Image# 201708179070386410			_	PAGE 1 / 352
FEC FORM 3X	REPORT OF AND DISBUR For Other Than An Aut	SEMENTS		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M	
New York Life Insur	ance Company Political	Action Committee		
ADDRESS (number and street				
Check if different	Room 1109			
than previously reported. (ACC)	New York		NY	10010
2. FEC IDENTIFICATION	NUMBER V CIT	Y 🔺	STATE 🔺	ZIP CODE
C C00158881		EPORT NEW	DR AM	IENDED
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report July 31 Mid-Yea Report (Non-ele Year Only) (MY Termination Rep (TER) 	rt (Q1) rt (Q2) rt (Q3) rt (YE) ar yction) Report (C) 12-Day PRE-Election Report for the: Election Report for the: PRE-Election Report for the: PRE-Election Report for the: PRE-Election Report for the: PRE-Election Report for the: POST-Election Report for the: POST-Election Report for the: POST-Election	General (30G)	M6) Sep	12S) in the State of
5. Covering Period	07 / 01 / 2017 d this Report and to the best of	through 0		2017
Type or Print Name of Treas	Stagias, Helen, , ,		M M	
Signature of Treasurer		[Electronically Filed]	Date 08	17 2017
NOTE: Submission of false, en	rroneous, or incomplete information	n may subject the person sign	ing this Report to th	ne penalties of 52 U.S.C. § 30109
Office Use Only				FEC FORM 3X Rev. 05/2016

08/17/2017 12 : 08

x

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

New York Life Insurance Company Political Action Committee

Re	Report Covering the Period: From: 07		b: 07 / D D / Y Y Y Y Y 31 2017
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2017		527738.56
	(b) Cash on Hand at Beginning of Reporting Period	367455.65	
	(c) Total Receipts (from Line 19)	112540.13	803178.08
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	479995.78	1330916.64
7.	Total Disbursements (from Line 31)	120500.00	971420.86
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	359495.78	359495.78
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

New York Life Insurance Company Political Action Committee

Report Covering the Period:From: 07 01 2017 To: 07 31 2017						
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
. Contributions (other than loans) From:						
(a) Individuals/Persons Other						
Than Political Committees						
(i) Itemized (use Schedule A)	90041.93	494552.12				
(ii) Unitemized	22498.20	303625.96				
(iii) TOTAL (add	1125 40 12	798178.08				
Lines 11(a)(i) and (ii)	112540.13	730170.00				
(b) Political Party Committees	0.00	0.00				
(b) Political Party Committees(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)	112540.13	798178.08				
. Transfers From Affiliated/Other						
Party Committees	0.00	0.00				
All Loans Received	0.00	0.00				
. Loan Repayments Received	0.00	0.00				
. Offsets To Operating Expenditures						
(Refunds, Rebates, etc.)						
(Carry Totals to Line 37, page 5)	0.00	0.00				
 Refunds of Contributions Made 						
to Federal Candidates and Other						
Political Committees	0.00	5000.00				
2. Other Federal Receipts						
(Dividends, Interest, etc.)	0.00	0.00				
 Transfers from Non-Federal and Levin Funds (a) Non Enderse Account 						
(a) Non-Federal Account (from Schedule H3)	0.00	0.00				
	0.00	0.00				
	0.00	0.00				
(b) Levin Funds (from Schedule H5)	0.00	0.00				
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
. Total Receipts (add Lines 11(d),						
12, 13, 14, 15, 16, 17, and 18(c))▶	112540.13	803178.08				
. Total Federal Receipts						
(subtract Line 18(c) from Line 19)▶	112540.13	803178.08				

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 970525.00 120500.00 and Other Political Committees... 24. Independent Expenditures (use Schedule E)...... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 895.86 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (C) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 895.86 29. Other Disbursements (Including Non-Federal Donations)..... 0.00 0.00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated 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 Total Federal Election Activity (add (C) 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)).. 120500.00 971420.86 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 120500.00 971420.86

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

(subtract Line 34 from Line 33)

(add Line 21(a)(i) and Line 21(b))▶

(from Line 15, page 3).....

(subtract Line 37 from Line 36)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period
33. Total Contributions (other than loans) (from Line 11(d), page 3)	112540.13
34. Total Contribution Refunds (from Line 28(d))	0.00

						798178.08
		7			-7	796176.06
						895.86
1.						797282.22
	÷	-	÷	4	-	
	_	_		_	_	0.00
	÷	-	÷	÷	-	
	_	_		_	_	0.00
	÷	-7	÷	-	-7	
1.						0.00
		-7-			-7-	

FEC Form 3X (Rev. 05/2016)

COL	UMN B
Calendar	Year-to-Date

112540.13						
	-7			7		
0.00						
	-1	1	1			_
112540.13						
	-	1	1	7	-	
0.00						
	7	-	1	7		_
0.00						
	-7-	-	-	7	-	
0.00						

Page 5

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the ne		
NAME OF COMMITTEE (In Full) New York Life Insurance Compar	y Political Action Committee	
Full Name of Individual (Last, First, Middle Initial Perry, Valerie, , Ms., Mailing Address 51-19 Overbrook Street City Douglaston FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company Receipt For:	State Zip Code NY 11362-1642 C	Date of Receipt
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)
B. Nowak, Patricia A., , Ms., Mailing Address 98 Logwood Street) or Full Organization Name	Date of Receipt
City South Burlington FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company	State Zip Code VT 05403-6444	Transaction ID : PR10017251 Amount of Each Receipt this Period 41.67 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)
C. Full Name of Individual (Last, First, Middle Initial Phillips, Sid, , Mr., Mailing Address 3505 Pasture Lane) or Full Organization Name	Date of Receipt
City Virginia Beach FEC ID number of contributing federal political committee.	State Zip Code VA 23453-8534	07 31 2017 Transaction ID : PR10020817251 Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify)	Occupation (for Individual) Agent Aggregate Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number on		218.61

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)			
		for each category of the Detailed Summary Page	X 11a 11b 11c 12			
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) New York Life Insurance Corr	npany Politi	cal Action Committee				
Full Name of Individual (Last, First, Middle A. Ponder, David A., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt			
Mailing Address 4158 Cadle Creek Road			M M / D D / Y Y Y Y Y 07 31 2017			
City Edgewater	State MD	Zip Code 21037-4529	Transaction ID : PR10036017251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		41.67			
Name of Employer (for Individual) New York Life Insurance Company	New York Life Insurance Company Agent					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)			
Full Name of Individual (Last, First, Middle B. Pope, Rudy, , Mr.,	Initial) or Full C	organization Name	Date of Receipt			
Mailing Address 28 Eagle Ridge Drive	Mailing Address 28 Eagle Ridge Drive					
City Savannah	State GA	Zip Code 31406-8420	Transaction ID : PR10037117251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	EC ID number of contributing					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)			
Full Name of Individual (Last, First, Middle Porter, David W., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt			
Mailing Address 416 N Cordova Street	Mailing Address 416 N Cordova Street					
City Burbank	State CA	Zip Code 91505-3414	Transaction ID : PR10038517251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)			
SUBTOTAL of Receipts This Page (optional)			168.61			
TOTAL This Period (last page this line numb	er only)					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: Mark one)
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politie	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initial Adams, Melvin M., , Mr.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 3305 Tierra Angel Drive	State	Zip Code	07 31 2017
	City El Paso	TX	79938-4826	Transaction ID : PR100517251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item
	Poppint For:		Year-to-Date ▼ 280.00	P/R Deduction (\$40.00 Monthly)
B.	Full Name of Individual (Last, First, Middle Initial Purdie, Irene, , Ms.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 155 Charter Circle #155	07 31 Y Y Y Y Y 2017		
	City Ossining	State NY	Zip Code 10562-6011	Transaction ID : PR10051817251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.48
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 269.36	P/R Deduction (\$19.24 Bi-Weekly)
C.	Full Name of Individual (Last, First, Middle Initial Quaccia, Lucas, , Mr.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 10728 Satin Nickel Drive			07 / D D / Y Y Y Y 07 31 2017
	City Fresno	State CA	Zip Code 93730-3591	Transaction ID : PR10053517251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		230.78
	Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Man	upation (for Individual) aging Partner	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		····· •	309.26
т	OTAL This Period (last page this line number on	ly)	·····	

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PAGE 9 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Concert only one) Image: Im
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	y Politi	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initial) Quinn, Michael, , Mr., Mailing Address 66 Mayall Road) or Full O	rganization Name	Date of Receipt
	City Waltham	State MA	Zip Code 02453-8267	Transaction ID : PR10056317251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		58.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item
	Receipt For: µ Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)
В.	Full Name of Individual (Last, First, Middle Initial) Ranga, Srinivas, , Mr.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 41 Devon Road City Bethpage FEC ID number of contributing	State NY	Zip Code 11714-1119	M M / D D / Y Y Y Y Y 07 31 2017 Transaction ID : PR10066317251 Amount of Each Receipt this Period
	federal political committee. Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 205.65	P/R Deduction (\$13.71 Bi-Weekly)
C.	Full Name of Individual (Last, First, Middle Initial) Rio, Philip, , Mr.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 129 Whistler Road	State	Zip Code	07 31 2017 Transaction ID : PR10091717251
	Manhasset FEC ID number of contributing federal political committee.	NY	11030-2839	Amount of Each Receipt this Period 38.48
	Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify)	Seni	upation (for Individual) or Director Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	123.90
т	OTAL This Period (last page this line number only	y)	•••••	

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)			
IIEIWIIZED KEGEIP13		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using t	I Statements mathematic mathematical statements and a	A not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee				
Full Name of Individual (Last, First, Middle A. Rioux, Daniel, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 4208 127th Street Court No	orthwest		07 31 2017			
City Gig Harbor	State WA	Zip Code 98332-8817	Transaction ID : PR10092417251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		76.92			
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Partner	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. Rivera, Jimmy, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 5925 Brightwood Drive			07 31 Y Y Y Y Y			
City Corpus Christi	State TX	Zip Code 78414-3029	Transaction ID : PR10094717251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	°					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. Robinson, Darin J., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 15 Portland Place			07 / D D / Y Y Y Y 2017			
City Saint Louis	State MO	Zip Code 63108-1203	Transaction ID : PR10100617251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		208.34			
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1458.38	P/R Deduction (\$208.34 Monthly)			
SUBTOTAL of Receipts This Page (optional).			323.72			
TOTAL This Period (last page this line number	er only)					

FOR LINE NUMBER:

PAGE 11 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and Sta or for commercial purposes, other than using the n		rson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) New York Life Insurance Compai	ny Political Action Committee					
Full Name of Individual (Last, First, Middle Initia Robinson, Donald L., , Mr.,	I) or Full Organization Name	Date of Receipt				
Mailing Address 36 Longview Avenue		07 31 Y Y Y Y Y 07 31 2017				
City	State Zip Code NJ 07940-1747	Transaction ID : PR10100817251				
Madison	NJ 07940-1747	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	41.67				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
New York Life Insurance Company	Agent	_				
Receipt For:	Aggregate Year-to-Date ▼					
Other (specify) ▼	291.69	P/R Deduction (\$41.67 Monthly)				
Full Name of Individual (Last, First, Middle Initia B. Robison, Rory C., , Mr.,	I) or Full Organization Name	Date of Receipt				
Mailing Address 2103 Brookhaven Way		07 31 2017				
City	State Zip Code	Transaction ID : PR10102817251				
Eugene	OR 97401-2335	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	41.67				
Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼					
Other (specify) ▼	, 291.69	P/R Deduction (\$41.67 Monthly)				
Full Name of Individual (Last, First, Middle Initia C. Rogers, Richard, , Mr.,	I) or Full Organization Name	Date of Receipt				
Mailing Address 16 Stuyvesant Oval		07 31 2017				
City	State Zip Code NY 10009-2240	Transaction ID : PR10110517251				
New York	NY 10009-2240	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	30.00				
Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Director	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼					
Other (specify)	207.06	P/R Deduction (\$13.62 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)		113.34				
TOTAL This Period (last page this line number or						

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T	EMIZED RECEIPTS		f	Jse separate schedule(s) or each category of the Detailed Summary Page	`	eck onl 11a 13		ə) 11b 14	11c 15	12	_	17
	y information copied from such Reports and Stat for commercial purposes, other than using the na											
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical	Action Committee								
Α.	Full Name of Individual (Last, First, Middle Initial Rogers, Walton W., , Mr.,) or Full C	Drgar	nization Name		Date o	f Rec	ceipt				
	Mailing Address 504 Pinefield Drive	1 -			07 31 2017 Transaction ID : PR10110717251							
	City Severna Park	State MD		Zip Code 21146-2320					PR1011 eceipt th			
	FEC ID number of contributing federal political committee.	С									83.34	
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	•	ion (for Individual)		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Yea	r-to-Date ▼ 583.38	F	P/R Dec	luctio	n (\$83.:	34 Montl	nly)			
R	Full Name of Individual (Last, First, Middle Initial Roglieri, John, , Mr.,) or Full C	Orgar	nization Name		Date o	f Bor	point				
J.	Mailing Address 16 Park Street				07		D D D 31	/ Y	2017			
	City Tenafly	State Zip Code NJ 07670-2218				Transaction ID : PR10110817251 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С				Amoun					30.00	
	Name of Employer (for Individual) New York Life Insurance Company		•	tion (for Individual) Director	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial Maybank, Archie L., , Mr.,) or Full C	Drgar	nization Name		Date o	f Rec	ceipt				
	Mailing Address 235 W 139th Street					07	/	D D 31	/ Y	2017		
	City New York	State NY		Zip Code 10030-2104	_				PR1011			
	FEC ID number of contributing federal political committee.	C		10030-2104		Amoun	t of E	Each R	eceipt th		iod 30.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	•	ion (for Individual)		N	lemo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ur-to-Date ▼ 210.00	F	P/R Dec	luctio	n (\$30.	00 Mont	hly)		
s	UBTOTAL of Receipts This Page (optional)			•				,	. ,	14	43.34	
т	OTAL This Period (last page this line number on	ly)						,			-	

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
ILEIVIIZED KEGEIFIJ		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements ma	y not be sold or used by any p ddress of any political committe	13 14 15 16 1 berson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	mpany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middle A. Rosales, Ricardo, , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7023 Northwest 113th Pla	ice		07 31 / Y Y Y Y 2017							
City Doral	State FL	Zip Code 33178-4543	Transaction ID : PR10115917251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)							
Full Name of Individual (Last, First, Middle B. Russo, Scott M., , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5846 Greenshire Avenue		07 / D D / Y Y Y Y 07 31 2017								
City Baton Rouge	State LA	Zip Code 70817-1423	Transaction ID : PR10135017251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.67							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	P/R Deduction (\$41.67 Monthly)							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69								
Full Name of Individual (Last, First, Middle C. Russolino, Jeffrey A., , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1220 Bluewater Drive			07 / D D / Y Y Y Y 2017							
City Mandeville	State LA	Zip Code 70471-7418	Transaction ID : PR10135117251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.83							
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date 201.81	P/R Deduction (\$28.83 Monthly)							
SUBTOTAL of Receipts This Page (optional)		170.50							
TOTAL This Period (last page this line num	ber only)	······								

