Sales Support

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR21048592596

Amount of Each Receipt this Period 161.00

P/R Deduction (\$25.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Jeanne Jeanne de Cervens

Mailing Address 7300 Connecticut Avenue

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Monumental Life Insurance Co  
Occupation Dir, Federal Govt Relations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR21049032596

Amount of Each Receipt this Period 539.00

P/R Deduction (\$192.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Phyllis Phyllis A Dilbeck

Mailing Address 1119 Glenwood Rd

City State Zip Code  
Glendale CA 91202

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

Name of Employer Transamerica Life Insurance Co  
Occupation Mgr - Life Product Devel

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR21050722596

Amount of Each Receipt this Period 175.00

P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **875.00**

**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 14 / 63  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Philip She Philip Sherman Eckman

Mailing Address 8381 Hidden Ponds Alcove

City State Zip Code  
St Paul MN 55125-5000

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

Name of Employer  
Transamerica Life Insurance Co  
Occupation  
Pres & CEO, TRM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1001.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21053252596

Amount of Each Receipt this Period  
539.00

P/R Deduction (\$77.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
George George W Finley

Mailing Address 5529 Ventura Canyon Ave

City State Zip Code  
Sherman Oaks CA 91401

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

Name of Employer  
Transamerica Life Insurance Co  
Occupation  
Pro - Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21056432596

Amount of Each Receipt this Period  
140.00

P/R Deduction (\$40.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Robert Robert P Glowacki

Mailing Address 3508 San Bar Lane

City State Zip Code  
Colleyville TX 76034

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

Name of Employer  
Transamerica Life Insurance Co  
Occupation  
VP Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21061482596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **854.00**

**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 15 / 63  
(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)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
David David M Goldstein

Mailing Address 12048 Wood Ranch Road

City Granada Hills State CA Zip Code 91344

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

Name of Employer Transamerica Life Insurance Co Occupation Mgr - Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21061902596

Amount of Each Receipt this Period 175.00

P/R Deduction (\$25.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Eric Eric B Goodman

Mailing Address 13 River Hill Road

City Louisville State KY Zip Code 40207

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

Name of Employer AEGON USA Realty Advisors, Inc Occupation Chief Investment Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21062162596

Amount of Each Receipt this Period 560.00

P/R Deduction (\$58.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Brad Bradford L Gottschalk

Mailing Address 30 Sunset Lane

City West Hampton Beach State NY Zip Code 11978-2041

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

Name of Employer Transamerica Fincl Life Ins Co Occupation Pro - Life Actuarial

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21062332596

Amount of Each Receipt this Period 175.00

P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **910.00**

**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 16 / 63  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Jacqueline Jacqueline D Griffin  
 Mailing Address 2106 Highland Springs Pl  
 City State Zip Code  
 Louisville KY 40245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Monumental Life Insurance Co Occupation DIVISION PRES DFP  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00  
 Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21063252596  
 Amount of Each Receipt this Period 175.00  
 P/R Deduction (\$25.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Henry Henry Guy Hagan  
 Mailing Address 10710 Greenspring Av  
 City State Zip Code  
 Lutherville MD 21093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Monumental Life Insurance Co Occupation President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00  
 Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21064502596  
 Amount of Each Receipt this Period 700.00  
 P/R Deduction (\$100.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Thomas J Hartlage  
 Mailing Address 15511 Champion Lakes Pl  
 City State Zip Code  
 Louisville KY 40245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Monumental Life Insurance Co Occupation Executive VP Structured Produc  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00  
 Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21066502596  
 Amount of Each Receipt this Period 140.00  
 P/R Deduction (\$20.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1015.00  
**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 17 / 63  
(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)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Lynn Eliza Lynn Hartung

Mailing Address 2801 Crestridge Ct

City State Zip Code  
Grapevine TX 76051

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

Name of Employer  
Transamerica Life Insurance Co

Occupation  
Executive VP & COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21066532596

Amount of Each Receipt this Period  
210.00

P/R Deduction (\$35.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Scott Scott P Hassenstab

Mailing Address 300 Woodland Ct

City State Zip Code  
Hiawatha IA 52233

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

Name of Employer  
AEGON USA Realty Advisors, Inc

Occupation  
Director of Distressed Assets

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21066692596

Amount of Each Receipt this Period  
140.00

P/R Deduction (\$20.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Jay Jay A Hewitt

Mailing Address 2800 Weston Lane N

City State Zip Code  
Plymouth MN 55447

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

Name of Employer  
Transamerica Capital, Inc

Occupation  
National Account Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21068712596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$0.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **525.00**

**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 18 / 63  
(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)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Thomas M Kazar

Mailing Address 1241 Hidden Ct

City State Zip Code  
Wheaton IL 60187

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

Name of Employer  
AEGON Direct Marketing Svc Inc

Occupation  
VP Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21076582596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$25.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Kenneth Kenneth P Kilbane

Mailing Address 922 Calle Las Trancas

City State Zip Code  
Thousand Oaks CA 91360

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

Name of Employer  
Transamerica Life Insurance Co

Occupation  
Mgr - Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1001.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21077942596

Amount of Each Receipt this Period  
539.00

P/R Deduction (\$0.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
John John R Kneeland

Mailing Address 926 Boyson Rd. NE

City State Zip Code  
Cedar Rapids IA 52402

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

Name of Employer  
Transamerica Life Insurance Co

Occupation  
VP, Marketing & Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21078892596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **889.00**

**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 19 / 63
	<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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Peter Peter G Kunkel	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 103 Muirfield Road	<b>Transaction ID:</b> PR21080302596
	City State Zip Code Rockville Centre NY 11570	Amount of Each Receipt this Period 560.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$90.00 Weekly)
Name of Employer Transamerica Fincl Life Ins Co	Occupation President&Chief Operating Offr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James James R Landis	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 5617 Shiloh Lane NE	<b>Transaction ID:</b> PR21080952596
	City State Zip Code Cedar Rapids IA 52411	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$0.00 Weekly)
Name of Employer Transamerica Life Insurance Co	Occupation VP Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James James P Larkin	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 23 Orchard Farm Road	<b>Transaction ID:</b> PR21081322596
	City State Zip Code Port Washington NY 11050	Amount of Each Receipt this Period 140.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$20.00 Weekly)
Name of Employer Transamerica Fincl Life Ins Co	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>840.00</b>
<b>TOTAL</b> 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 20 / 63  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
John John A Madrak  
Mailing Address 360 Cassatt Rd  
City Berwyn State PA Zip Code 19312  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Stonebridge Life Insurance Co Occupation Programmer Analyst, Sr  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: PR21085702596  
Amount of Each Receipt this Period 140.00  
P/R Deduction (\$20.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Joseph Joseph J Masterson  
Mailing Address 11 Southminster Dr  
City White Plains State NY Zip Code 10604  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Transamerica Fincl Life Ins Co Occupation Senior Vice President  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: PR21087672596  
Amount of Each Receipt this Period 700.00  
P/R Deduction (\$100.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Kathy Kathy A Briney  
Mailing Address 175 27th St NW  
City Cedar Rapids State IA Zip Code 52405-4605  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Transamerica Life Insurance Co Occupation Mgr, Acctng  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: PR21089532596  
Amount of Each Receipt this Period 175.00  
P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1015.00  
**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 21 / 63  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Seth Seth D Miller