Use separate schedule(s)

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			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		2 6	17		
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson foi	r the			soliciting	g conti	ributio	ons		
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee										
	Full Name of Individual (Last, First, Middle Initia Ryan, Richard, , Mr.,	l) or Full Or	ganization Name	Da	ate of	Re	eceipt						
	Mailing Address 16974 Saddlewood Trail				и м 07	/	D D D 31	/ Y	y 201	۲ ۲ 7			
	City Minnetonka	State MN					Transaction ID : PR10136217251 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С						 		38.48	3		
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) or Partner		Me	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 534.68	P/R	Ded	ucti	on (\$50.	.00 Bi-We	eekly)				
	Full Name of Individual (Last, First, Middle Initia Saenz Kirkland, Gabriela, , Ms.,	Name of Individual (Last, First, Middle Initial) or Full Organization Name											
	Mailing Address 26904 Commons Drive				07 / ^{D D} / ^Y Y Y Y 2017								
	City Moreno Valley	State CA	Zip Code 92555-3721		Transaction ID : PR10139017251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С	30.00										
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R	Dedu	uctio	on (\$30.	00 Montł	nly)				
	Full Name of Individual (Last, First, Middle Initia Herlong Sr., Thomas, , Mr.,	l) or Full Or	ganization Name	Da	ate of	Re	eceipt						
	Mailing Address 65 Bouknight Road	Otata		_ L	07	1	31	JL	201 [°]	7			
	City Johnston	State SC	Zip Code 29832-2505				-	PR1014 leceipt th					
	FEC ID number of contributing federal political committee.	С					,			41.67	7		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agen	pation (for Individual) t		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/F	R Ded	ucti	on (\$41	.67 Mont	hly)				
s	UBTOTAL of Receipts This Page (optional)						, .	. ,	1	10.15	5		
т	OTAL This Period (last page this line number on	ly)								- 40-			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle Sandifer, Gary W., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 47106 Hidden Lane			07 31 2017						
City	State	Zip Code	Transaction ID : PR10150117251						
Hammond	LA	70401-4859	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		83.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
New York Life Insurance Company	Age	ent							
Receipt For:	Aggregate	Year-to-Date V							
Primary General Other (specify) ▼		581.00	P/R Deduction (\$83.00 Monthly)						
Full Name of Individual (Last, First, Middle B. Sause, Brett M., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 13474 Rustling Oaks Drive			07 31 2017						
City	State	Zip Code	Transaction ID : PR10157717251						
Wye Mills	MD	21679-2029	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		250.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ	upation (for Individual) ent	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Primary General Other (specify) ▼		, 1750.00	P/R Deduction (\$250.00 Monthly)						
Full Name of Individual (Last, First, Middle C. Schaefer, Marc L., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 10912 Lamplighter Lane			07 31 2017						
City	State	Zip Code	Transaction ID : PR10161117251						
Potomac	MD	20854-2783	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		150.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
New York Life Insurance Company	Age	nt							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1050.00	P/R Deduction (\$150.00 Monthly)						
SUBTOTAL of Receipts This Page (optional).			483.00						
TOTAL This Period (last page this line number									

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
II EIVIIZED REGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11							
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma	ay not be sold or used by any didress of any political committee	person for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance C	ompany Politi	cal Action Committee								
Full Name of Individual (Last, First, Mic A. Hathaway, Darlene, , Ms.,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1807 Bz Glenwood Hig PO Box 33	hway		M M / D D / Y Y Y Y 07 31 2017							
City Glenwood	State WA	Zip Code 98619-9051	Transaction ID : PR10170417251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.67							
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)							
Full Name of Individual (Last, First, Mic B. Hooz, Jason L., , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 325 Muir Drive			07 / D D / Y Y Y Y 2017							
City Soquel	State CA	Zip Code 95073-9524	Transaction ID : PR1017251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.67							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)							
Full Name of Individual (Last, First, Mic Scrivner, Charles E., , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 11925 Southeast 231st			07 / D D / Y Y Y Y Y 31 2017							
City Kent	State WA	Zip Code 98031-3688	Transaction ID : PR10180417251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		60.00							
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$60.00 Monthly)							
SUBTOTAL of Receipts This Page (option			143.34							
TOTAL This Period (last page this line nu	umber only)									

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	npany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middle A. Ochoa, Maria M., , Ms.,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 226 Towill Place			07 31 2017							
City Charlotte	State NC	Zip Code 28211-1342	Transaction ID : PR101817251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		28.84							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) Int	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 201.88	P/R Deduction (\$28.84 Monthly)							
Full Name of Individual (Last, First, Middle B. Seligstein, Sidney L., , Mr.,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1568 Massey Pointe Lane			07 / 10 / Y Y Y Y 07 31 2017							
City Memphis	State TN	Zip Code 38120-1317	Transaction ID : PR10184317251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)							
Full Name of Individual (Last, First, Middle C. Thompson Jr., John A., , Mr.,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address PO Box 46			07 / D D / Y Y Y Y 31 / 2017							
City Liberty Hill	State SC	Zip Code 29074-0046	Transaction ID : PR102017251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		40.00							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00	P/R Deduction (\$40.00 Monthly)							
SUBTOTAL of Receipts This Page (optional)		168.84							
TOTAL This Period (last page this line num	ber only)									

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 11					
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma ing the name and a	ay not be sold or used by any p ddress of any political committed	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
ightarrow New York Life Insurance C	ompany Politi	cal Action Committee						
Full Name of Individual (Last, First, Mic	Idle Initial) or Full O	rganization Name						
A. Shively, George, , Mr.,	,	•	Date of Receipt					
Mailing Address 35 Summit Avenue			07 31 2017					
City	State NY	Zip Code	Transaction ID : PR10205017251					
Bronxville		10708-2523	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		38.48					
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item					
New York Life Insurance Company	Svp	, Deputy Gc & Chief Invest Couns						
Receipt For:	Aggregate	Year-to-Date 🔻						
Other (apacity)		288.60	P/R Deduction (\$19.24 Bi-Weekly)					
Other (specify) ▼		200.00	1					
Full Name of Individual (Last, First, Mic	ldle Initial) or Full O	rganization Name						
B. Sibold, Don C., , Mr.,	,	0	Date of Receipt					
Mailing Address 2970 Seneca Trail N			07 31 2017					
City	State	Zip Code	Transaction ID : PR10208317251					
Pickaway	WV	24976-9743	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		28.84					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$28.84 Monthly)					
Primary General								
Other (specify) V		, 201.88						
Full Name of Individual (Last, First, Mic Hertwig, Nancy P., , Ms.,	Idle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 120 Baker Meadows La	ane		07 31 2017					
City	State	Zip Code	Transaction ID : PR102217251					
Clinton	TN	37716-7035	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		35.00					
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item					
New York Life Insurance Company	Age							
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General		245.00	P/R Deduction (\$35.00 Monthly)					
Other (specify)		245.00	1					
SUBTOTAL of Receipts This Page (optio			102.32					
TOTAL This Period (last page this line nu	umber only)		•					

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)						
	y information copied from such Reports and Stat for commercial purposes, other than using the na			rson for the purpose of soliciting contributions						
$\left\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical Action Committee							
Α.	Full Name of Individual (Last, First, Middle Initial Smiley, John, , Mr.,) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 1 Glengary Place			07 31 2017						
	City	State	Zip Code	Transaction ID : PR10229317251						
	Kennebunk	ME	04043-6718	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		60.00						
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item						
	New York Life Insurance Company	Age	ent							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$60.00 Monthly)						
в.	Full Name of Individual (Last, First, Middle Initial Smith, Gregory W., , Mr.,) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 3 Stella Lane			07 31 2017						
	City	State	Zip Code	Transaction ID : PR10232417251						
	Amsterdam	NY	12010-2901	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		45.25						
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item						
		Aggregate	Year-to-Date V	1						
	Other (specify) ▼		, 316.75	P/R Deduction (\$45.25 Monthly)						
с.	Full Name of Individual (Last, First, Middle Initial Smith Jr., Loran D., , Mr.,) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 1068 Ashley Hall Road			07 31 Y Y Y Y 07 31 2017						
	City	State	Zip Code	Transaction ID : PR10235317251						
	Macon	GA	31210-7900	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	cupation (for Individual)	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
	UBTOTAL of Receipts This Page (optional)		r	155.25						
1	OTAL This Period (last page this line number on	ıy)	••••••							

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middle A. Solazzo, Amy, , Ms.,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 375 Colonel Greene Road			07 31 / Y Y Y Y Y							
City Yorktown Heights	State NY	Zip Code 10598-6025	Transaction ID : PR10249317251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		24.00							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$18.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. Spaniolo, Vincent, , Mr.,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 4573 Caspian Drive	1		07 / 10 D / Y Y Y Y Y 07 31 2017							
City Hudsonville	State	Zip Code 49426-7484	Transaction ID : PR10251717251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		27.24							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 204.30	P/R Deduction (\$13.62 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. Specht, Kenneth P., , Mr.,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 7606 28th Avenue			07 / D D / Y Y Y Y 2017							
City Kenosha	State WI	Zip Code 53143-5659	Transaction ID : PR10253117251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		40.00							
Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Age		Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00	P/R Deduction (\$40.00 Monthly)							
SUBTOTAL of Receipts This Page (optional).			91.24							
TOTAL This Period (last page this line number	er only)	······								

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17	
Ar or	y information copied from such Reports and St. for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pund address of any political committee	erson for to sol	or the	purp ntrib	bose of	soliciting	g cont	tributio	ons	
	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Compa	any Politi	cal Action Committee									
<u>v</u>	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name									
Α.					Date of	Re	ceipt					
	Mandeville FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Ini Strollo, Patrick V., , Mr., Mailing Address 18148 Country Trails Court City Wildwood				07 31 2017 Transaction ID : PR10275617251							
	City	State	Zip Code									
	Mandeville	LA	70471-2879	A	Amount	of	Each R	eceipt th	nis Pe	riod		
	•	С						1.40		38.48	8	
				_ 1			lteres					
			upation (for Individual) porate Vice President			emo	Item					
			•									
		Aggregale	Year-to-Date ▼	P/	R Ded	uctio	on (\$19.	24 Bi-We	eekly)	1		
	Other (specify) v		288.60									
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name									
В.	Strollo, Patrick V., , Mr.,				Date of	Re	ceipt					
	Mailing Address 18148 Country Trails Court		07 / D D / Y Y Y Y 2017						Y			
	City	State	Zip Code 63038-1217		Trans	acti	on ID :	PR1028 [,]	14172	:51	_	
		MO	A	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С				50.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent			Memo Item							
	Receipt For:		Year-to-Date V		-							
	Primary General			P/R Deduction (\$50.00 Monthly)								
	Other (specify) v	L	, 350.00									
с.	Full Name of Individual (Last, First, Middle Initi Sullivan, John D., , Mr.,	al) or Full O	rganization Name	C	Date of	Re	ceipt					
	Mailing Address 33 Romerly Road				м м 07	/	D D 31	/ Y	201	7	Y	
	City	State	Zip Code			acti	the state of the s	PR1028	- Contra 10	- 1 - C		
	Savannah	GA	31411-1451	A	Amount	of	Each R	eceipt th	nis Pe	riod		
	FEC ID number of contributing federal political committee.	С			_		y	, y		33.00	0	
	Name of Employer (for Individual)	Осси	upation (for Individual)		M	emc	Item					
	New York Life Insurance Company	Ager	nt									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				(\$00	00 14				
	Other (specify)		231.00		R Ded	UCTI	on (\$33.	00 Mont	niy)			
⊢	UBTOTAL of Receipts This Page (optional)						,	, , , , , , , , , , , , , , , , , , ,		121.48	8	

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ITEMIZED RECE	IPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check		e) 11b 11c 14 15	12 16	17			
			y not be sold or used by any ddress of any political committ								
NAME OF COMMITTE	. ,	y Politio	cal Action Committee	9							
Full Name of Individua A. Tai, Ka Luk, , Mr.,	al (Last, First, Middle Initial)	or Full Or	rganization Name	Dat	te of Rec	eipt					
Mailing Address 100 F					07 / D D / Y Y Y Y Y 31 / 2017						
City New York		State NY	Zip Code 10069-0416			on ID : PR1029 Each Receipt th					
FEC ID number of confident federal political commit	U U	С					36.0				
Name of Employer (fo New York Life Insurand	,		ipation (for Individual) aging Director		Memo	Item					
Receipt For: Primary Other (specify)	General	Aggregate Y	Year-to-Date ▼ 270.00	P/R	Deductior	n (\$18.00 Bi-W	eekly)				
	al (Last, First, Middle Initial) Demetrios, , Mr.,	or Full Or	rganization Name	Dat	te of Rec	eipt					
Mailing Address 160 A		I		M	07	D D / Y 31	2017	Y			
City Alamo		State CA	Zip Code 94507-4004		Transaction ID : PR10313217251 Amount of Each Receipt this Period						
FEC ID number of confederal political commi		С			41.67						
Name of Employer (for New York Life Insurand		Occu Agei	upation (for Individual) nt		Memo Item						
Receipt For: Primary Other (specify)	General	Aggregate `	Year-to-Date ▼ , 291.69	P/R I	P/R Deduction (\$41.67 Monthly)						
c. Thompson, Pete		or Full Or	rganization Name	Dat	te of Rec	eipt					
Mailing Address 63 Li	ncoln Street				07 /	D D / Y 31	2017	Y			
City Dedham		State MA	Zip Code 02026-3310			on ID : PR1032 Each Receipt th					
FEC ID number of confident federal political commit	Ũ	С					41.6	57			
Name of Employer (fo New York Life Insurand	,	Occu Agen	ipation (for Individual) nt		Memo	Item					
Receipt For: Primary Other (specify)	General	Aggregate `	Year-to-Date ▼ 291.69	P/R	Deductior	n (\$41.67 Mont	thly)				
SUBTOTAL of Receipts	This Page (optional)				,	,	119.3	4			
TOTAL This Period (las	t page this line number only	y)		•		с. 1. 3 5					

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle I A. Thomson, Alana, , Ms.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 63 Lamplighter Lane Apt. No.1B			07 31 Y Y Y Y Y						
City Massapequa	State NY	Zip Code 11758-5629	Transaction ID : PR10322417251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.48						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I Tinovsky, Serge , , Mr .,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 284 Garretson Avenue			07 / D D / Y Y Y Y Y 2017						
City Staten Island	State NY	Zip Code 10305-1236	Transaction ID : PR10327517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		50.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
Full Name of Individual (Last, First, Middle I Tomar, Ashish, , Mr.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 1325 Whistler Point Road			07 / D D / Y Y Y Y Y 31 2017						
City Woodbury	State MN	Zip Code 55129-5302	Transaction ID : PR10331117251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
SUBTOTAL of Receipts This Page (optional)			130.15						
TOTAL This Period (last page this line numbe	er only)								