Mailing Address 1219 Greybrooke Place

City Oldsmar State FL Zip Code 34677

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

Name of Employer Western Reserve Life Assur Co.  
Occupation EVP, Specialized Dist Groups

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21092462596  
 Amount of Each Receipt this Period 175.00  
 P/R Deduction (\$58.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Scott Davi Scott David Millikin

Mailing Address 611 Boulder Dr

City Center Point State IA Zip Code 52213

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

Name of Employer Transamerica Life Insurance Co.  
Occupation To Be Assigned - Exempt

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21092682596  
 Amount of Each Receipt this Period 140.00  
 P/R Deduction (\$20.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Mark Mark W Mullin

Mailing Address 183 Abbotsford Rd

City Cedar Rapids State IA Zip Code 52403

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

Name of Employer Transamerica Life Insurance Co.  
Occupation To Be Assigned - Exempt

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21095262596  
 Amount of Each Receipt this Period 700.00  
 P/R Deduction (\$192.31 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1015.00

**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 22 / 63  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Paula Paula G Nelson

Mailing Address 18785 11th Avenue North

City Plymouth State MN Zip Code 55447

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

Name of Employer Transamerica Capital, Inc Occupation CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21096412596  
 Amount of Each Receipt this Period 175.00  
 P/R Deduction (\$25.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Larry Larry N Norman

Mailing Address 401 South Seas Dr #304

City Jupiter State FL Zip Code 33477

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

Name of Employer Transamerica Life Insurance Co Occupation Pres, FMG

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21097382596  
 Amount of Each Receipt this Period 700.00  
 P/R Deduction (\$100.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Lonny Joe Lonny Joe Olejniczak

Mailing Address 1425 Wicklow Drive

City Robins State IA Zip Code 52328

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

Name of Employer Transamerica Life Insurance Co Occupation Managing Dir

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21098202596  
 Amount of Each Receipt this Period 210.00  
 P/R Deduction (\$30.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1085.00

**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 23 / 63  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
John John A Oliver

Mailing Address 3540 Griffith Pk Blvd

City State Zip Code  
Los Angeles CA 90027

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

Name of Employer: Transamerica Life Insurance Co  
Occupation: Mgr - Advanced Life Ins RU1

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 30 / 2008  
**Transaction ID:** PR21098222596  
 Amount of Each Receipt this Period: 175.00  
 P/R Deduction (\$25.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Thomas Thomas P O'Neill

Mailing Address 11 Blenheim Farm Lane

City State Zip Code  
Phoenix MD 21131

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

Name of Employer: Transamerica Life Insurance Co  
Occupation: To Be Assigned - Exempt

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt: 06 / 30 / 2008  
**Transaction ID:** PR21098482596  
 Amount of Each Receipt this Period: 406.00  
 P/R Deduction (\$58.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
John John R Peterson

Mailing Address 14037 Baker Rd

City State Zip Code  
Durand IL 61024

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

Name of Employer: Transamerica Fincl Life Ins Co  
Occupation: Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 30 / 2008  
**Transaction ID:** PR21101942596  
 Amount of Each Receipt this Period: 175.00  
 P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 756.00

**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 24 / 63  
(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
							17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Charles Charles J Powers

Mailing Address 2575 Remington Drive

City State Zip Code  
West Linn OR 97068

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

Name of Employer: Transamerica Fincl Life Ins Co  
Occupation: VP - Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 30 / 2008  
Transaction ID: PR21103692596  
Amount of Each Receipt this Period: 175.00  
P/R Deduction (\$0.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Jeffrey L Rosen

Mailing Address 3703 Constantine Drive

City State Zip Code  
Prospect KY 40059

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

Name of Employer: Monumental Life Insurance Co  
Occupation: Senior Executive VP Product Ma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 30 / 2008  
Transaction ID: PR21109172596  
Amount of Each Receipt this Period: 175.00  
P/R Deduction (\$25.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Paul Paul E Rutledge

Mailing Address 3823 Beresford Road

City State Zip Code  
Charlotte NC 28211

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

Name of Employer: Transamerica Life Insurance Co  
Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt: 06 / 30 / 2008  
Transaction ID: PR21110142596  
Amount of Each Receipt this Period: 1050.00  
P/R Deduction (\$150.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1400.00

**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 25 / 63  
(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)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial) Douglas Douglas A Sarcia		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 424 Christena Lane		<b>Transaction ID:</b> PR21111392596
City West Chester	State PA	Zip Code 19380
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 350.00
Name of Employer Stonebridge Life Insurance Co	Occupation VP Int'l Strategic Develop	P/R Deduction (\$50.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

**B.**

Full Name (Last, First, Middle Initial) Arthur Car Arthur Schneider		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 3525 Cass Ct # 613		<b>Transaction ID:</b> PR21112402596
City Oak Brook	State IL	Zip Code 60523
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 280.00
Name of Employer Transamerica Life Insurance Co	Occupation SVP & Chief Tax Officer	P/R Deduction (\$40.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

**C.**

Full Name (Last, First, Middle Initial) Laura Laura E Scully		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 6504 Via Siena		<b>Transaction ID:</b> PR21113392596
City Rancho Palos Verde	State CA	Zip Code 90275
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175.00
Name of Employer Transamerica Life Insurance Co	Occupation Mgr - Marketing	P/R Deduction (\$25.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>805.00</b>
<b>TOTAL</b> 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 26 / 63  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Rick Rick L Seger

Mailing Address 4155 Willowbrook Dr.

City Marion State IA Zip Code 52302

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

Name of Employer Transamerica Life Insurance Co  
Occupation EVP, Specialized Dist Groups

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21113612596

Amount of Each Receipt this Period 175.00

P/R Deduction (\$25.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Steven Steven R Shepard

Mailing Address 1492 Ridge Top Way

City Clearwater State FL Zip Code 33765

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

Name of Employer Western Reserve Life Assurance Co  
Occupation Mgr - Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21114652596

Amount of Each Receipt this Period 245.00

P/R Deduction (\$35.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
David David D Shute

Mailing Address 29179 Valley Oak Place

City Santa Clarita State CA Zip Code 91390

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

Name of Employer Transamerica Life Insurance Co  
Occupation Mgr - Marketing RU1

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21115102596

Amount of Each Receipt this Period 140.00

P/R Deduction (\$20.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **560.00**

**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 27 / 63
	<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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Robert M Slaven	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 5905 Apache Road	<b>Transaction ID:</b> PR21116172596
	City State Zip Code Louisville KY 40207	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Monumental Life Insurance Co Occupation TOP DIVISION LEGAL DIR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$0.00 Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Brian Brian A Smith	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 17 Lauren Lane	<b>Transaction ID:</b> PR21116452596
	City State Zip Code Chester Springs PA 19425	Amount of Each Receipt this Period 539.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Stonebridge Life Insurance Co Occupation Chief Operating Officer ADMS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1001.00	P/R Deduction (\$77.00 Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Gayle Gayle L Sopousek	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 1512 Trail Bend Dr NW	<b>Transaction ID:</b> PR21117892596
	City State Zip Code Swisher IA 52338	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Transamerica Life Insurance Co Occupation To Be Assigned - Exempt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1064.00
<b>TOTAL</b> 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 / 63
	<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)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Geoffrey Geoffrey D Southwell

Mailing Address 14137 Bankside Dr

City State Zip Code  
Huntersville NC 28078

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

Name of Employer Transamerica Capital, Inc Occupation Division VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt: 06 / 30 / 2008  
Transaction ID: PR21118032596  
Amount of Each Receipt this Period: 539.00  
P/R Deduction (\$77.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Anne Anne M Spaes

Mailing Address 3025 Albrecht Drive

City State Zip Code  
Prospect KY 40059

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

Name of Employer Monumental Life Insurance Co Occupation Mgr - Business Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 30 / 2008  
Transaction ID: PR21118052596  
Amount of Each Receipt this Period: 175.00  
P/R Deduction (\$25.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Thomas J St Andrews

Mailing Address 4019 Forest View Ct NE

City State Zip Code  
Cedar Rapids IA 52411-6526

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

Name of Employer Transamerica Life Insurance Co Occupation VP, Re-Engineering

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 30 / 2008  
Transaction ID: PR21118592596  
Amount of Each Receipt this Period: 175.00  
P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **889.00**

**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 29 / 63
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Timmy Timmy L Stonehocker	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 5124 Spring Oak Ct NE	<b>Transaction ID:</b> PR21119842596
	City State Zip Code Cedar Rapids IA 52411	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$58.00 Weekly)
	Name of Employer Transamerica Life Insurance Co Occupation EVP, Agency Group & CEO, WFG Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Dean Dean L Stubbe	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 4635 Pine Valley Dr	<b>Transaction ID:</b> PR21120462596
	City State Zip Code Frisco TX 75034	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Weekly)
	Name of Employer Transamerica Life Insurance Co Occupation SVP Aircraft Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bryan Bryan M Sugimoto	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 13220 S Manhattan Place	<b>Transaction ID:</b> PR21120702596
	City State Zip Code Gardena CA 90249-1911	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Weekly)
	Name of Employer Transamerica Life Insurance Co Occupation Mgr - Securities Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>756.00</b>
<b>TOTAL</b> 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 30 / 63  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Craig Craig D Vermie  
Mailing Address 3500 Oriole Court NE  
City Cedar Rapids State IA Zip Code 52402  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Transamerica Life Insurance Co Occupation SVP & General Counsel  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 390.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: PR21126352596  
Amount of Each Receipt this Period 210.00  
P/R Deduction (\$40.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
William William A Waldie  
Mailing Address 3089 Prairie Du Chien Rd NE  
City Iowa City State IA Zip Code 52240  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Transamerica Life Insurance Co Occupation Gov/Industry Rels Mgr  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 325.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: PR21127272596  
Amount of Each Receipt this Period 175.00  
P/R Deduction (\$25.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Edward How Edward Walker  
Mailing Address 2409 Munford Drive  
City Fallston State MD Zip Code 21047  
FEC ID number of contributing federal political committee. **C**  
Name of Employer AEGON Direct Marketing Svc Inc Occupation Sr VP ADMS Spons Mkts/Bus Dev  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 260.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: PR21127542596  
Amount of Each Receipt this Period 140.00  
P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... **525.00**  
**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 31 / 63  
(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)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Thomas E Walsh

Mailing Address 4516 Dannywood Road

City State Zip Code  
Louisville KY 40220

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

Name of Employer Monumental Life Insurance Co  
Occupation Director Institutional Market

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR21127852596

Amount of Each Receipt this Period  
350.00

P/R Deduction (\$50.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Michael Michael A Wapp

Mailing Address 1076 Lyndhurst Dr

City State Zip Code  
Hiawatha IA 52233

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

Name of Employer Transamerica Life Insurance Co  
Occupation Dir, Business & IT Solutions

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR21128142596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$15.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Michelle Michelle M Weiner

Mailing Address 405 Cuttriss

City State Zip Code  
Park Ridge IL 60068

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

Name of Employer Transamerica Fincl Life Ins Co  
Occupation VP - Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR21129262596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

**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 32 / 63  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Gary Lee Gary Werkman

Mailing Address 95 Partridge Avenue

City Marion State IA Zip Code 52302

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

Name of Employer Transamerica Life Insurance Co Occupation Dir, Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21129612596

Amount of Each Receipt this Period 175.00

P/R Deduction (\$25.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Ronald Ronald L Ziegler

Mailing Address 1337 L Road NW

City Swisher State IA Zip Code 52338

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

Name of Employer Transamerica Life Insurance Co Occupation Pres, APS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1820.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21134522596

Amount of Each Receipt this Period 980.00

P/R Deduction (\$58.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Peter Peter J Zummo

Mailing Address 8 Somerset Lane

City Simsbury State CT Zip Code 06070

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

Name of Employer Transamerica Fincl Life Ins Co Occupation Senior Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21134762596

Amount of Each Receipt this Period 210.00

P/R Deduction (\$30.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1365.00

**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 33 / 63  
(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)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Brian Brian C Scott