Use separate schedule(s)

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ITEMIZED) RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
				rson for the purpose of soliciting contributions to solicit contributions from such committee.		
	COMMITTEE (In Full) ork Life Insurance Compai	ny Politi	cal Action Committee			
A. Valentin Mailing Ad	of Individual (Last, First, Middle Initia o, Joseph, , Mr., dress 324 Old Forge Lane Apt. 2102 umber of contributing litical committee.	I) or Full O State MD	rganization Name Zip Code 21113-2960	Date of Receipt		
New York Receipt Fo	ary General er (specify) ▼	Age Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)		
B. Watson	of Individual (Last, First, Middle Initia , Billy J., , Mr., dress 3435 Indian Lake Trail	Date of Receipt				
Pelham		State AL	Zip Code 35124-2718	Transaction ID : PR103717251 Amount of Each Receipt this Period		
federal pol	imber of contributing itical committee. Employer (for Individual) Life Insurance Company	C Occu Age	upation (for Individual)	91.34 Memo Item		
Receipt Fo			Year-to-Date ▼ 639.38	P/R Deduction (\$91.34 Monthly)		
c. Walton	of Individual (Last, First, Middle Initia , Michael P., , Mr.,	l) or Full O	rganization Name	Date of Receipt		
	dress 2001 Braeburn Drive			07 31 2017		
City Mechanic	sbura	State PA	Zip Code 17055-6173	Transaction ID : PR10394917251		
FEC ID nu	umber of contributing litical committee.		Amount of Each Receipt this Period 41.67			
New York Receipt Fo		Ager	upation (for Individual) nt Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)		
SUBTOTAL	of Receipts This Page (optional)		>	183.01		
TOTAL This	Period (last page this line number or	וy)	····· ►			

Use separate schedule(s)

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IT.	EMIZED RECEIPTS		Use separate schedule(s)		(check only one)						
11			for each category of the Detailed Summary Page		′ 11a 13		11b	11c 15		12 16	17
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson to so	for the	pur ntrib	pose of	soliciting	g con	tributi	ons
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	cal Action Committee								
А.	Full Name of Individual (Last, First, Middle Init Warren, Douglas, , Mr.,	ial) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 5621 Lerch Road				м м 07	1	D D D 31	/ Y	ү 20	ү 17	Y
	City Snohomish	State WA	Zip Code 98290-7717					PR1040 eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>			· ·		28.8	3
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 201.81	F	P/R Ded	ucti	on (\$28.	83 Monti	hly)		
B	Full Name of Individual (Last, First, Middle Init Weaver, Randy W., , Mr.,	ial) or Full O	rganization Name		Date of	Be	eceipt				
0.	Mailing Address 8360 Bomberos Court				07	/	31	/ Y	y 201	Y 17	Y
	City	State	Zip Code		Trans	acti	ion ID :	PR10408	32172	251	
	Las Vegas	NV	89113-4536		Amoun	t of	Each R	eceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С								50.0	0
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		M	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)							
С.	Full Name of Individual (Last, First, Middle Init White Terry, Melanie, , Ms.,	ial) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 2103 Fittleworth Terrace				07	1	31	/ Y	201	ү 17	Y
	City Upper Marlboro	State MD	Zip Code 20774-8084					PR1042			
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .			28.8	4
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nt		М	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 201.88		P/R Ded	ucti	on (\$28.	.84 Mont	hly)		
s	UBTOTAL of Receipts This Page (optional)		····· •			_	,		_	107.6 ⁻	7
т	OTAL This Period (last page this line number of	only)			L			-			

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ITEMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one)
			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Politi	cal Action Committee	
Full Name of Individual (Last, First, Midd A. Williams, Billy R., , Mr.,	lle Initial) or Full C	Prganization Name	Date of Receipt
Mailing Address 2435 River Forest Road			07 / D D / Y Y Y Y 2017
City Mobile	State AL	Zip Code 36605-4439	Transaction ID : PR10433017251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)
Full Name of Individual (Last, First, Midd B. Wilson, David R., , Mr.,	lle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 7257 2nd Avenue W	07 31 2017		
City Oneonta	State AL	Zip Code 35121-1667	Transaction ID : PR10442617251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)
Full Name of Individual (Last, First, Midd C. Woodley, Scott, , Mr.,	lle Initial) or Full C	organization Name	Date of Receipt
Mailing Address 1546 Mistral Lane			07 31 2017
City Fond Du Lac	State WI	Zip Code 54937-8030	Transaction ID : PR10457917251
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 341.67	P/R Deduction (\$50.00 Monthly)
SUBTOTAL of Receipts This Page (option	al)		141.67
TOTAL This Period (last page this line nur	mber only)		

Use separate schedule(s)

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			(che	(check only one)							
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12		17
	y information copied from such Reports and Sta for commercial purposes, other than using the r				or the		oose of	soliciting	contrib		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compared	ny Politio	cal Action Committee								
A.	Full Name of Individual (Last, First, Middle Initia Wright, Geoffrey A., , Mr.,	l) or Full Or	ganization Name	C	Date of	Re	ceipt				
	Mailing Address 7 Horvath Drive			11	м м 07	1	D D D 31	/ Y	y y 2017	Y	
	City Ithaca	State NY	Zip Code 14850-9711	A				PR1046 [,] eceipt th			
	FEC ID number of contributing federal political committee.	С					7		5	0.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	pation (for Individual) nt		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/I	R Ded	uctic	on (\$50.)	00 Montł	nly)		
в.	Full Name of Individual (Last, First, Middle Initia Spivey, Jerry L., , Mr.,	l) or Full Or	ganization Name	C	Date of	Re	ceipt				
Mailing Address 5 North Thomas Street PO Box 6493			7: 0.1		м м 07	1	31	/ Y	y y 2017	Y	
	City Elberton	State GA	Zip Code 30635-2467				-	PR10481		nd	
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Agent			Amount of Each Receipt this Period						
	Name of Employer (for Individual) New York Life Insurance Company				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 595.00	P/I	R Dedu	uctic	on (\$85.0	00 Month	ıly)		
С.	Full Name of Individual (Last, First, Middle Initia Grisham, Brooke, , Ms.,	l) or Full Or	ganization Name		Date of	Re	ceipt				
	Mailing Address 2430 Victory Park Lane #2604 City	State	Zip Code	_ [07)	31	/ Y PR1049	2017		
	Dallas	TX	75219-7608	A				eceipt th			
FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company		С			_		9	y	3	8.48	
			pation (for Individual) President		Me	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 221.16	P/	'R Ded	uctio	on (\$13.	62 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)						9	9	17:	3.48	
т	OTAL This Period (last page this line number or	nly)					.				

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	-	Use separate schedule(s)		(check only one)						
II EIVIIZED KEGEIF13		for each category of the Detailed Summary Page	X 11:		11b 14	11c	12	17		
Any information copied from such Reports and or for commercial purposes, other than using			erson for t	he pu	irpose of	soliciting	contribut	tions		
NAME OF COMMITTEE (In Full) New York Life Insurance Com	ipany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middle A. Scozzafava, Mark, , Mr.,	Initial) or Full C	rganization Name	Date	e of R	leceipt					
Mailing Address 11 Lillian Terrace			0		/ 31) / Y	y y 2017	Y		
City Darien	State CT	Zip Code 06820-5205				PR10500 Receipt th	0117251 is Period			
FEC ID number of contributing federal political committee.	C						38.4	48		
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President		Mem	no Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R D)educt	tion (\$19.	.24 Bi-We	ekly)			
Full Name of Individual (Last, First, Middle B. Herwig, Julie, , Ms.,	Initial) or Full C	rganization Name	Date	e of R	leceipt					
Mailing Address 8405 Kingsgate Road			0		/ 31		2017	Y		
City Potomac	State MD	Zip Code 20854-1741				PR10501				
FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period 300.00					
Name of Employer (for Individual) New York Life Insurance Company					no Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2250.00	P/R D	P/R Deduction (\$150.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Budd Jr., Warren C., , Mr.,	Initial) or Full C	rganization Name	Date	e of R	leceipt					
Mailing Address 270 South Shore Drive)7	/ 31		2017 ^Y	Y		
City Newnan	State GA	Zip Code 30263-5921				PR1050	17251 is Period			
FEC ID number of contributing federal political committee.	С				, .	,	91.3	33		
Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Occ Age	upation (for Individual) nt	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 639.31	P/R D)educ	tion (\$91	.33 Montl	nly)			
SUBTOTAL of Receipts This Page (optional)							429.8	31		
TOTAL This Period (last page this line numb	er only)				-					

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: 11 a model 12 model 13 model 15 model 16 model 17 model				
	y information copied from such Reports and Sta for commercial purposes, other than using the n			rson for the purpose of soliciting contributions				
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee					
Α.	Full Name of Individual (Last, First, Middle Initia Jones, Ronald A., , Mr.,	l) or Full O	rganization Name	Date of Receipt				
	Mailing Address 116 Wildwood Drive			07 31 2017				
	City	State PA	Zip Code	Transaction ID : PR10510117251				
	Butler	FA	16002-3906	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		30.00				
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item				
	New York Life Insurance Company	Age	nt					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)				
в.	Full Name of Individual (Last, First, Middle Initia Sunada, Gary T., , Mr.,	l) or Full O	rganization Name	Date of Receipt				
	Mailing Address 115 Lynch Avenue		07 31 2017					
	City	State	Zip Code	Transaction ID : PR10529117251				
	Utica	NY	13502-5719	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		40.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
	Receipt For:	Aggregate	Year-to-Date V					
	Other (specify) ▼		280.00	P/R Deduction (\$40.00 Monthly)				
C.	Full Name of Individual (Last, First, Middle Initia Rogers Jr., Thomas C., , Mr.,	l) or Full O	rganization Name	Date of Receipt				
	Mailing Address 1557 E Hencart Road	1		07 / D D / Y Y Y Y 2017				
	City Glennville	State GA	Zip Code 30427-3108	Transaction ID : PR105417251				
	FEC ID number of contributing federal political committee.	C	30427-3100	Amount of Each Receipt this Period				
	Name of Employer (for Individual) New York Life Insurance Company	Occu	upation (for Individual) nt	Memo Item				
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)				
s	UBTOTAL of Receipts This Page (optional)		•	120.00				
т	OTAL This Period (last page this line number on	lly)	•					

Use separate schedule(s)

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			Use separate schedule(s)		(check only one)							
			for each category of the Detailed Summary Page		K 11a 13		11b 14	11c	12	17		
	formation copied from such Reports and Stat commercial purposes, other than using the n				for the		pose of		contribu			
	ME OF COMMITTEE (In Full) ew York Life Insurance Compar	ny Politic	al Action Committee									
	I Name of Individual (Last, First, Middle Initial riedman, Samuel Y., , Mr.,) or Full Or	ganization Name		Date of	Re	eceipt					
Ма	iling Address 2 Fawn Hill Drive				м м 07	/	31) / Y	ү ү 2017	Y		
City	y rmont	State NY	Zip Code 10952-4403					PR10605 leceipt th				
	C ID number of contributing eral political committee.	С			<u> </u>				83.	34		
Ne	me of Employer (for Individual) w York Life Insurance Company	Occu Ager		Me	emo	tem						
Re	ceipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 583.38		P/R Dedu	ucti	on (\$83.	.34 Month	nly)			
	I Name of Individual (Last, First, Middle Initial andre, James R., , Mr.,) or Full Or	ganization Name		Date of	Re	eceipt					
	Mailing Address 17335 Robinson Road City State Zip Code						D D D 31	/ Y	2017	Y		
	y arysville	State OH	Zip Code 43040-9029	-			-	PR10616				
FE	C ID number of contributing leral political committee.	С				Amount of Each Receipt this Period						
	me of Employer (for Individual) w York Life Insurance Company	Occupation (for Individual) Agent			Memo Item							
Re	ceipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)								
	I Name of Individual (Last, First, Middle Initial Iarrison, Wayne, , Mr.,) or Full Or	ganization Name		Date of	Re	eceipt					
Ма	iling Address 14527 Locust Street				м м 07	1	31) / Y	2017	Y		
Cit <u>i</u> Or	y naha	State NE	Zip Code 68116-8179				-	PR10630 Receipt th				
	C ID number of contributing eral political committee.	С			<u> </u>		, .		76.	94		
Name of Employer (for Individual) New York Life Insurance Company			pation (for Individual) aging Partner	Memo Item								
Re	ceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 577.05]	P/R Ded	ucti	on (\$38	.47 Bi-We	eekly)			
SUB	TOTAL of Receipts This Page (optional)		•••••	•			, .	,	260.	28		
тот	AL This Period (last page this line number on	ly)		•			-	40				

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)				
Any information copied from such Reports and a or for commercial purposes, other than using the			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) New York Life Insurance Comp	oany Politi	ical Action Committee					
Full Name of Individual (Last, First, Middle Ir Basmadjyan, Tigran, , Mr.,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 1026 Bramford Drive			07 / D D / Y Y Y Y 2017				
City	State	Zip Code	Transaction ID : PR10630317251				
Glendale	CA	91207-1102	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		230.76				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Ma	naging Partner					
Receipt For:	Aggregate	Year-to-Date V					
Primary General Other (specify) ▼		1730.70	P/R Deduction (\$115.38 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir B. Sigmund, Mark F., , Mr.,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 6697 Woodberry Road			07 31 2017				
City	State	Zip Code	Transaction ID : PR106617251				
Columbus	GA	31904-2296	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		30.00				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	supation (for Individual) ent	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	1				
Primary General Other (specify) ▼		, 210.00	P/R Deduction (\$30.00 Monthly)				
Full Name of Individual (Last, First, Middle Ir C. Griner Jr., Kermit, , Mr.,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 305 Crestfield Drive			07 / D D / Y Y Y Y 07 31 2017				
City	State	Zip Code	Transaction ID : PR106817251				
Columbus	GA	31904-2325	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		60.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Age	ent					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$60.00 Monthly)				
SUBTOTAL of Receipts This Page (optional)	1		320.76				
TOTAL This Period (last page this line number							

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	1 7		
Any information copied from such Reports and or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)									
> New York Life Insurance Corr	ipany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. Nayee, Bhupendra R., , Mr.,	Initial) or Full C	organization Name	Date of	f Receipt					
Mailing Address 303 W Sweetwater Creek E	Drive		M M 07	/ D D 31	/ Y	2017	Y		
City	State	Zip Code	Trans	action ID :	PR10811	17251			
Longwood	FL	32779-3454	Amount	t of Each R	eceipt th	is Period			
FEC ID number of contributing federal political committee.	С				-	30.0	0		
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	M	emo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Ded	uction (\$30.)	00 Month	nly)			
Full Name of Individual (Last, First, Middle B. Ginn III, John A., , Mr.,	Initial) or Full C	organization Name	Date of	f Receipt					
Mailing Address 401 Prince Road	M M 07	/ D D 31	/ Y	y y 2017	Ŷ				
City Saint Augustine	State FL	Zip Code 32086-4906		action ID : I					
T	_	32000-4900	Amoun	t of Each R	eceipt th	is Period			
FEC ID number of contributing federal political committee.	C			<u> </u>	<u> </u>	83.3	4		
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	M	emo Item						
Receipt For:	Aggregate	Year-to-Date ▼		1					
Other (specify) ▼		583.38	P/R Deduction (\$83.34 Monthly)						
Full Name of Individual (Last, First, Middle C. Baumgarten, Gary T., , Mr.,	Initial) or Full C	organization Name	Date of	f Receipt					
Mailing Address 230 W Reading Way			м м 07	/ D D 31	/ Y	2017	Y		
City Winter Park	State FL	Zip Code 32789-6052		saction ID :					
FEC ID number of contributing federal political committee.	С			t of Each Re	eceipt th	175.0	0		
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	м	emo Item					
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 1225.00	P/R Ded	luction (\$175	5.00 Mon	ithly)			
SUBTOTAL of Receipts This Page (optional).						288.3	4		
TOTAL This Period (last page this line numb	er only)								

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ITE	MIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: Mark one)			
	information copied from such Reports and Stat or commercial purposes, other than using the na						
\	IAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee				
A	ull Name of Individual (Last, First, Middle Initial Sedita, Reginald S., , Mr.,) or Full O	rganization Name	Date of Receipt			
_	Aailing Address 10908 Whitecap Drive			07 / D D / Y Y Y Y 07 31 2017			
	City Riverview	State FL	Zip Code 33579-7157	Transaction ID : PR108617251			
-		·-		Amount of Each Receipt this Period			
	EC ID number of contributing ederal political committee.	С		100.00			
٦	lame of Employer (for Individual)	Осси	pation (for Individual)	Memo Item			
	New York Life Insurance Company	Age	nt				
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)			
			ge ge av				
	ull Name of Individual (Last, First, Middle Initial Dolph III, Frank B., , Mr.,) or Full O	rganization Name	Date of Receipt			
Ν	Nailing Address 631 Intracoastal Drive	07 31 2017					
	City	State	Zip Code	Transaction ID : PR109817251			
<u> </u>	Fort Lauderdale	FL	33304-3618	Amount of Each Receipt this Period			
	EC ID number of contributing ederal political committee.	С		250.00			
	Name of Employer (for Individual) Iew York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item			
F	Receipt For:	Aggregate	Year-to-Date 🔻	P/R Deduction (\$250.00 Monthly)			
	Other (specify) V		1750.00				
	ull Name of Individual (Last, First, Middle Initial Eskew Jr., Curtis L., , Mr.,) or Full O	rganization Name	Date of Receipt			
_	Aailing Address 1680 Keely Lane	1		07 31 Y Y Y Y 2017			
	Dity Serecto	State FL	Zip Code	Transaction ID : PR110117251			
-	Sarasota		34232-3061	Amount of Each Receipt this Period			
	EC ID number of contributing ederal political committee.	С		174.67			
N	lame of Employer (for Individual)	Осси	pation (for Individual)	Memo Item			
	New York Life Insurance Company	Ager	nt				
ŀ	Receipt For:	Aggregate	Year-to-Date 🔻				
	Other (specify)		1222.69	P/R Deduction (\$174.67 Monthly)			
su	BTOTAL of Receipts This Page (optional)			524.67			
то	TAL This Period (last page this line number on	ly)					

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports an	d Statements ma	A not be sold or used by any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)		adress of any political commute						
New York Life Insurance Con	npany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle Bailey, Mark F., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1200 Plantation Island Dr. Suite 2	South		07 31 2017					
City Saint Augustine	State FL	Zip Code 32080-3113	Transaction ID : PR110617251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)					
Full Name of Individual (Last, First, Middle B. Holliday, Bruce A., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 8 Mar Vista Circle			07 / D D / Y Y Y Y Y 2017					
City Pensacola	State FL	Zip Code 32507-3485	Transaction ID : PR110817251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		49.67					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item					
Receipt For:	Aggregate	Year-to-Date V						
Other (specify) ▼		347.69	P/R Deduction (\$49.67 Monthly)					
Full Name of Individual (Last, First, Middle C. Krach, Thomas, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 3580 Southwest 146 Terra			07 / D D / Y Y Y Y 07 31 2017					
City Miramar	State FL	Zip Code 33027-3741	Transaction ID : PR111117251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		100.00					
Name of Employer (for Individual) New York Life Insurance Company	New York Life Insurance Company Senior		Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	P/R Deduction (\$50.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			399.67					
TOTAL This Period (last page this line numb	per only)							

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t	Statements mather that has been been been been been been been bee	I ay not be sold or used by any p Iddress of any political committe	person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee									
Full Name of Individual (Last, First, Middle I A. Lyon, William, , Mr.,	II Name of Individual (Last, First, Middle Initial) or Full Organization Name yon, William, , Mr.,										
Mailing Address 3084 Crooked Stick Court	lling Address 3084 Crooked Stick Court										
City Cincinnati	State OH	Zip Code 45244-2586	Transaction ID : PR111417251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		250.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)								
Full Name of Individual (Last, First, Middle I B. Burton, Mark I., , Mr.,	Date of Receipt										
Mailing Address 22781 Foxridge	07 31 Y Y Y Y Y 2017										
City Mission Viejo	State CA	Zip Code 92692-4703	Transaction ID : PR111717251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		250.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)								
Full Name of Individual (Last, First, Middle I C. Bork, James K., , Mr.,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bork, James K., , Mr.,										
Mailing Address 2426 Gibley Park Road	07 / D D / Y Y Y Y 2017										
City Toledo	State OH	Zip Code 43617-2233	Transaction ID : PR112217251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		75.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 525.00	P/R Deduction (\$75.00 Monthly)								
SUBTOTAL of Receipts This Page (optional)			575.00								
TOTAL This Period (last page this line numbe	er only)	······									

Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)										
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15		2 6	17			
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson to so	for the	purp htrib	oose of	soliciting	cont	ributio	ons			
	NAME OF COMMITTEE (In Full)													
	New York Life Insurance Compa	any Politi	cal Action Committee											
Α.	Full Name of Individual (Last, First, Middle Init King, Kim D., , Ms.,	ial) or Full O	rganization Name		Date of Receipt									
	Mailing Address 8037 Lea Court					07 31 / 2017								
	City Holland	State OH	Zip Code 43528-8042	Transaction ID : PR112817251 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			58.00									
	Name of Employer (for Individual) New York Life Insurance Company		Occupation (for Individual) Agent				Memo Item							
	Receipt For: Primary General Other (specify) ▼						P/R Deduction (\$58.00 Monthly)							
R	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Beebe, Larry E., , Mr.,					Re	ceint							
υ.	Mailing Address 3209 Stone Wall Road					Date of Receipt 07 31 2017								
	City	State	Zip Code 43537-9593					PR11341			_			
	Maumee	OH	-	Amount	of	Each R	eceipt th	is Pe	riod					
	FEC ID number of contributing federal political committee.	C				200.00								
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent				emo	Item							
	Receipt For:	Aggregate Year-to-Date ▼			7									
	Other (specify) ▼	rimary General				P/R Deduction (\$200.00 Monthly)								
c.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hensel, Willard L., , Mr.,					Re	ceipt							
	Mailing Address 1103 Sequoia Drive Northwest					07 / 31 / 2017 Transaction ID : PR113917251								
	City Strasburg	State OH	Zip Code 44680-9519					eceipt th						
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	y		91.33	3			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		Memo Item									
	Receipt For: Primary General Other (specify)	imary General General					P/R Deduction (\$91.33 Monthly)							
	UBTOTAL of Receipts This Page (optional)			-			,	· · ·	3	49.33	3			

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ıт.			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1a 3		11b	11c		12 16	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	erson for	the	pur ntrib	oose of	soliciting	g cont	tributio	ons	
	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Compa	any Politio	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Initi King, Jeffery D., , Mr.,	ial) or Full O	organization Name	Date of Receipt								
	Mailing Address 8037 Lea Court			N	07 ^M	1	D D D	/ Y	y 201	17	Ý	
	City Holland	State OH	Zip Code 43528-8042	Transaction ID : PR114317251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С								58.0	0	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent		Me	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00	P/R	Ded	uctio	on (\$58.	00 Montl	hly)			
B.	Full Name of Individual (Last, First, Middle Initi Rudolph, Michael A., , Mr.,	ial) or Full O	organization Name	Da	ite of	Re	ceipt					
	Mailing Address 200 Morgan Circle			īv	07	1	D D D 31	/ Y	y 201	7 7	ſ	
	City	State OH	Zip Code					PR11441				
	Oxford FEC ID number of contributing	С	45056-9403	An	nount	of	Each R	eceipt th	is Pe	50.00	h	
	federal political committee.	0							-	00.0		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)								
с.	Full Name of Individual (Last, First, Middle Initi Bieber, Roderick J., , Mr.,	ial) or Full O	organization Name	Da	ite of	Re	ceipt					
	Mailing Address 485 Winthrop Lane	1		- L	07	1	31		201	7	Ŷ	
	City Saginaw	State MI	Zip Code 48638-6260				-	PR1148 eceipt th	-			
	FEC ID number of contributing federal political committee.	С			iouni		J			65.00	0	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$65.00 Monthly)									
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number c		F				y		1	173.00		

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	-										
New York Life Insurance Co	mpany Politi	cal Action Committee									
Full Name of Individual (Last, First, Midd Quilter, Michael C., , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1053 Edinburgh Cove PO Box 443			07 31 2017								
City	State OH	Zip Code	Transaction ID : PR115517251								
London	OII	43140-2167	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		75.00								
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	P/R Deduction (\$75.00 Monthly)								
Full Name of Individual (Last, First, Midd B. Halus, Thomas M., , Mr.,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Halus, Thomas M., , Mr.,										
Mailing Address 4405 Turnberry Crescent			07 31 YYYYY 2017								
City	State	Zip Code	Transaction ID : PR116417251								
Pueblo	CO	81001-1162	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	68.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		476.00	P/R Deduction (\$68.00 Monthly)								
Full Name of Individual (Last, First, Midd C. Staebler, Thomas H., , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 7303 Red Bank Road			07 31 2017								
City Westerville	State OH	Zip Code 43082-8241	Transaction ID : PR116517251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		70.00								
Name of Employer (for Individual) New York Life Insurance Company	Occi	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 490.00	P/R Deduction (\$70.00 Monthly)								
SUBTOTAL of Receipts This Page (optiona	al)		213.00								
TOTAL This Period (last page this line nur	nber only)	······									

Use separate schedule(s)

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	ny Politio	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initial Moyer, Paul E., , Mr., Mailing Address 8281 Shawnee Forest Drive) or Full O	rganization Name	Date of Receipt
	-	1		07 31 2017
	City	State OH	Zip Code	Transaction ID : PR117017251
	Findlay		45840-8695	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	New York Life Insurance Company	Agei	nt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)
в.	Full Name of Individual (Last, First, Middle Initial Feldman, Wendy, , Ms.,) or Full Oi	rganization Name	Date of Receipt
	Mailing Address 20202 E Superstition Drive	07 31 / Y Y Y Y 07 31 2017		
	City	State	Zip Code	Transaction ID : PR117217251
	Queen Creek	AZ	85142-9760	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	100.00		
	Name of Employer (for Individual) New York Life Insurance Company	Occı Age	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)
с.	Full Name of Individual (Last, First, Middle Initial Hinebaugh, Barbara F., , Ms.,) or Full Oi	rganization Name	Date of Receipt
	Mailing Address 3201 Westmont Place	1		07 / D D / Y Y Y Y 31 / 2017
	City The Villages	State FL	Zip Code 32162-7640	Transaction ID : PR117517251
		' -	32102-7040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) ht	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)
s	UBTOTAL of Receipts This Page (optional)		••••••	400.00
т	OTAL This Period (last page this line number onl	ly)	••••••	

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t	I Statements mathematic name and a	ay not be sold or used by any ddress of any political committe	person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee										
Full Name of Individual (Last, First, Middle A. Meier, Steven, , Mr.,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4575 Lanercost Way			07 31 2017									
City Columbus	State OH	Zip Code 43220-2916	Transaction ID : PR118017251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		125.00									
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) Int	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 875.00	P/R Deduction (\$125.00 Monthly)									
Full Name of Individual (Last, First, Middle 3. Vahala, Mark, , Mr.,	Date of Receipt											
Mailing Address 500 Cedar Elm Court		I	07 / ^D D / ^Y Y Y Y 2017									
City Irving	State TX	Zip Code 75063-8467	Transaction ID : PR120617251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)									
Full Name of Individual (Last, First, Middle Perry, Steven, , Mr.,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 6402 County Road 1480	Otata	Zin Oada	M M / D D / Y Y Y Y 31 2017									
City Lubbock	State TX	Zip Code 79407-1129	Transaction ID : PR12071817251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		230.76									
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Partner	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.70	P/R Deduction (\$115.38 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional).			605.76									
TOTAL This Period (last page this line number	er only)											

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$								
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma ame and a	y not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions								
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee									
A.	Full Name of Individual (Last, First, Middle Initial Nestel, John A., , Mr.,) or Full Oi	rganization Name	Date of Receipt								
	Mailing Address 1003 Weatherstone Drive			07 31 / Y Y Y Y 07 31 2017								
	City	State	Zip Code	Transaction ID : PR120817251								
	Paoli	PA	19301-1938	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		41.67								
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item								
	New York Life Insurance Company	Agei	nt									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		291.69	P/R Deduction (\$41.67 Monthly)								
B.	Full Name of Individual (Last, First, Middle Initial Nowak, Paul, , Mr.,) or Full Oi	rganization Name	Date of Receipt								
	Mailing Address 26 Ten Broek Court	07 31 / Y Y Y Y 07 31 2017										
	City	State	Zip Code	Transaction ID : PR12089317251								
	Bridgewater	NJ	08807-5728	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	36.00										
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 244.00	P/R Deduction (\$16.00 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial Johnson, Christy C., , Ms.,) or Full Oi	rganization Name	Date of Receipt								
	Mailing Address 4216 E 103rd Street			07 31 / Y Y Y Y 07 31 2017								
	City	State	Zip Code	Transaction ID : PR121117251								
	Tulsa	OK	74137-5939	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		41.67								
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) nt	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)								
s	UBTOTAL of Receipts This Page (optional)		••••••	. 119.34								
т	OTAL This Period (last page this line number on	ly)	•••••••									