Mailing Address 4345 Kenilworth Ct SE

City Cedar Rapids State IA Zip Code 52403

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

Name of Employer Transamerica Life Insurance Co Occupation Executive VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR2114022596

Amount of Each Receipt this Period 350.00

P/R Deduction (\$50.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Mark Mark L Thornton

Mailing Address 2065 Webley

City Plano State TX Zip Code 75023

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

Name of Employer Stonebridge Life Insurance Co Occupation Sr VP DSO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21151882596

Amount of Each Receipt this Period 140.00

P/R Deduction (\$0.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Diana Diana M Marchesi

Mailing Address 1870 Jackson St #304

City San Francisco State CA Zip Code 94109

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

Name of Employer Transamerica Life Insurance Co Occupation Pro - Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2008

**Transaction ID:** PR21157072596

Amount of Each Receipt this Period 175.00

P/R Deduction (\$58.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **665.00**

**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 34 / 63  
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Laurie Laurie A Renko

Mailing Address 300 Prescott Drive

City State Zip Code  
Chester Springs PA 19425

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

Name of Employer Occupation  
Stonebridge Life Insurance Co Sr VP Marketing Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2008

**Transaction ID:** PR21162412596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$25.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Matthew Matthew Burley

Mailing Address Suite 404  
270 N Main St

City State Zip Code  
Mansfield MA 02048

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

Name of Employer Occupation  
Transamerica Fincl Life Ins Co Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2008

**Transaction ID:** PR21163122596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$25.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Aaron Aaron Hill

Mailing Address 3817 Hibbs St

City State Zip Code  
Plano TX 75025

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

Name of Employer Occupation  
Stonebridge Life Insurance Co International Devlpmnt Mgr, Sr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2008

**Transaction ID:** PR21165962596

Amount of Each Receipt this Period  
140.00

P/R Deduction (\$20.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **490.00**

**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 35 / 63
	<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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Thomas D McGahey		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 4452 Longfellow		<b>Transaction ID:</b> PR21167152596
	City Plano	State TX	Zip Code 75093
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 539.00
	Name of Employer Stonebridge Life Insurance Co	Occupation Chief Administrative Officer	P/R Deduction (\$20.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Le Michael Wilson		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 14020 Blenheim Rd N		<b>Transaction ID:</b> PR21169352596
	City Phoenix	State MD	Zip Code 21131
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 140.00
	Name of Employer Stonebridge Life Insurance Co	Occupation VP Financial Reporting	P/R Deduction (\$20.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Joel Joel L Coleman		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 10927 Keene Road		<b>Transaction ID:</b> PR21172462596
	City Louisville	State KY	Zip Code 40241
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 175.00
	Name of Employer AEGON USA Realty Advisors, Inc	Occupation Head of Portfolio Management	P/R Deduction (\$25.00 Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	854.00
<b>TOTAL</b> 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 36 / 63  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Kenneth Kenneth A Klinger

Mailing Address PO BOX 10465

City CEDAR RAPIDS State IA Zip Code 52410-0465

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

Name of Employer Transamerica Life Insurance Co Occupation VP & Corp Actuary

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21176422596  
 Amount of Each Receipt this Period 406.00  
 P/R Deduction (\$58.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Dean Dean A Purvis

Mailing Address 9239 Woodriver Lane

City Charlotte State NC Zip Code 28277

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

Name of Employer AEGON Direct Marketing Svc Inc Occupation Sr VP & Bus Unit Leader, BPG

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21183932596  
 Amount of Each Receipt this Period 560.00  
 P/R Deduction (\$77.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Rodolfo Rodolfo Wehrhahn

Mailing Address 1335 Crossbill Ct

City Weston State FL Zip Code 33327

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

Name of Employer Transamerica Life Insurance Co Occupation VP V

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2008  
**Transaction ID:** PR21187902596  
 Amount of Each Receipt this Period 175.00  
 P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1141.00**

**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 37 / 63  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Shannon Shannon T Maloney  
Mailing Address 16599 Weatherfield Drive  
City Northville State MI Zip Code 48168  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Transamerica Life Insurance Co Occupation Pro - Retirement Plan Sales  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: PR21190062596  
Amount of Each Receipt this Period 140.00  
P/R Deduction (\$0.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Todd Todd H Fuhs  
Mailing Address 2404 Dundee road  
City Louisville State KY Zip Code 40205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Monumental Life Insurance Co Occupation Chief Actuary  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: PR21191502596  
Amount of Each Receipt this Period 280.00  
P/R Deduction (\$40.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
John John N Monnen  
Mailing Address 2575 Marquis Dr  
City Dunedin State FL Zip Code 34698-2315  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Western Reserve Life Assur Co Occupation Asst Dir, Internal Audit  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1001.00  
Date of Receipt 06 / 30 / 2008  
Transaction ID: PR21192992596  
Amount of Each Receipt this Period 539.00  
P/R Deduction (\$77.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 959.00  
**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 38 / 63  
(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)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
David David O. Wesley

Mailing Address 4929 Park Phillips Ct

City State Zip Code  
Charlotte NC 28210

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

Name of Employer Transamerica Life Insurance Co  
Occupation VP IV

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 377.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21194332596

Amount of Each Receipt this Period  
203.00

P/R Deduction (\$29.00 Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Brent Brent L Nemece

Mailing Address 7001 New Bern Court

City State Zip Code  
Prospect KY 40059

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

Name of Employer Monumental Life Insurance Co  
Occupation Director Financial Analysis -

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21201672596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$25.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Gregary Gregary M Goings

Mailing Address 2035 Geode Street

City State Zip Code  
Marion IA 52302

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

Name of Employer Transamerica Life Insurance Co  
Occupation Asst Dir, Internal Audit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21204282596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$25.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **553.00**

**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 39 / 63  
(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)  
AEGON USA, LLC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Monte Holm

Mailing Address 11315 Johns Creek Parkway

City State Zip Code  
Duluth GA 89027

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

Name of Employer  
World Financial Group, Inc.

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
693.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21204892596

Amount of Each Receipt this Period  
231.00

P/R Deduction (\$77.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
Christine Christine Sumner Newlin

Mailing Address 2420 Falbrook Drive NE

City State Zip Code  
Cedar Rapids IA 52402

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

Name of Employer  
AEGON USA Realty Advisors, Inc

Occupation  
Mgr, Acctng

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21210072596

Amount of Each Receipt this Period  
175.00

P/R Deduction (\$1.00 Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
Todd Todd B Tullous

Mailing Address 7501 Wallops Mill Pond Rd

City State Zip Code  
New Church VA 23315

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

Name of Employer  
Monumental Life Insurance Co

Occupation  
District Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** PR21212192596

Amount of Each Receipt this Period  
150.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **556.00**

**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 40 / 63
	<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)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
Byron Byron E Anderson

Mailing Address 5 Newlands St

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Monumental Life Insurance Co  
Occupation Asst Dir, Federal Gov Relation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR21212312596

Amount of Each Receipt this Period 420.00

P/R Deduction (\$60.00 Weekly)

**B.** Full Name (Last, First, Middle Initial)  
Joseph Joseph S Boan

Mailing Address 307 Tunbridge Rd

City State Zip Code  
Baltimore MD 21212

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

Name of Employer Transamerica Capital, Inc  
Occupation Division VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR21213482596

Amount of Each Receipt this Period 175.00

P/R Deduction (\$33.00 Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Joseph A Fournier

Mailing Address 4 Manhattanville Rd

City State Zip Code  
Purchase NY 06903

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

Name of Employer Transamerica Fincl Life Ins Co  
Occupation VP - Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 754.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR21235082596

Amount of Each Receipt this Period 406.00

P/R Deduction (\$58.00 Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1001.00

**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 41 / 63
	<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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Alex Alex Beguiristain	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 3401 Granada Blvd	<b>Transaction ID:</b> PR22067032596
	City State Zip Code Coral Gables FL 33134	Amount of Each Receipt this Period 539.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Transamerica Capital, Inc Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1001.00	P/R Deduction (\$77.00 Weekly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Matthew Ja Matthew Collins	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 2415 O Ave NW	<b>Transaction ID:</b> PR22363722596
	City State Zip Code Cedar Rapids IA 52405	Amount of Each Receipt this Period 175.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Transamerica Life Insurance Co Occupation: Lead Prgrmr Alyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Weekly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Lance Lance R Larsen	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 2150 Glen Oaks Drive	<b>Transaction ID:</b> PR22364942596
	City State Zip Code Coralville IA 52241	Amount of Each Receipt this Period 406.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Transamerica Life Insurance Co Occupation: Annuity Product VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 754.00	P/R Deduction (\$0.00 Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1120.00
<b>TOTAL</b> 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 42 / 63	
	(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"/> 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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Angela Angela M Charipar		Date of Receipt	
	Mailing Address 2021 5th Ave SE		M M / D D / Y Y Y Y 06 / 30 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> PR24067422596
	Cedar Rapids	IA	52403	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		406.00		
Name of Employer Transamerica Life Insurance Co		Occupation Grassroots & PAC Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 464.00		
				P/R Deduction (\$58.00 Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	406.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	37528.00

# 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)  
AEGON USA, LLC PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Roy Blunt</p> <p>Mailing Address PO Box 410182</p> <p>City Kansas City State MO Zip Code 64141</p> <p>Purpose of Disbursement R-MO-7, Event 4/23/08</p> <p>Candidate Name Rep. Roy Blunt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4249714 <b>Date of Disbursement</b> 04 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>R-MO-7, Event 4/23/08</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Shelby For U S Senate</p> <p>Mailing Address Post Office Box 1091</p> <p>City Tuscaloosa State AL Zip Code 35403</p> <p>Purpose of Disbursement R-AL, Event 4/10/08</p> <p>Candidate Name Sen. Richard C. Shelby</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AL District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4249715 <b>Date of Disbursement</b> 04 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>R-AL, Event 4/10/08</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends Of Gordon Smith</p> <p>Mailing Address 228 S Washington Ste 115</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement R-OR, Event 2/27/08 Funds Reported On &lt;Enter Report Name Here&gt;</p> <p>Candidate Name Sen. Gordon H. Smith</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4263544 <b>Date of Disbursement</b> 03 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p><b>[MEMO ITEM]</b> R-OR, Event 2/27/08 Funds Reported On &lt;Enter Report Name Here&gt;</p>

**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)  
AEGON USA, LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends Of Gordon Smith	Transaction ID: 4263545 Date of Disbursement 04 / 09 / 2008
	Mailing Address 228 S Washington Ste 115	Amount of Each Disbursement this Period 1000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement R-OR, Event 2/27/08 Re-designated funds for trans. dated 3/6/2008	011 Category/ Type
	Candidate Name Sen. Gordon H. Smith	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> R-OR, Event 2/27/08 Re-designated funds for trans. dated 3/6/2008

B.	Full Name (Last, First, Middle Initial) Cummings For Congress Campaign Committee	Transaction ID: 4264220 Date of Disbursement 04 / 10 / 2008
	Mailing Address PO Box 1631	Amount of Each Disbursement this Period 1000.00
	City Baltimore State MD Zip Code 21203	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Elijah E. Cummings	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mcconnell Senate Committee '14	Transaction ID: 4264221 Date of Disbursement 04 / 10 / 2008
	Mailing Address PO Box 1496	Amount of Each Disbursement this Period 3000.00
	City Louisville State KY Zip Code 40201	
	Purpose of Disbursement R-KY, 4/16/08 Event	011 Category/ Type
	Candidate Name Sen. Mitch McConnell	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		R-KY, 4/16/08 Event

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<b>TOTAL</b> 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

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(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)  
AEGON USA, LLC PAC

A.	Full Name (Last, First, Middle Initial) Coleman For Senate 08	Transaction ID: 4264222 Date of Disbursement 04 / 10 / 2008
	Mailing Address 7300 Hudson Blvd Ste 270	Amount of Each Disbursement this Period 2000.00
	City St Paul State MN Zip Code 55128	
	Purpose of Disbursement R-MN, 4/17/08 Event Candidate Name Sen. Norm Coleman Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District:	011 Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	R-MN, 4/17/08 Event

B.	Full Name (Last, First, Middle Initial) The Daniel Webster PAC	Transaction ID: 4264223 Date of Disbursement 04 / 10 / 2008
	Mailing Address P.O. Box 519	Amount of Each Disbursement this Period 1000.00
	City Rye State NH Zip Code 03870	
	Purpose of Disbursement Sununu-R-NH-4/23/08 Event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Sununu-R-NH-4/23/08 Event

C.	Full Name (Last, First, Middle Initial) Salazar For Senate	Transaction ID: 4264292 Date of Disbursement 04 / 10 / 2008
	Mailing Address PO Box 600	Amount of Each Disbursement this Period 1000.00
	City Denver State CO Zip Code 80201	
	Purpose of Disbursement D-CO, 4/15/08 Event Candidate Name Sen. Ken L. Salazar Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	D-CO, 4/15/08 Event