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11				each category of the ailed Summary Page		X 11a 13		11b 14	11c		Г	17		
Ar or	y information copied from such Reports and Stafor commercial purposes, other than using the	atements ma name and a	ay not t ddress	be sold or used by any pe of any political committee	erson to s	for the	pur ntrit	pose of	soliciting	g contr	ributic	ns		
$\overline{\ }$	NAME OF COMMITTEE (In Full)													
	New York Life Insurance Compa	ny Politi	cal A	ction Committee										
Α.	Full Name of Individual (Last, First, Middle Initi Nichols, Daniel M., , Mr.,	al) or Full O	rganiza	tion Name	Date of Receipt									
	Mailing Address 32 River Bend Road					м м 07	1	D 31	D / Y	ү 201				
	City Trumbull	State CT		o Code 06611-3980					PR1211 Receipt th		riod			
	FEC ID number of contributing federal political committee.	С			<u> </u>		-			41.67	·			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	(for Individual)		М	emo	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	-Date ▼ 291.69		P/R Ded	lucti	on (\$41	.67 Montl	hly)				
в.	Full Name of Individual (Last, First, Middle Initi Sethna, Zarir, , Mr.,	al) or Full O	rganiza	tion Name		Date o	f Re	eceipt						
	Mailing Address 2211 Crescent Palm Lane			м м 07		D 31) / Y	2017		1				
	City	State		o Code				-	PR1212'					
	Houston	ТХ	7	7077-2133	_	Amoun	t of	Each F	Receipt th	nis Per	riod			
	FEC ID number of contributing federal political committee.	C				83.33								
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	•	(for Individual)	Memo Item									
	Receipt For: Primary General	Aggregate	Year-to	-Date V	P/R Deduction (\$83.33 Monthly)									
	Other (specify) V	L	I .		uoti									
с.	Full Name of Individual (Last, First, Middle Initi Levee, David E., , Mr.,	al) or Full O	rganiza	tion Name		Date o	f Re	eceipt						
	Mailing Address 4509 White Cedar Lane					07	/	31		201				
	City Delray Beach	State FL	· · ·	o Code 3445-7036					PR1229 Receipt th		riod			
	FEC ID number of contributing federal political committee.	С				<u> </u>		9	. ,		00.00			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	•	(for Individual)		M	lem	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 700.00				P/R Deduction (\$100.00 Monthly)							
	UBTOTAL of Receipts This Page (optional)					<u> </u>	-	, .	, ,	2	25.00			
L '	OTAL This Period (last page this line number o	····y)	•••••	•••••••••••••••••••••••••••••••••••••••		land a	1.0	-		1				

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Comp	oany Polit	ical Action Committee							
Full Name of Individual (Last, First, Middle In Alame, Samir J., , Mr., Mailing Address 2609 W Wilson Street City Batavia	State IL	Zip Code 60510-7690	Date of Receipt 07 ' 31 ' 2017 Transaction ID : PR123317251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Age	Pupation (for Individual) ent Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
Full Name of Individual (Last, First, Middle Ir B. Schultz, Curtis T., , Mr., Mailing Address 2204 Cherokee Circle City	State	Zip Code	Date of Receipt						
Valparaiso FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company	C Occ Age	46383-2284	Amount of Each Receipt this Period 416.66 Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2916.62	P/R Deduction (\$416.66 Monthly)						
Full Name of Individual (Last, First, Middle Ir Lee Sr., Joseph H., , Mr., Mailing Address 15921 Fairway Lake	nitial) or Full C	Organization Name	Date of Receipt						
City Chesterfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify)	Age	Zip Code 63017-7381	Transaction ID : PR125417251 Amount of Each Receipt this Period 83.34 Memo Item P/R Deduction (\$83.34 Monthly)						
SUBTOTAL of Receipts This Page (optional)		••••••	541.67						
TOTAL This Period (last page this line number	r only)	•••••							

Use separate schedule(s)

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IТ			Use separate schedule(s)	(check only one)									
11			for each category of the Detailed Summary Page		′ 11a 13	\square	11b	11c	12	Г	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any poldress of any political committee	erson e to so	for the	purp htrib	oose of	soliciting	contri	ibutic	ns		
	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	any Politi	cal Action Committee										
Α.	Full Name of Individual (Last, First, Middle Init True, Gregory W., , Mr.,	ial) or Full O	rganization Name		Date of Receipt								
	Mailing Address 719 Council Hill Road				07 / D D / Y Y Y Y 2017								
	City East Dundee	State IL	Zip Code 60118-1008	_	Transaction ID : PR126317251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>		7		ŕ	41.67			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	ipation (for Individual) nt		M	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69		P/R Ded	uctic	on (\$41.0	67 Montł	nly)				
В.	Full Name of Individual (Last, First, Middle Init Massey, Larry D., , Mr.,	ial) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 3761 Mountain Way Cove			07	/	31	/ Y	2017					
	City	State	Zip Code	_				PR12661					
	Snellville	GA	30039-8413	_	Amount	t of	Each R	eceipt th	is Peri	iod			
	FEC ID number of contributing federal political committee.	С	83.34										
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 541.68	P/R Deduction (\$83.34 Monthly)									
с.	Full Name of Individual (Last, First, Middle Init Gavin, Thomas N., , Mr.,	ial) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 449 Vista Court				07 ^M	1	31	JL	2017				
	City Benicia	State CA	Zip Code 94510-2715					PR1268		iod			
	FEC ID number of contributing federal political committee.	С			<u> </u>		7	9	1(00.00)		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) nt		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)									
	UBTOTAL of Receipts This Page (optional)			• •			, , , ,	· · ·	22	25.01			

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17								
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma name and a	ay not be sold or used by any per address of any political committee	rson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Initia Spellbring, Bev, , Ms., Mailing Address 3009 McColm Drive	_		Date of Receipt								
	City Farmington	State NM	Zip Code 87402-5259	Transaction ID : PR127117251								
	FEC ID number of contributing federal political committee.	С	01402-3239	Amount of Each Receipt this Period 41.67								
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)								
B.	Full Name of Individual (Last, First, Middle Initia Mittal, Amrit L., , Mr.,	l) or Full O	Organization Name	Date of Receipt								
	Mailing Address 215 Rugeley Road			07 31 Y Y Y Y Y 2017								
	City Western Springs	State IL	Zip Code 60558-1954	Transaction ID : PR127917251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		250.00								
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	cupation (for Individual) ent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1750.00	P/R Deduction (\$250.00 Monthly)								
с.	Full Name of Individual (Last, First, Middle Initia Desai, Avinash J., , Mr.,	ll) or Full O	Organization Name	Date of Receipt								
	Mailing Address 340 Bloomfield Circle			07 31 2017								
	City Bloomingdale	State IL	Zip Code 60108-2551	Transaction ID : PR128217251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		41.67								
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)								
s	UBTOTAL of Receipts This Page (optional)			333.34								
T	OTAL This Period (last page this line number or	ıly)										

Use separate schedule(s)

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IT.	EMIZED RECEIPTS		Use separate schedule(s)			(check only one)							
11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson fo to soli	or the	pur ntrib	pose of	soliciting	g con	tributi	ons		
	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	any Politi	cal Action Committee										
Α.	Full Name of Individual (Last, First, Middle Initi Heussner, Steven J., , Mr.,	ial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 1105 Pecan Hollow Trail				07 / D D / Y Y Y Y 2017								
	City McKinney	State TX	Zip Code 75070-9060	A	Transaction ID : PR130717251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С								150.0	0		
	Name of Employer (for Individual) New York Life Insurance Company		Occupation (for Individual) Agent										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	P/	R Ded	lucti	on (\$150	0.00 Mor	nthly)				
в.	Full Name of Individual (Last, First, Middle Initi Duchene, David J., , Mr.,	ial) or Full O	rganization Name	C	ate o	f Re	eceipt						
	Mailing Address 25 Kingsview Lane N			м м 07	/	31	/ Y	201		Ŷ			
	City	State	Zip Code		Trans	acti	ion ID :	PR1315 [,]	17251				
	Plymouth	MN	55447-4319	A	moun	t of	Each R	eceipt th	nis Pe	eriod			
	FEC ID number of contributing federal political committee.	C				95.00							
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 665.00	P/R Deduction (\$95.00 Monthly)									
с.	Full Name of Individual (Last, First, Middle Initi Chou, Corina K., , Ms.,	ial) or Full O	rganization Name		ate o	f Re	eceipt						
	Mailing Address 9650 Autry Falls Drive				^M 07	J.	31	JL	201		Y		
	City Alpharetta	State GA	Zip Code 30022-3209	A				PR1317 eceipt th					
	FEC ID number of contributing federal political committee.	С		ļ			y			50.0	0		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) ht	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Aggregate Year-to-Date ▼ 350.00				P/R Deduction (\$50.00 Monthly)						
	UBTOTAL of Receipts This Page (optional)			[-		, . , .		-	295.00	2		

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)								
			person for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Politi	cal Action Committee									
Full Name of Individual (Last, First, Middl Green, Cynthia G., , Ms.,	e Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 1712 Willowbrook Drive			07 31 Y Y Y Y Y 2017								
City	State	Zip Code	Transaction ID : PR132117251								
Lansing	MI	48917-1220	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		40.00								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
New York Life Insurance Company	Age	ent									
Receipt For:	Aggregate	Year-to-Date V									
Primary General Other (specify) ▼		280.00	P/R Deduction (\$40.00 Monthly)								
Full Name of Individual (Last, First, Middl B. Pasman, Jr., G. Joseph, , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 7397 Heather Ridge Cou	rt Southeast		07 31 2017								
City	State	Zip Code	Transaction ID : PR133017251								
Caledonia	MI	49316-9010	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		174.67								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Primary General Other (specify) ▼		, 1222.69	P/R Deduction (\$174.67 Monthly)								
Full Name of Individual (Last, First, Middl C. Nowak, Brian, , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 140 Eagle Point Drive			07 / D D / Y Y Y Y 07 31 2017								
City	State	Zip Code	Transaction ID : PR133417251								
Lyndhurst	OH	44124-3794	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		230.78								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
New York Life Insurance Company	Mar	aging Partner									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optiona	al)		445.45								
TOTAL This Period (last page this line nun	nber only)										

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ı ب			Use separate schedule(s)	(check only one)											
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11; 13	a	11b 14	11c	12		17					
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any po ddress of any political committee	erson for the	ne pu contri	rpose of	soliciting	contri	butio	ns					
	NAME OF COMMITTEE (In Full)														
\rangle	New York Life Insurance Compa	any Politi	cal Action Committee												
Α.	Full Name of Individual (Last, First, Middle Initi Fink, Varda N., , Ms.,	al) or Full O	rganization Name	Date of Receipt											
	Mailing Address 13325 Old Forge Road				07 / 0 / Y Y Y Y 2017										
	City Silver Spring	State MD	Zip Code 20904-6328		Transaction ID : PR133517251 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С						10	0.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		Merr	o Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R D	educ	tion (\$100	0.00 Mon	thly)							
B.	Full Name of Individual (Last, First, Middle Initi Heiting, William D., , Mr.,	al) or Full O	rganization Name	Date	of R	eceipt									
	Mailing Address 1612 Luther Court			M M / D D / Y Y Y Y Y 31 2017											
	City March Calif	State WI	Zip Code				PR13391								
	Marshfield FEC ID number of contributing	_	54449-6014	Amo	unt o	f Each R	eceipt th	is Peri	bd	-					
	federal political committee.	С				- T	-	8	3.34	_					
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) Int	Memo Item											
	Receipt For:	Aggregate	Year-to-Date ▼												
	Other (specify) ▼		583,38	P/R D	educt	ion (\$83.	34 Month	nly)							
c.	Full Name of Individual (Last, First, Middle Initi Jungen, Michael J., , Mr.,	al) or Full O	rganization Name	Date	of R	eceipt									
	Mailing Address N81W23285 Five Iron Way				7	31	JL	2017							
	City Sussex	State WI	Zip Code 53089-1558				PR1346		bd						
	FEC ID number of contributing federal political committee.	С				, <u> </u>	,		8.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 756.00	P/R Deduction (\$108.00 Monthly)											
⊢	UBTOTAL of Receipts This Page (optional)					y		29	1.34	-					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Polit	ical Action Committee										
Full Name of Individual (Last, First, Middle Scheer, Scott, , Mr.,	Initial) or Full (Drganization Name	Date of Receipt									
Mailing Address 101 E Wayfarer Lane			07 / D D / Y Y Y Y 07 31 2017									
City	State WI	Zip Code	Transaction ID : PR135017251									
Appleton	VVI	54913-6353	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		100.00									
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item									
New York Life Insurance Company	Age	ent										
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		700.00	P/R Deduction (\$100.00 Monthly)									
			-									
Full Name of Individual (Last, First, Middle B. Liebelt, Rudolph J., , Mr.,	Initial) or Full (Drganization Name	Date of Receipt									
Mailing Address 5321 W Woodland Drive			07 31 2017									
City	State	Zip Code	Transaction ID : PR135417251									
Brown Deer	WI	53223-1355	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		30.00									
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) ent	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		, 210.00	P/R Deduction (\$30.00 Monthly)									
Full Name of Individual (Last, First, Middle C. Ridings, George N., , Mr.,	Initial) or Full (Drganization Name	Date of Receipt									
Mailing Address 887 West Main Street PO Box 1750			07 / D D / Y Y Y Y 2017									
City	State	Zip Code	Transaction ID : PR136217251									
Richmond	KY	40475-1169	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual)	Memo Item									
Receipt For:	Aggregate	e Year-to-Date ▼	P/R Deduction (\$250.00 Monthly)									
Other (specify)		1450.00										
SUBTOTAL of Receipts This Page (optional).			380.00									
TOTAL This Period (last page this line number	er only)											

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ITEI	MIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)									
	information copied from such Reports and Sta r commercial purposes, other than using the r												
\	AME OF COMMITTEE (In Full) Iew York Life Insurance Compar	ny Politi	cal Action Committee										
A^	ull Name of Individual (Last, First, Middle Initia Naive, James F., , Mr.,	l) or Full O	organization Name	Date of Receipt									
M	ailing Address 6256 Bell Road Court			07 31 2017									
	ity .	State	Zip Code	Transaction ID : PR139017251									
-N	Iontgomery	AL	36117-4357	_ Amount of Each Receipt this Period									
	EC ID number of contributing deral political committee.	С		58.00									
N	ame of Employer (for Individual)	Осси	upation (for Individual)	Memo Item									
N	ew York Life Insurance Company	Age	ent										
R	eceipt For:	Aggregate	Year-to-Date V										
-	Primary General Other (specify) ▼		406.00	P/R Deduction (\$58.00 Monthly)									
	ull Name of Individual (Last, First, Middle Initia Kaneski, Steven R., , Mr.,	l) or Full O	organization Name	Date of Receipt									
M	ailing Address 9692 Sterling Pointe Court			07 31 2017									
Ci	ty	State	Zip Code	Transaction ID : PR141217251									
L	oomis	CA	95650-7120	Amount of Each Receipt this Period									
	EC ID number of contributing deral political committee.	С		416.66									
N Ne	ame of Employer (for Individual) ew York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item									
R	eceipt For:	Aggregate	Year-to-Date ▼										
-	Primary General Other (specify) V		2916.62	P/R Deduction (\$416.66 Monthly)									
	ull Name of Individual (Last, First, Middle Initia Nilson Sr., Lloyd R., , Mr.,	l) or Full O	organization Name	Date of Receipt									
_	ailing Address 3148 Pine Ridge Road			07 / D D / Y Y Y Y 07 31 2017									
	ty	State	Zip Code	Transaction ID : PR141617251									
_N	Iountain Brk	AL	35213-3906	Amount of Each Receipt this Period									
	EC ID number of contributing deral political committee.	С		250.00									
N	ame of Employer (for Individual)	Occu	upation (for Individual)	Memo Item									
	ew York Life Insurance Company	Ager	nt										
	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)									
SUE	BTOTAL of Receipts This Page (optional)		•	724.66									
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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee									
A.	Full Name of Individual (Last, First, Middle Initia Debuys, John F., , Mr.,	ll) or Full O	rganization Name	Date of Receipt								
	Mailing Address 2501 Country Club Circle			07 31 2017								
	City	State	Zip Code	Transaction ID : PR142417251								
	Mountain Brk	AL	35223-1119	_ Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		58.00								
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item								
	New York Life Insurance Company	Age	nt									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)								
B.	Full Name of Individual (Last, First, Middle Initia Ellen, Timothy M., , Mr.,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 113 Highland Pointe Drive			07 31 2017								
	City	State	Zip Code	Transaction ID : PR142817251								
	Lagrange	GA	30240-3791	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		100.00								
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		700.00	P/R Deduction (\$100.00 Monthly)								
C.	Full Name of Individual (Last, First, Middle Initia	ll) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1808 Covewood Drive Southeas			07 / D D / Y Y Y Y 07 31 2017								
	City Huntsville	State AL	Zip Code 35801-1352	Transaction ID : PR142917251								
			35601-1552	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		41.67								
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item								
	New York Life Insurance Company	Ager	nt	_								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)								
s	UBTOTAL of Receipts This Page (optional)			199.67								
т	OTAL This Period (last page this line number or	וy)	>									