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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(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)  
AEGON USA, LLC PAC

<b>A.</b> Full Name (Last, First, Middle Initial) People for English Mailing Address P.O. Box 1940 City Erie State PA Zip Code 16507 Purpose of Disbursement R-PA-3rd, 4/24/08 Event Candidate Name Phil English Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4264359 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00 R-PA-3rd, 4/24/08 Event

<b>B.</b> Full Name (Last, First, Middle Initial) Pennsylvanians For Kanjorski Mailing Address 103 South Hanover Street City Nanticoke State PA Zip Code 18634 Purpose of Disbursement D-PA-11, 4/1/08 Event Candidate Name Rep. Paul E. Kanjorski Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4311068 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 D-PA-11, 4/1/08 Event

<b>C.</b> Full Name (Last, First, Middle Initial) Pennsylvanians For Kanjorski Mailing Address 103 South Hanover Street City Nanticoke State PA Zip Code 18634 Purpose of Disbursement D-PA-11, 4/15/08 Event Candidate Name Rep. Paul E. Kanjorski Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4311070 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 D-PA-11, 4/15/08 Event

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

**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)  
AEGON USA, LLC PAC

A.	Full Name (Last, First, Middle Initial) NewDem PAC	Transaction ID: 4311110 Date of Disbursement
	Mailing Address 607 14th Street Suite 800	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Event 4/23/08	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type <input type="text" value="011"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Event 4/23/08

B.	Full Name (Last, First, Middle Initial) Ed Royce For Congress	Transaction ID: 4311112 Date of Disbursement
	Mailing Address P.O. Box 2525	<input type="text" value="04"/> / <input type="text" value="17"/> / <input type="text" value="2008"/>
	City Orange State CA Zip Code 92859	Amount of Each Disbursement this Period
	Purpose of Disbursement R-CA-40, 4/21/08 Event	<input type="text" value="1000.00"/>
	Candidate Name Rep. Edward R. Royce	Category/Type <input type="text" value="011"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		R-CA-40, 4/21/08 Event

C.	Full Name (Last, First, Middle Initial) FINANCIAL SERVICES ROUNDTABLE PAC	Transaction ID: 4317126 Date of Disbursement
	Mailing Address 1001 Pennsylvania Ave., NW Suite 500 South	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20004	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type <input type="text" value="011"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)  
AEGON USA, LLC PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Council of Life Insurers PAC</p> <p>Mailing Address 101 Constitution Ave, NW, #700</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4317129 <b>Date of Disbursement</b> 04 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/Type</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Stephanie Tubbs Jones For Us Congress</p> <p>Mailing Address 3729 Silsby Rd</p> <p>City University Heights State OH Zip Code 44118</p> <p>Purpose of Disbursement D-OH, 4/30/08 Event Candidate Name Rep. Stephanie Tubbs Jones</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 11</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4317130 <b>Date of Disbursement</b> 04 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p> <p>D-OH, 4/30/08 Event</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Becerra For Congress</p> <p>Mailing Address P.O. Box 261060</p> <p>City Los Angeles State CA Zip Code 90026</p> <p>Purpose of Disbursement D-CA-31, Event 5/6/08 Candidate Name Rep. Xavier Becerra</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4334618 <b>Date of Disbursement</b> 05 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>011 Category/Type</p> <p>D-CA-31, Event 5/6/08</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

10000.00

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





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

Use separate schedule(s)  
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Detailed Summary Page

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(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)  
AEGON USA, LLC PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kline For Congress</p> <p>Mailing Address 101 W Burnsville Pkwy Suite 104</p> <p>City Burnsville State MN Zip Code 55337</p> <p>Purpose of Disbursement R-MN-2, Event 5/9/08</p> <p>Candidate Name Rep. John P. Kline</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4334627 <b>Date of Disbursement</b> 05 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>R-MN-2, Event 5/9/08</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Latham For Congress</p> <p>Mailing Address PO Box 8237</p> <p>City Des Moines State IA Zip Code 50301</p> <p>Purpose of Disbursement R-IA-4, Event 5/19/08</p> <p>Candidate Name Rep. Thomas P. Latham</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4334628 <b>Date of Disbursement</b> 05 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>R-IA-4, Event 5/19/08</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bob Corker for Senate</p> <p>Mailing Address 518 Georgia Avenue Second Floor</p> <p>City Chattanooga State TN Zip Code 37403</p> <p>Purpose of Disbursement R-TN, Event 5/6/08 (2006 Debt Retirement)</p> <p>Candidate Name Bob Corker</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District:</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ General Debt 2006</p>	<p><b>Transaction ID:</b> 4334634 <b>Date of Disbursement</b> 05 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>R-TN, Event 5/6/08 (2006 Debt Retirement)</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

7000.00

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

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

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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)  
AEGON USA, LLC PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Grassley Committee Inc</p> <p>Mailing Address PO Box 1000</p> <p>City Des Moines State IA Zip Code 50304</p> <p>Purpose of Disbursement R-IA, Event 6/3/08</p> <p>Candidate Name Sen. Charles E. Grassley</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4334639 <b>Date of Disbursement</b> 05 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>R-IA, Event 6/3/08</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Rangel For Congress</p> <p>Mailing Address PO Box 5577</p> <p>City New York State NY Zip Code 10027</p> <p>Purpose of Disbursement D-NY-15, Event 6/26/08</p> <p>Candidate Name Rep. Charles B. Rangel</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4334647 <b>Date of Disbursement</b> 05 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>D-NY-15, Event 6/26/08</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ed Royce For Congress</p> <p>Mailing Address P.O. Box 2525</p> <p>City Orange State CA Zip Code 92859</p> <p>Purpose of Disbursement R-CA-40th, Event 5/7/08</p> <p>Candidate Name Rep. Edward R. Royce</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4334649 <b>Date of Disbursement</b> 05 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p> <p>R-CA-40th, Event 5/7/08</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6500.00

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

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

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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)  
AEGON USA, LLC PAC

A.	Full Name (Last, First, Middle Initial) U. S. Chamber of Commerce	Transaction ID: 4334666 Date of Disbursement 05 / 14 / 2008
	Mailing Address 1615 H Street, NW	Amount of Each Disbursement this Period 5000.00
	City Washigton State DC Zip Code 20062	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contribution

B.	Full Name (Last, First, Middle Initial) Grassley Committee Inc	Transaction ID: 4347292 Date of Disbursement 05 / 15 / 2008
	Mailing Address PO Box 1000	Amount of Each Disbursement this Period -2500.00
	City Des Moines State IA Zip Code 50304	
	Purpose of Disbursement Void - Grassley Committee, Inc. Candidate Name Sen. Charles E. Grassley	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Void - Grassley Committee, Inc.

C.	Full Name (Last, First, Middle Initial) Grassley Committee Inc	Transaction ID: 4347293 Date of Disbursement 05 / 15 / 2008
	Mailing Address PO Box 1000	Amount of Each Disbursement this Period 1000.00
	City Des Moines State IA Zip Code 50304	
	Purpose of Disbursement R-IA, Event 6/3/08 Candidate Name Sen. Charles E. Grassley	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		R-IA, Event 6/3/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> 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)  
AEGON USA, LLC PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Van Hollen For Congress</p> <p>Mailing Address 10537 St. Paul St.</p> <p>City Kensington State MD Zip Code 20895</p> <p>Purpose of Disbursement D-MD-8, Event 6/4/08</p> <p>Candidate Name Rep. Chris Van Hollen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MD District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4355207 <b>Date of Disbursement</b> 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p> <p>D-MD-8, Event 6/4/08</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ben Cardin For Senate</p> <p>Mailing Address P.O. Box 21093</p> <p>City Catonsville State MD Zip Code 21228</p> <p>Purpose of Disbursement D-MD, Event 5/22/08</p> <p>Candidate Name Sen. Benjamin Cardin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MD District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4359942 <b>Date of Disbursement</b> 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>D-MD, Event 5/22/08</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Loeb sack For Congress</p> <p>Mailing Address PO Box 2720</p> <p>City Cedar Rapids State IA Zip Code 52406</p> <p>Purpose of Disbursement D-IA-2, Event 5/20/08</p> <p>Candidate Name Mr. David Loeb sack</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District: 02</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4359948 <b>Date of Disbursement</b> 05 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>D-IA-2, Event 5/20/08</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<b>TOTAL</b> 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)  
AEGON USA, LLC PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Sessions Senate Committee Inc</p> <p>Mailing Address P O Box 4278</p> <p>City Montgomery State AL Zip Code 36103</p> <p>Purpose of Disbursement R-AL, Event 5/22/08</p> <p>Candidate Name Sen. Jeff Sessions</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AL District:</p>	<p><b>Transaction ID:</b> 4364511</p> <p>Date of Disbursement 05 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>R-AL, Event 5/22/08</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Grassley Committee Inc</p> <p>Mailing Address PO Box 1000</p> <p>City Des Moines State IA Zip Code 50304</p> <p>Purpose of Disbursement R-IA, Event 6/11/08</p> <p>Candidate Name Sen. Charles E. Grassley</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p><b>Transaction ID:</b> 4364782</p> <p>Date of Disbursement 05 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>R-IA, Event 6/11/08</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens For Harkin</p> <p>Mailing Address P O Box 811</p> <p>City Des Moines State IA Zip Code 50304</p> <p>Purpose of Disbursement D-IA</p> <p>Candidate Name Sen. Tom Harkin</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p><b>Transaction ID:</b> 4378041</p> <p>Date of Disbursement 06 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p> <p>D-IA</p>

**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)  
AEGON USA, LLC PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) King For Congress</p> <p>Mailing Address 116 N Main St. PO Box 400</p> <p>City Early State IA Zip Code 50535</p> <p>Purpose of Disbursement R-NY-3rd, Event 6/3/08</p> <p>Candidate Name Rep. Steve A. King</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4378042 <b>Date of Disbursement</b> 06 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>R-NY-3rd, Event 6/3/08</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Armstrong for Congress</p> <p>Mailing Address P.O. Box 4475</p> <p>City Englewood State CO Zip Code 80155-4475</p> <p>Purpose of Disbursement R-CO-6th, Event 6/3/08</p> <p>Candidate Name Wil Armstrong</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 06</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4378120 <b>Date of Disbursement</b> 06 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>R-CO-6th, Event 6/3/08</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Texans For Senator John Cornyn Inc</p> <p>Mailing Address PO Box 13026</p> <p>City Austin State TX Zip Code 78711</p> <p>Purpose of Disbursement R-TX, Event 6/16/08</p> <p>Candidate Name Sen. John Cornyn</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4390634 <b>Date of Disbursement</b> 06 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p> <p>R-TX, Event 6/16/08</p>

**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)  
AEGON USA, LLC PAC

**A.** Full Name (Last, First, Middle Initial)  
McConnell Senate Committee '14

Mailing Address PO Box 1496

City Louisville State KY Zip Code 40201

Purpose of Disbursement  
R-KY, Event 6/18/08

Candidate Name  
Sen. Mitch McConnell

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: KY District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** 4390636  
Date of Disbursement

/

Amount of Each Disbursement this Period

R-KY, Event 6/18/08

**B.** Full Name (Last, First, Middle Initial)  
Barney Frank For Congress Committee

Mailing Address PO Box 260

City Newtonville State MA Zip Code 02460

Purpose of Disbursement  
D-MA-4, Event 6/2/08

Candidate Name  
Rep. Barney Frank

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MA District: 04

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** 4390638  
Date of Disbursement

/

Amount of Each Disbursement this Period

D-MA-4, Event 6/2/08

**C.** Full Name (Last, First, Middle Initial)  
Carney For Congress

Mailing Address P.O. Box A

City Clarks Summit State PA Zip Code 18411

Purpose of Disbursement  
D-PA-10, Event 6/11/08

Candidate Name  
Rep. Christopher P. Carney

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 10

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** 4390640  
Date of Disbursement

/

Amount of Each Disbursement this Period

D-PA-10, Event 6/11/08

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

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



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

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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)  
AEGON USA, LLC PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends Of John Boehner</p> <p>Mailing Address 7908 Cincinnati Dayton Road Suite I</p> <p>City West Chester State OH Zip Code 45069</p> <p>Purpose of Disbursement R-OH-8, Event 6/24/08</p> <p>Candidate Name Rep. John A. Boehner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4390641 <b>Date of Disbursement</b> 06 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>R-OH-8, Event 6/24/08</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mcconnell Senate Committee '14</p> <p>Mailing Address PO Box 1496</p> <p>City Louisville State KY Zip Code 40201</p> <p>Purpose of Disbursement Void - McConnell Senate Committee '08</p> <p>Candidate Name Sen. Mitch McConnell</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4390644 <b>Date of Disbursement</b> 06 / 09 / 2008</p> <p>Amount of Each Disbursement this Period -1000.00</p> <p>Void - McConnell Senate Committee '08</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Texans For Senator John Cornyn Inc</p> <p>Mailing Address PO Box 13026</p> <p>City Austin State TX Zip Code 78711</p> <p>Purpose of Disbursement Void - Texans For Senator John Cornyn Inc</p> <p>Candidate Name Sen. John Cornyn</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4390645 <b>Date of Disbursement</b> 06 / 09 / 2008</p> <p>Amount of Each Disbursement this Period -2000.00</p> <p>Void - Texans For Senator John Cornyn Inc</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