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b	11c 15		Г	17			
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committed	erson f e to so	for the	purp	ose of	soliciting	g contr	ributic	ons			
	NAME OF COMMITTEE (In Full)													
\rangle	New York Life Insurance Compa	any Politi	cal Action Committee											
А.	Full Name of Individual (Last, First, Middle Init Donaldson, Joseph W., , Mr.,	ial) or Full O	rganization Name		Date of Receipt									
	Mailing Address 711 Forestdale Drive				07 31 / Y Y Y Y 2017									
	City	State	Zip Code		Transaction ID : PR143717251									
	Montgomery	AL	36109-4403	/	_ Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					-		1:	50.00)			
	Name of Employer (for Individual)	Оссі	upation (for Individual)		M	emo	Item							
	New York Life Insurance Company	Age	nt											
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General		4050.00	P	/R Ded	uctio	n (\$150	.00 Mon	thly)					
	Other (specify) v		1050.00	1										
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name											
В.	Cook, Belva M., , Ms.,				Date of	Rec	eipt							
	Mailing Address 219 Belmont Drive				м м 07	1	D D D 31	/ Y	2017					
	City	State	Zip Code					PR14511						
	North Little Rock	AR	72116-9310		Amount	of E	Each Re	eceipt th	is Per	riod				
	FEC ID number of contributing federal political committee.	С		28.84										
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age		Memo Item										
	Receipt For:	Aggregate	Year-to-Date V		-									
	Primary General	33 - 3		P/	/R Ded	uction	n (\$28.8	34 Month	ıly)					
	Other (specify) v	L	, 201.88											
c.	Full Name of Individual (Last, First, Middle Init Coats, Jerry D., , Mr.,	ial) or Full O	rganization Name		Date of	Rec	eipt							
	Mailing Address 165 Pebble Beach Drive				07	/	D D D 31	/ Y	2017					
	City	State	Zip Code		Trans	actio	on ID :	PR1456	17251					
	Little Rock	AR	72212-2645		Amount	of E	Each Re	eceipt th	is Per	riod				
	FEC ID number of contributing federal political committee.	С					,	9	2	50.00)			
	Name of Employer (for Individual)	Осси	upation (for Individual)	\neg	M	emo	Item							
	New York Life Insurance Company	Agei	nt											
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Primary General		1750.00	P	/R Ded	uctio	n (\$250	.00 Mon	thly)					
	Other (specify)		7	41.										
⊢	UBTOTAL of Receipts This Page (optional)			• •				- <u>-</u>	42	28.84				
ΙĨ	OTAL This Period (last page this line number of	only)	•••••••	•					-					

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IT	EMIZED RECEIPTS		for each	category of the Summary Page	` `	11a 13	11b 14	11c	12 16	17				
	y information copied from such Reports and Stat for commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Actio	n Committee										
Α.	Full Name of Individual (Last, First, Middle Initial Martin, Timothy A., , Mr., Mailing Address 9010 Reservoir Court				Date of Receipt									
	City Little Rock	State AR	Zip Coo 72227	de 7-5702				: PR1461						
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period 41.67								
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for nt	Individual)		Mer	no Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	291.69	P/I	R Deduc	ction (\$41	I.67 Mont	hly)					
В.	Full Name of Individual (Last, First, Middle Initial Welch-Blair, Sharon, , Ms.,) or Full O	rganization	Name	Date of Receipt									
	Mailing Address 2120 Louisiana Street	State	Zip Coo	10	_ L	07 / 31 / 2017 Transaction ID : PR146617251								
	City Little Rock	AR	72206						17251 nis Period					
	FEC ID number of contributing federal political committee.	С				91.34								
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for ent	Individual)	1	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	e ▼ 639.38	P/R Deduction (\$91.34 Monthly)									
C.	Full Name of Individual (Last, First, Middle Initial McConathy, Thomas, , Mr.,) or Full O	rganization	Name	D	Date of F	Receipt							
	Mailing Address 9908 Highway 965	04-44-	7:0.00		_ L	07 ^M	/ 31		2017	Y				
	City St. Francisville	State LA	Zip Coo 70775					: PR1469	nis Period					
	FEC ID number of contributing federal political committee.	С							230.	78				
	Name of Employer (for Individual) New York Life Insurance Company	Man	upation (for aging Partne	, PL		Mer	no Item							
	Receipt For: Primary General Other (specify)	9 ▼ 1730.85	P/	R Dedu	ction (\$1	15.39 Bi-V	Veekly)							
s	UBTOTAL of Receipts This Page (optional)			•••••	[, .	,	363.7	79				
т	OTAL This Period (last page this line number on	ly)		••••••										

FOR LINE NUMBER:

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17			(chec	(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b 14	11c		2 16	17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p address of any political committee	erson for e to solic	the it cor	pur htrib	pose of outions f	soliciting	g cont	ributio	ons		
\setminus	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	any Politi	cal Action Committee										
Α.	Full Name of Individual (Last, First, Middle Init Faulk, Daniel J., , Mr.,	tial) or Full O	organization Name	Date of Receipt									
	Mailing Address 16269 Woodland Trail				07 / D D / Y Y Y Y 2017								
	City Baton Rouge	State LA	Zip Code 70817-3189		Transaction ID : PR147017251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С						- 49-		41.67	7		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age		Me	emo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R	Ded	ucti	on (\$41.	67 Montl	hly)				
в.	Full Name of Individual (Last, First, Middle Init Davenport, Kathleen, , Ms.,	tial) or Full O	organization Name	Da	ate of	Re	eceipt						
	Mailing Address 1337 Huron Avenue		07 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
	City	State	Zip Code		rans	acti	ion ID :	PR1476	17251				
	Metairie	LA	70005-1233	An	nount	of	Each R	eceipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	С	108.00										
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$108.00 Monthly)										
с.	Full Name of Individual (Last, First, Middle Init Guerin, Michele, , Ms.,	tial) or Full O	organization Name	Da	ate of	Re	eceipt						
	Mailing Address 539 Little Farms Avenue			ľ	07 ^M	1	D 31	/ Y	201				
	City River Ridge	State LA	Zip Code 70123-1311				-	PR1489 eceipt th					
	FEC ID number of contributing federal political committee.	С					y .			41.67	7		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		M	emo	ttem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)									
s	UBTOTAL of Receipts This Page (optional)						, .	. ,	1	191.34	i i		
Т	OTAL This Period (last page this line number of	only)						-		-			

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
II EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions te to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
> New York Life Insurance Con	npany Politi	cal Action Committee									
Full Name of Individual (Last, First, Middle A. Fitzgerald, Tim C., , Mr.,	Initial) or Full O	rganization Name	Date of Receipt 07 31 2017								
Mailing Address 12086 Ellerbe Road											
City	State	Zip Code	Transaction ID : PR149417251								
Shreveport	LA	71115-9568	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		416.66								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
New York Life Insurance Company	Age	nt									
Receipt For:	Aggregate	Year-to-Date ▼	D/D Deduction (\$416.66 Monthly)								
Other (specify) ▼		2916.62	P/R Deduction (\$416.66 Monthly)								
		7	-								
Full Name of Individual (Last, First, Middle B. McCann, Michael, , Mr.,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 492 Hickory Trace PO Box 341			07 31 Y Y Y Y 2017								
City Saint Albans	State MO	Zip Code 63073-1118	Transaction ID : PR150217251								
FEC ID number of contributing		03073-1110	Amount of Each Receipt this Period								
federal political committee.	C		30.00								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Primary General Other (specify) ▼		, 225.00	P/R Deduction (\$15.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. Madden, Daniel L., , Mr.,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3990 College Street											
		1	07 31 2017								
City Arcadia	State LA	Zip Code 71001-3641	Transaction ID : PR150417251								
		71001 3041	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		32.00								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual)	Memo Item								
Receipt For:	Ager	Year-to-Date V									
Primary General Other (specify)		224.00	P/R Deduction (\$32.00 Monthly)								
SUBTOTAL of Receipts This Page (optional)			478.66								
TOTAL This Period (last page this line numb	per only)										

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
II EIVILED KEGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 berson for the purpose of soliciting contributions to solicit contributions from such committee. 16 16								
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	cal Action Committee									
Full Name of Individual (Last, First, Mid Dandry Mayes, Tina, , Ms.,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2604 Oak Forest Boule	vard		07 31 2017								
City Marrero	State LA	Zip Code 70072-6642	Transaction ID : PR150617251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		83.34								
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)								
Full Name of Individual (Last, First, Mid B. Stagg, John, , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5409 East 80th Place	State	Zip Codo	07 / 31 / 2017								
City Tulsa	State OK	Zip Code 74136-8443	Transaction ID : PR150717251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		230.76								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.70	P/R Deduction (\$115.38 Bi-Weekly)								
Full Name of Individual (Last, First, Mid C. Norris, Bryan, , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 639 Loyola Avenue <u>Suite 1900</u> City	State	Zip Code	07 / D D / Y Y Y Y 07 31 2017 Transaction ID : PR151017251								
New Orleans	LA	70113-3188	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		230.78								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Partner	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	nal)		544.88								
TOTAL This Period (last page this line nu	mber only)										

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: 11 a model 11 a model </th									
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) New York Life Insurance Corr	npany Polit	ical Action Committee										
Full Name of Individual (Last, First, Middle Smith, Lionel A., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 3922 Patterson Drive			07 31 2017									
City	State	Zip Code	Transaction ID : PR151517251									
New Orleans	LA	70114-1809	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		125.00									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
New York Life Insurance Company	Age	ent										
Receipt For:	Aggregate	Year-to-Date V										
Other (specify) ▼		875.00	P/R Deduction (\$125.00 Monthly)									
Full Name of Individual (Last, First, Middle B. Triche, Sidney A., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address PO Box 159			07 31 2017									
City	State	Zip Code	Transaction ID : PR151617251									
Larose	LA	70373-0159	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		91.33									
Name of Employer (for Individual) New York Life Insurance Company	Occ Ag	supation (for Individual) ent	Memo Item									
Receipt For:	Aggregate	Year-to-Date V										
Other (specify) ▼		, 639.31	P/R Deduction (\$91.33 Monthly)									
Full Name of Individual (Last, First, Middle C. Ellis, Daryl R., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 7918 Settlers Circle			07 / D D / Y Y Y Y 2017									
City Boton Bourse	State	Zip Code	Transaction ID : PR152817251									
Baton Rouge	LA	70810-2096	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
New York Life Insurance Company	Age	nt										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)									
SUBTOTAL of Receipts This Page (optional)		•	466.33									
TOTAL This Period (last page this line numb												

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IТ	EMIZED RECEIPTS		Use separate schedule(s)	(ch	(check only one)								
11			for each category of the Detailed Summary Page	×	11a 13		11b	11c		2 6	17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	L ay not be sold or used by any pe ddress of any political committee	erson to so	for the	purp ntrib	oose of	soliciting	conti	ributio	ons		
	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	any Politi	cal Action Committee										
А.	Full Name of Individual (Last, First, Middle Init Bonin, Joseph S., , Mr.,	tial) or Full O	rganization Name		Date of Receipt								
	Mailing Address 633 Gertrude Drive				07 31 / Y Y Y Y 2017								
	City St. Martinville	State LA	Zip Code 70582-4935	_	Transaction ID : PR153017251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>		-	 		50.00)		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	F	P/R Ded	uctio	on (\$50.)	00 Month	nly)				
B	Full Name of Individual (Last, First, Middle Init Prudhomme, Christopher, , Mr.,	tial) or Full O	rganization Name		Date of	Re	ceipt						
0.	Mailing Address 9 Huntington Court				07	/	31	/ Y	2017				
	City	State	Zip Code		Trans	acti	on ID : I	PR15381	7251				
	Newport Beach	CA	92660-4217		Amount	of	Each R	eceipt th	is Per	riod			
	FEC ID number of contributing federal political committee.	С	230.76										
	Name of Employer (for Individual) New York Life Insurance Company	Occi Mar	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.70	P	/R Ded	uctic	on (\$115	.38 Bi-W	/eekly))			
С.	Full Name of Individual (Last, First, Middle Init Hebert, Samuel L., , Mr.,	tial) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 3307 Henderson Bayou Road				^M 07	1	D D D 31	JL	201	7			
	City Lake Charles	State LA	Zip Code 70605-2248					PR1540 [°] eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	. <u>,</u>	1	25.00)		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		M	emo	tem						
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 875.00	P/R Deduction (\$125.00 Monthly)										
	UBTOTAL of Receipts This Page (optional)		F	-		_	, ,	, ,	4	05.76	;		
Т	OTAL This Period (last page this line number of	only)	••••••		<u></u>		_				_		

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions te to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) New York Life Insurance Cc	ompany Politi	cal Action Committee										
/ Full Name of Individual (Last, First, Midd A. Kihneman, Jr., Jim, , Mr.,	lle Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 11175 Heritage Oaks Ci	rcle		07 31 2017									
City Shreveport	State LA	Zip Code 71106-8383	Transaction ID : PR154417251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		30.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)									
Full Name of Individual (Last, First, Midd B. Ellis Jr., Gordon D., , Mr.,	lle Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 11410 Sugar Lane			07 31 2017									
City Baton Rouge	State LA	Zip Code 70810-2059	Transaction ID : PR154617251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)									
Full Name of Individual (Last, First, Midd C. Delahaye, Michael T., , Mr.,	lle Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 7515 Jefferson Highway	# 175	Zip Code										
Baton Rouge	LA	70806-8308	Transaction ID : PR154717251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1290.00	P/R Deduction (\$250.00 Monthly)									
SUBTOTAL of Receipts This Page (option	al)		530.00									
TOTAL This Period (last page this line nur	mber only)											

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IТ		Use separate schedule(s)		(ch	(check only one)								
11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson to so	for the	pur ntrik	pose of	soliciting	g con	tributi	ons		
	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	any Politio	cal Action Committee										
Α.	Full Name of Individual (Last, First, Middle Initi Vicknair, Bruce J., , Mr.,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 201 Ashland Drive				07 / D D / Y Y Y Y 31 2017								
	City Thibodaux	State LA	Zip Code 70301-2901		Transaction ID : PR154817251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>			-		41.6	7		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	ipation (for Individual) ht		М	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	F	P/R Ded	ucti	on (\$41.	.67 Mont	hly)				
B.	Full Name of Individual (Last, First, Middle Initi Shumard, Michael W., , Mr.,	al) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 14501 Peaceful Home Road			м м 07	/	31	/ Y	y 201	۲ 17	Ŷ			
	City	State	Zip Code		Trans	acti	ion ID :	PR1564 ⁻	17251	1			
	Natural Dam	AR	72948-9552	_	Amoun	t of	Each R	leceipt th	nis Pe	eriod			
	FEC ID number of contributing federal political committee.	С	30.00										
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 210.00	P	/R Ded	uctio	on (\$30.	00 Montł	nly)				
с.	Full Name of Individual (Last, First, Middle Initi Noland, Michael R., , Mr.,	al) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 5933 S Knoxville Avenue				07	/	31	JL	201	1. A	Y		
	City Tulsa	State OK	Zip Code 74135-7806					PR1569 leceipt th					
	FEC ID number of contributing federal political committee.	С					y			250.0	0		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) It		M	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)									
\vdash	UBTOTAL of Receipts This Page (optional)					-	9 			321.6 ⁻	7		

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11b 11c 12 13 14 15 16 17
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) New York Life Insurance Comp	any Politic	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle In Bangasser, Fred D., , Mr., Mailing Address 7400 Crestway Drive Apt. 122		rganization Name	Date of Receipt
		20		07 31 2017
	City	State TX	Zip Code	Transaction ID : PR157917251
	San Antonio		78239-3097	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		416.66
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	New York Life Insurance Company	Ager	nt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2083.32	P/R Deduction (\$416.66 Monthly)
— R	Full Name of Individual (Last, First, Middle In Bernard, Lawrence J., , Mr.,	itial) or Full Or	rganization Name	Date of Receipt
	Mailing Address 5100 San Felipe Street Unit 1	81E		07 31 2017
	City	State	Zip Code	Transaction ID : PR158017251
	Houston	TX	77056-3687	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		83.34
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)
<u>с</u> .	Full Name of Individual (Last, First, Middle In Nowak, Robert C., , Mr.,	itial) or Full Or	rganization Name	Date of Receipt
	Mailing Address 98 Logwood Street			07 / D D / Y Y Y Y 2017
	City South Burlington	State VT	Zip Code 05403-6444	Transaction ID : PR15817251
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agen	ipation (for Individual) ht	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00	P/R Deduction (\$40.00 Monthly)
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			540.00

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 17						
Any information copied from such Reports and Sta or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full) New York Life Insurance Compa	any Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle Initia A. Vitek Jr., Raymond, , Mr.,	al) or Full O	rganization Name	Date of Receipt						
Mailing Address 818 San Marino Street	Chata	Zin Oode	07 / D D / Y Y Y Y 31 2017						
City Sugar Land	State TX	Zip Code 77478-3328	Transaction ID : PR158217251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		83.33						
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.31	P/R Deduction (\$83.33 Monthly)						
Full Name of Individual (Last, First, Middle Initia B. Morgan, Michael, , Mr.,	al) or Full O	organization Name	Date of Receipt						
Mailing Address 2791 Nightwind Court			07 31 2017						
City Frisco	State TX	Zip Code 75034-4669	Transaction ID : PR159717251						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.20	P/R Deduction (\$27.08 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Initia C. Surles, Gib, , Mr.,	al) or Full O	organization Name	Date of Receipt						
Mailing Address 434 Westminster Drive			07 / D D / Y Y Y Y Y 2017						
City Houston	State TX	Zip Code 77024-5609	Transaction ID : PR160117251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer (for Individual) New York Life Insurance Company	Occi Agei	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)						
SUBTOTAL of Receipts This Page (optional)			387.49						

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: Mark 11 a mark 11 a mark						
	y information copied from such Reports and Sta for commercial purposes, other than using the n									
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee							
Α.	Full Name of Individual (Last, First, Middle Initia Ball, Thomas H., , Mr.,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 2200 Westlake Drive			07 31 2017						
	City Austin	State TX	Zip Code 78746-2933	Transaction ID : PR160817251						
			10140 2000	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		250.00						
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item						
	New York Life Insurance Company	Age	nt							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	P/R Deduction (\$250.00 Monthly)						
в.	Full Name of Individual (Last, First, Middle Initia Schuford Jr., Lawson J., , Mr.,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 201 Plano Street			07 31 2017						
	City	State	Zip Code	Transaction ID : PR161017251						
	Shreveport	LA	71103-2056	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		41.67						
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 291.69	P/R Deduction (\$41.67 Monthly)						
с.	Full Name of Individual (Last, First, Middle Initia Breedlove, John R., , Mr.,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 1227 Fisher Drive			07 31 Y Y Y Y Y						
	City	State	Zip Code	Transaction ID : PR162917251						
	Tyler	ТХ	75701-6929	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occi Ager	upation (for Individual)	Memo Item						
	Receipt For:		Year-to-Date ▼							
	Primary General Other (specify)		350.00	P/R Deduction (\$50.00 Monthly)						
s	UBTOTAL of Receipts This Page (optional)			341.67						
т	OTAL This Period (last page this line number or	ly)								

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FOR LINE NUMBER:

PAGE 64 OF

ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: Mark and the second seco				
	y information copied from such Reports and Stat for commercial purposes, other than using the n							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politic	cal Action Committee					
A.	Full Name of Individual (Last, First, Middle Initial McKinley, Robert, , Mr.,	l) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 243 Maple Valley Road	1		07 31 Y Y Y Y Y 2017				
	City Houston	State TX	Zip Code 77056-1009	Transaction ID : PR163017251				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) aging Partner	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Initia Saenz, Aurora, , Ms.,	l) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 2002 S Westgate Drive	State	Zip Code	07 / D D / Y Y Y Y 07 31 2017				
	Weslaco	TX	78596-9310	Transaction ID : PR164017251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		166.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) ht	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ , 1162.00	P/R Deduction (\$166.00 Monthly)				
C.	Full Name of Individual (Last, First, Middle Initial Lewis, Trenton, , Mr.,	l) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 3717 Eck Lane	State	Zip Code	07 / D D / Y Y Y Y 31 2017				
	Austin	TX	78734-1610	Transaction ID : PR164217251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		230.78				
	Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Mana	pation (for Individual) aging Partner	Memo Item				
	Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 807.81	P/R Deduction (\$38.47 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)			627.56				
т	OTAL This Period (last page this line number on	ly)						

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11			for each cate Detailed Sun			X 11a 13		11b 14	11c		12 16	17	
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold o ddress of any p	r used by any peolitical committee	ersor e to s	n for the	pur ntrib	pose of outions f	soliciting	g cont	tributio	ons	
\square	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	ny Politi	cal Action (Committee									
Α.	Full Name of Individual (Last, First, Middle Initia Nakahara-Goven, Yuka, , Ms.,	al) or Full O	rganization Nam	ie		Date o	f Re	eceipt					
	Mailing Address 1209 Magnolia Drive					07 31 Y Y Y Y 2017							
	City	State TX	Zip Code	50		Transaction ID : PR164817251							
	Carrollton	TX 75007-4852					t of	Each R	eceipt th	nis Pe	riod		
	FEC ID number of contributing federal political committee.	С						-	-		50.00)	
	Name of Employer (for Individual)	Occ	upation (for Indiv	/idual)		Μ	lemo	ltem					
	New York Life Insurance Company	Age	ent										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General			350.00	11	P/R Dec	ducti	on (\$50.	00 Mont	hly)			
	Other (specify)			350.00									
_	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Nam	1e		5.							
в.	Espinoza III, Amado, , Mr.,				_	Date o	t Re	eceipt					
	Mailing Address 608 Golondrina Drive						/	31	/ Y	201			
	Roswell	NM	88201-132	23	\vdash				PR1650				
	FEC ID number of contributing federal political committee.	C				Amoun			eceipt th	IIS FE	50.00)	
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent			Memo Item								
	Receipt For:		Year-to-Date ▼										
	Primary General	Ayyreyale			P/R Deduction (\$50.00 Monthly)								
	Other (specify) ▼	L	<u> </u>	350.00						,			
с.	Full Name of Individual (Last, First, Middle Initia Gonzales, Elizabeth S., , Ms.,	al) or Full O	rganization Narr	ie		Date o	f Re	eceipt					
	Mailing Address 724 Wales Way					07	/	D D D 31	/ Y	201			
	City	State	Zip Code			Trans	sact	ion ID :	PR1667	17251	1		
	Austin	TX	78748-653	31		Amoun	t of	Each R	eceipt th	nis Pe	riod		
	FEC ID number of contributing federal political committee.	С						,	,		83.34	1	
	Name of Employer (for Individual)	Occi	upation (for Indiv	/idual)		N	lemo	b Item					
	New York Life Insurance Company	Age	nt	,									
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify)		583.38					P/R Deduction (\$83.34 Monthly)					
⊢	UBTOTAL of Receipts This Page (optional)					[. [.	-	y 1	, y , y	1	183.34		

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FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: The second				
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	ny Politio	cal Action Committee					
Α.	Full Name of Individual (Last, First, Middle Initial Isgur, Stuart J., , Mr., Mailing Address 777 Main Street Suite 3800) or Full O	rganization Name	Date of Receipt				
				07 31 2017				
	City	State TX	Zip Code	Transaction ID : PR167817251				
	Fort Worth		76102-5319	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		125.00				
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
	New York Life Insurance Company	Agei	nt					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 875.00	P/R Deduction (\$125.00 Monthly)				
B.	Full Name of Individual (Last, First, Middle Initial Frey, Marcel R., , Mr.,) or Full Oi	rganization Name	Date of Receipt				
	Mailing Address 1703 S Medio River Circle			07 31 Y Y Y Y 07 31 2017				
	City	State	Zip Code	Transaction ID : PR168217251				
	Sugar Land	ТХ	77478-5315	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		84.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00	P/R Deduction (\$84.00 Monthly)				
C.	Full Name of Individual (Last, First, Middle Initial Johnson, Rodger K., , Mr.,) or Full Oi	rganization Name	Date of Receipt				
	Mailing Address 910 N Houston Street			07 / D D / Y Y Y Y 2017				
	City	State TX	Zip Code	Transaction ID : PR168817251				
	Bullard		75757-5128	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) nt	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)				
s	UBTOTAL of Receipts This Page (optional)		••••••	459.00				
т	OTAL This Period (last page this line number onl	ly)	••••••					

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ı ب			Use separate schedule(s)			(check only one)						
11	EMIZED RECEIPTS		for each category of Detailed Summary Pa		×	11a 13		11b 14	11c		2 6 [17
Ar or	ny information copied from such Reports and St. for commercial purposes, other than using the	atements ma name and a	y not be sold or used b ddress of any political co	y any personnittee to	son fo	or the	pur ntrib	pose of	soliciting	g conti	ributic	ns
	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Compa	ny Politi	cal Action Comm	ittee								
A.	Full Name of Individual (Last, First, Middle Initi Wright, Gregory M., , Mr.,	al) or Full O	rganization Name			Date o	f Re	eceipt				
	Mailing Address 705 Riviera Court				07 31 2017							
	City Midland	State TX	Zip Code 79705-1900					-	PR1689	-		
							t of	Each F	Receipt th	nis Per	riod	
	FEC ID number of contributing federal political committee.	С				_		-			41.67	,
	Name of Employer (for Individual)	Оссі	upation (for Individual)			М	emo	ltem				
	New York Life Insurance Company	Age	nt									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		291	.69	P/	R Ded	lucti	on (\$41	.67 Mont	hly)		
					1							
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name									
Β.	Maus, Stephen N., , Mr.,					Date of	f Re	eceipt				
	Mailing Address 952 Private Road 5927	State Zin Code				™ 07	/	31) / Y	201		
	City	State TX	Zip Code						PR1702			
	Emory		75440-0000			moun	t of	Each F	Receipt th	nis Pei	riod	_
	FEC ID number of contributing federal political committee.	C								2	250.00)
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt		М	emo	tem					
	Receipt For:		Year-to-Date ▼		1							
	Primary General				P/R Deduction (\$250.00 Monthly)							
	Other (specify) ▼	L	1750	0.00								
C.	Full Name of Individual (Last, First, Middle Initi Kageleiry, Paul J., , Mr.,	al) or Full O	rganization Name		С	Date o	f Re	eceipt				
	Mailing Address 35 Isaac Lucas Circle					^M 07	/	D 31		201 [°]		
	City	State	Zip Code			Trans	sact	ion ID :	PR1717	251		
	Dover	NH	03820-4915		A	moun	t of	Each F	Receipt th	nis Per	riod	
	FEC ID number of contributing federal political committee.	С				_		y	9		33.00)
	Name of Employer (for Individual)	Оссі	upation (for Individual)			M	emo	b Item				
	New York Life Insurance Company	Ager	nt									
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Other (specify)		231	P/R Deduction (\$33.00 Monthly)								
	UBTOTAL of Receipts This Page (optional)					-		y .		3	24.67	

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IТ			Use separate schedule(s)	(0	(check only one)						
			for each category of the Detailed Summary Page		X 11a 13		11b 14	11c 15		12 16	17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p address of any political committe	person person	n for the	pur	pose of	soliciting	g con	tributio	ons
$\left[\right]$	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	ical Action Committee								
Α.		al) or Full O	Organization Name	Date of Receipt							
	Mailing Address 19425 Vine Ridge Road				07 31 2017						
	City Excelsior	State MN	Zip Code 55331-9173				ion ID : Each R				
	FEC ID number of contributing federal political committee.	С								58.0	0
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		N	lemo	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00]	P/R Dec	ducti	on (\$58.	00 Mont	hly)		
B	Full Name of Individual (Last, First, Middle Initi Johnson, James H., , Mr.,	al) or Full O	Organization Name		Date o	of Re	eceint				
	Mailing Address 1635 Cliff Avenue						31	/ Y	201	17	Y
	City	State	Zip Code		Trans	sact	ion ID :	PR1726	17251	L	
	Duluth	MN	55811-2101		Amoun	nt of	Each R	eceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С		60.00						0	
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent				Memo Item					
	Receipt For:	Aggregate									
	Other (specify) ▼		, 420.00	1	P/R Deduction (\$60.00 Monthly)						
С.	Full Name of Individual (Last, First, Middle Initi Lewis, Terry K., , Mr.,	al) or Full O	Organization Name		Date o	of Re	eceipt				
	Mailing Address 5612 Dale Avenue				07	1	D D D 31	/ Y	201	17 [°]	Y
	City Edina	State MN	Zip Code 55436-2469				ion ID : Each R				
	FEC ID number of contributing federal political committee.	С					J			250.00	0
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		N	/lem	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00]	P/R Deduction (\$250.00 Monthly)						
s	UBTOTAL of Receipts This Page (optional)				<u> </u>		,	. ,		368.00	0
ד	OTAL This Period (last page this line number o	only)									_