-1000.00

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

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

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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)  
AEGON USA, LLC PAC

A.	Full Name (Last, First, Middle Initial) Friends Of John Boehner	Transaction ID: 4390646 Date of Disbursement 06 / 09 / 2008
	Mailing Address 7908 Cincinnati Dayton Road Suite I	Amount of Each Disbursement this Period -2000.00
	City West Chester State OH Zip Code 45069	
	Purpose of Disbursement Void - Friends Of John Boehner	011 Category/ Type
	Candidate Name Rep. John A. Boehner	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Void - Friends Of John Boehner

B.	Full Name (Last, First, Middle Initial) Carney For Congress	Transaction ID: 4390647 Date of Disbursement 06 / 09 / 2008
	Mailing Address P.O. Box A	Amount of Each Disbursement this Period -1000.00
	City Clarks Summit State PA Zip Code 18411	
	Purpose of Disbursement Void - Carney For Congress	011 Category/ Type
	Candidate Name Rep. Christopher P. Carney	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Void - Carney For Congress

C.	Full Name (Last, First, Middle Initial) Carney For Congress	Transaction ID: 4390651 Date of Disbursement 06 / 09 / 2008
	Mailing Address P.O. Box A	Amount of Each Disbursement this Period 1000.00
	City Clarks Summit State PA Zip Code 18411	
	Purpose of Disbursement D-PA-10, Event 6/11/08	011 Category/ Type
	Candidate Name Rep. Christopher P. Carney	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		D-PA-10, Event 6/11/08

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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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)  
AEGON USA, LLC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) McConnell Senate Committee '14		Transaction ID: 4390654	
	Mailing Address PO Box 1496		Date of Disbursement 06 / 09 / 2008	
	City Louisville	State KY	Zip Code 40201	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement R-KY, Event 6/18/08		Category/ Type 011	R-KY, Event 6/18/08
Candidate Name Sen. Mitch McConnell				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KY District:				
<b>B.</b>	Full Name (Last, First, Middle Initial) Texans For Senator John Cornyn Inc		Transaction ID: 4390656	
	Mailing Address PO Box 13026		Date of Disbursement 06 / 09 / 2008	
	City Austin	State TX	Zip Code 78711	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement R-TX, Event 6/16/08		Category/ Type 011	R-TX, Event 6/16/08
Candidate Name Sen. John Cornyn				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TX District:				
<b>C.</b>	Full Name (Last, First, Middle Initial) Friends Of John Boehner		Transaction ID: 4390657	
	Mailing Address 7908 Cincinnati Dayton Road Suite I		Date of Disbursement 06 / 09 / 2008	
	City West Chester	State OH	Zip Code 45069	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement R-OH-8, Event 6/24/08		Category/ Type 011	R-OH-8, Event 6/24/08
Candidate Name Rep. John A. Boehner				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 08				

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5000.00

**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)  
AEGON USA, LLC PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sue Myrick For Congress</p> <p>Mailing Address P.O. Box 37091</p> <p>City Charlotte State NC Zip Code 28237</p> <p>Purpose of Disbursement R-NC-9, Event 9/15/08</p> <p>Candidate Name Rep. Sue Wilkins Myrick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4417259 <b>Date of Disbursement</b> 06 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>R-NC-9, Event 9/15/08</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Castle Campaign Fund</p> <p>Mailing Address PO Box 133</p> <p>City Wilmington State DE Zip Code 19899</p> <p>Purpose of Disbursement R-DE-AL</p> <p>Candidate Name Rep. Michael N. Castle</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4417274 <b>Date of Disbursement</b> 06 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>R-DE-AL</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Hoyer For Congress</p> <p>Mailing Address 700 13th Street, Nw Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement D-MD-5, Event 6/27/08</p> <p>Candidate Name Rep. Steny H. Hoyer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 4417276 <b>Date of Disbursement</b> 06 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>D-MD-5, Event 6/27/08</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6000.00

**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)

PAGE 61 / 63

<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

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)  
AEGON USA, LLC PAC

A.	Full Name (Last, First, Middle Initial) The Bluegrass Committee		Transaction ID: 4417478	
	Mailing Address 400 North Capitol Street, NW Suite 585		Date of Disbursement MM / DD / YYYY 06 / 20 / 2008	
	City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement R-KY (McConnell) Contribution		011 Category/ Type	R-KY (McConnell) Contribu- tion
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

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

8000.00

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

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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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

A.	Full Name (Last, First, Middle Initial) Batchelder for State Representative Committee	Transaction ID: 4334617 Date of Disbursement
	Mailing Address c/o Life Insurance Council of New 551 Fifth Avenue, 29th Floor	<input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City New York State NY Zip Code 10176	Amount of Each Disbursement this Period
	Purpose of Disbursement STATE HOUSE 69 OH, Event 5/27/08	<input type="text" value="1000.00"/>
	Candidate Name OH Rep. William Batchelder	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 69	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		STATE HOUSE 69 OH, Event 5/27/08

B.	Full Name (Last, First, Middle Initial) LIFEPAC	Transaction ID: 4334651 Date of Disbursement
	Mailing Address 100 S. Third Street	<input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City Columbus State OH Zip Code 43215-4291	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contribution

C.	Full Name (Last, First, Middle Initial) Federation of Iowa Insurers PAC	Transaction ID: 4405970 Date of Disbursement
	Mailing Address 700 Walnut Street Suite 1600	<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City Des Moines State IA Zip Code 50309-2231	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="3500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
AEGON USA, LLC PAC

A.

Full Name (Last, First, Middle Initial)  
REPUBLICAN PARTY OF KENTUCKY

Mailing Address 4949 Brownsboro Road  
Box 256

City State Zip Code  
Louisville KY 40222

Purpose of Disbursement  
Event 6/28/08

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 4417491

Date of Disbursement

06 / 20 / 2008

Amount of Each Disbursement this Period

2000.00

Event 6/28/08

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

8000.00