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
New York Life Insurance Con	npany Politi	cal Action Committee										
Full Name of Individual (Last, First, Middle A. Kuehl, Lanny, , Mr.,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 202 N Homestead Street			07 31 2017									
City	State	Zip Code	Transaction ID : PR173717251									
Garnavillo	IA	52049-8099	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		33.00									
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item									
New York Life Insurance Company	Age											
Receipt For:		Year-to-Date ▼										
Primary General	, iggi oguto		P/R Deduction (\$33.00 Monthly)									
Other (specify) ▼		231.00]									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name										
B. Olmstead, Martha N., , Ms.,			Date of Receipt									
Mailing Address 565 Bellevue Avenue Apt.			07 / <u>31</u> / <u>2017</u>									
City	State	Zip Code	Transaction ID : PR173917251									
Oakland	CA	94610-5018	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		35.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ	upation (for Individual) ent	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	7									
Primary General	1.55.05410		P/R Deduction (\$35.00 Monthly)									
Other (specify)		245.00										
Full Name of Individual (Last, First, Middle c. Roslien, Craig H., , Mr.,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4210 Queens Way			M = M / D = D / Y = Y = Y = Y									
			07 31 2017									
City	State MN	Zip Code	Transaction ID : PR174217251									
Minnetonka		55345-3033	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		65.00									
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item									
New York Life Insurance Company	Age	nt										
Receipt For:	Aggregate	Year-to-Date V										
Primary General		455.00	P/R Deduction (\$65.00 Monthly)									
Other (specify)		455.00										
SUBTOTAL of Receipts This Page (optional)			133.00									
TOTAL This Period (last page this line numb	per only)											

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)						
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions						
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	ny Politi	cal Action Committee							
A.	Full Name of Individual (Last, First, Middle Initia Mc Clain, Marlyn, , Mr.,	al) or Full C	organization Name	Date of Receipt						
	Mailing Address 208 Parkwild Drive	1 -		07 / D D / Y Y Y Y 2017						
	City Council Blfs	State IA	Zip Code 51503-1759	Transaction ID : PR175417251						
			51505-1759	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		166.67						
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
	New York Life Insurance Company	Age	ent							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		1166.69	P/R Deduction (\$166.67 Monthly)						
в.	Full Name of Individual (Last, First, Middle Initia Bell, Dennis J., , Mr.,	al) or Full C	Prganization Name	Date of Receipt						
	Mailing Address 10576 Sunset Terrace			07 31 2017						
	City	State	Zip Code	Transaction ID : PR175717251						
	Clive	IA	50325-6554	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		85.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
	Receipt For:	Aggregate	Year-to-Date V							
	Primary General Other (specify) ▼		595.00	P/R Deduction (\$85.00 Monthly)						
	Full Name of Individual (Last, First, Middle Initia Silver, Linda L., , Ms.,	al) or Full C	organization Name	Date of Receipt						
	Mailing Address 4415 State Street Apt. 2			07 / D D / Y Y Y Y 2017						
	City	State	Zip Code	Transaction ID : PR176717251						
	Riverdale	IA	52722-6328	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		30.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)						
S	UBTOTAL of Receipts This Page (optional)		•	281.67						
т	OTAL This Period (last page this line number or	nly)	••••••							

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IT.			Use separate schedule(s)	(che	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
$\overline{)}$	NAME OF COMMITTEE (In Full)												
\rangle	New York Life Insurance Compar	ny Politi	ical Action Committee										
A.	Full Name of Individual (Last, First, Middle Initia McConnell, Michael, , Mr.,	l) or Full O	Organization Name		Date of Receipt								
	Mailing Address 11818 E 83rd Place N				07 31 2017								
	City Owasso	State OK	Zip Code 74055-2170					PR1775					
			14003 2110	_ ^	mount	ot	Each H	eceipt th	nis Perioc	1			
	FEC ID number of contributing federal political committee.	С			_				75	.00			
	Name of Employer (for Individual)	Осси	upation (for Individual)		Me	emo	Item						
	New York Life Insurance Company	Age	ent										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼	· · · ·	525.00	P/	R Ded	uctio	on (\$75.	00 Mont	hly)				
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	Organization Name										
Β.	Braswell, Troy, , Mr.,			Date of	Re	ceipt							
	Mailing Address 16843 Highland Ridge Drive	Otata	Zin Oode	_ [м м 07	/	31	/ Y	2017	Ŷ			
	City Village Of Loch Lloyd	State MO	Zip Code 64012-4177					PR1790		1			
			04012-4177		mount	OT	Each H	eceipt tr	nis Perioc	1			
	FEC ID number of contributing federal political committee.	С		230.78									
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Managing Partner			Me	emo	Item						
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General Other (specify) ▼		, 1730.85	P/R Deduction (\$115.39 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initia Dody, Galen D., , Mr.,	l) or Full O	Organization Name		Date of	Re	ceipt						
	Mailing Address 501 David Drive				M M	/	D D	/ Y	YY	Y			
	City	State	Zip Code	- I	07	a a ti	31	DD4702	2017				
	Clinton	MO	64735-1948	Δ				PR1793	nis Period	1			
	FEC ID number of contributing				lineant		Laon						
	federal political committee.	С				-	y	<u> </u>	250	.00			
	Name of Employer (for Individual)		upation (for Individual)		Me	emc	Item						
	New York Life Insurance Company Receipt For:	Ager											
	Primary General	Aggregate	Year-to-Date ▼	P/	R Ded	ucti	on (\$25	0.00 Mor	nthly)				
	Other (specify)		1750.00						,				
s	UBTOTAL of Receipts This Page (optional)			. [,	, ,	555.	.78			
т	OTAL This Period (last page this line number or	nly)		. [.	 					

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177			Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page	X 11a	11b	11c	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
<u> </u>	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Compa	ny Politi	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Initia Schneider Jr., Stephen F., , Mr.,	al) or Full O	rganization Name	Date of	Date of Receipt							
	Mailing Address 1265 E Catalpa Street			м м 07								
	City	State MO	Zip Code		action ID							
	Springfield		65804-0037	Amoun	t of Each I	Receipt th	is Period					
	FEC ID number of contributing federal political committee.	С					41.6	57				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	М	emo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Ded	luction (\$41	I.67 Mont	nly)					
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name									
	Lyons, David A., , Mr., Mailing Address 405 Barrett Road			Date of	f Receipt / D 31		2017	Y				
	City	State	Zip Code		action ID :							
	Lawrence	NY	11559-2702		t of Each I							
	FEC ID number of contributing federal political committee.	С		83.33								
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$83.33 Monthly)								
	Primary General Other (specify) ▼		583.31									
	Full Name of Individual (Last, First, Middle Initia Woessner, Benjamin L., , Mr.,	al) or Full O	rganization Name	Date of	f Receipt							
	Mailing Address 20 5th Avenue Southeast	1		м м 07	/ 31		ү ү 2017	Y				
	City Pel Rapids	State MN	Zip Code 56572-4527		saction ID							
	FEC ID number of contributing federal political committee.	С			. , .		40.0	0				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	M	emo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00	P/R Deduction (\$40.00 Monthly)								
s	UBTOTAL of Receipts This Page (optional)						165.0	0				
т	OTAL This Period (last page this line number or	חly)										

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			13 14 15 16 17 verson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance Con	npany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle Blanchard, Joel, , Mr.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 5608 S Deer Park Drive			M M / D D / Y Y Y Y Y 07 31 2017						
City Sioux Falls	State SD	Zip Code 57108-2013	Transaction ID : PR182217251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		230.78						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e Vice President	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. Blanchard, Greg, , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 4720 W 127th Place	07 / D D / Y Y Y Y Y 2017								
City Broomfield	State CO	Zip Code 80020-5737	Transaction ID : PR182317251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		83.34						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)						
Full Name of Individual (Last, First, Middle C. Bills, Lavern O., , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 826 National Street			07 31 / Y Y Y Y Y 2017						
City Belle Fourche	State SD	Zip Code 57717-2032	Transaction ID : PR182517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		28.84						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 201.88	P/R Deduction (\$28.84 Monthly)						
SUBTOTAL of Receipts This Page (optional)			342.96						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma	ay not be sold or used by any po ddress of any political committee	erson for the purpose of soliciting contributions						
$\overline{\}$	NAME OF COMMITTEE (In Full)									
	New York Life Insurance Compa	any Politio	cal Action Committee							
Α.	Full Name of Individual (Last, First, Middle Initi Jorgenson, David L., , Mr.,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 25769 Highway 37			07 31 2017						
	City Mitchell	State SD	Zip Code 57301-0000	Transaction ID : PR182617251 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
в.	Full Name of Individual (Last, First, Middle Initi Garry, Richard J., , Mr.,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 5710 S Nature Run Place			07 31 2017						
	City	State	Zip Code	Transaction ID : PR182917251						
	Sioux Falls	SD	57108-5240	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		166.67						
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1166.69	P/R Deduction (\$166.67 Monthly)						
с.	Full Name of Individual (Last, First, Middle Initi Garry, Steven J., , Mr.,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 2408 W Sleigh Creek Trail			07 / D D / Y Y Y Y 2017						
	City Sioux Falls	State SD	Zip Code 57108-3002	Transaction ID : PR183017251 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		250.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) ht	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)						
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number c			466.67						

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 10 14 15 10 10 11						
			13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	-								
New York Life Insurance Co	mpany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middl A. Quaschnick, Kirk G., , Mr.,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 2977 Horseshoe Trail			07 31 2017						
City	State	Zip Code	Transaction ID : PR183117251						
Frisco	TX	75033-7391	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		250.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)						
Full Name of Individual (Last, First, Middl B. Burckhard, Andrea V., , Ms.,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 320 E Broad Street Suite	07 / D D / Y Y Y Y 2017								
City Cookeville	State TN	Zip Code 38501-3382	Transaction ID : PR183264517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		75.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	P/R Deduction (\$75.00 Monthly)						
Full Name of Individual (Last, First, Middl C. Benintende, Jack, , Mr.,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 459 Fairway Road			07 31 / Y Y Y Y 2017						
City Ridgewood	State NJ	Zip Code 07450-3409	Transaction ID : PR183325817251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Director	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optiona	l)		363.46						
TOTAL This Period (last page this line num	ber only)								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Polit	ical Action Committee							
Full Name of Individual (Last, First, Middle I Cotton, Jennifer, , Ms.,	nitial) or Full (Drganization Name	Date of Receipt						
Mailing Address 1328 Maple Street			07 / D D / Y Y Y Y 2017						
City Western Springs	State IL	Zip Code 60558-1073	Transaction ID : PR183326217251						
Western Springs		00000-1073	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.48						
Name of Employer (for Individual)	Oco	cupation (for Individual)	Memo Item						
New York Life Insurance Company	Ma	naging Director	_						
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I	nitial) or Full (Drganization Name							
B. Janca, Keith, , Mr.,			Date of Receipt						
Mailing Address 71 Perry Road	State	Zip Code	07 / D D / Y Y Y Y 2017						
Bedford	NH	03110-4525	Transaction ID : PR183332817251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.48						
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) maging Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. Vlock, Joe, , Mr.,	nitial) or Full (Drganization Name	Date of Receipt						
Mailing Address 3505 S 161st Street			07 31 / Y Y Y Y 2017						
City	State	Zip Code	Transaction ID : PR183417251						
Omaha	NE	68130-2134	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
SUBTOTAL of Receipts This Page (optional)			118.63						
TOTAL This Period (last page this line numbe	er only)								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)				
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Polit	ical Action Committee					
Full Name of Individual (Last, First, Middle I A. Kruse, Joseph D., , Mr.,	nitial) or Full (Drganization Name	Date of Receipt				
Mailing Address 854 E Pinehurst Trail			07 31 Y Y Y Y Y 2017				
City Dakota Dunes	State SD	Zip Code 57049-5479	Transaction ID : PR184217251				
	30	57049-5479	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		150.00				
Name of Employer (for Individual)	Oco	cupation (for Individual)	Memo Item				
New York Life Insurance Company	Age	ent					
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1050.00	P/R Deduction (\$150.00 Monthly)				
Full Name of Individual (Last, First, Middle I	nitial) or Full (Drganization Name					
B. Norman, Michael A., , Mr.,			Date of Receipt				
Mailing Address 815 Caughlin Crossing		07 31 2017					
City	State	Zip Code					
Reno	NV	89519-0647	Transaction ID : PR184617251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		83.34				
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) ent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)				
Full Name of Individual (Last, First, Middle I C. Swanson, Shane, , Mr.,	nitial) or Full (Drganization Name	Date of Receipt				
Mailing Address 123 West Delaware Place			07 31 Y Y Y Y Y 2017				
City Chicago	State IL	Zip Code 60610-3216	Transaction ID : PR185517251				
		00010-3210	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		230.78				
Name of Employer (for Individual)		cupation (for Individual)	Memo Item				
New York Life Insurance Company	Ma	naging Partner					
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			464.12				
TOTAL This Period (last page this line numbe	er only)						

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 1 ¹	1a 3	11b	11c		12 16	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p address of any political committe	erson for	the p	urpose	of solicitin	g cont	tributio	ons
	NAME OF COMMITTEE (In Full)									
\rangle	New York Life Insurance Compa	any Politi	cal Action Committee							
Α.	Full Name of Individual (Last, First, Middle Init May, Walter C., , Mr.,	ial) or Full O	organization Name	Dat	e of	Receipt				
	Mailing Address 2009 Royal Club Court				07 [™]	/ D	31	20	ү 17	Ŷ
	City	State	Zip Code	Т	ansa	ction ID) : PR1862	17251	1	
	Arlington	TX	76017-4434	Am	ount	of Each	Receipt t	his Pe	əriod	
	FEC ID number of contributing federal political committee.	С				-ajr.			250.00	0
	Name of Employer (for Individual)	Оссі	upation (for Individual)		Me	mo Item	ı			
	New York Life Insurance Company	Age	ent							
	Receipt For:	Aggregate	Year-to-Date V							
	Primary General			P/R	Dedu	ction (\$2	250.00 Mo	nthly)		
	Other (specify) v	L	1750.00							
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	Prganization Name							
Β.	Meigs, C. L., , Mr.,			Dat	e of	Receipt				
	Mailing Address 20040 Southeast Grandview A		07 / D D / Y Y Y Y 2017					Ŷ		
	City	State KS	Zip Code 67124-0000): PR1887			
	Pratt	N	Am	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		91.34					4	
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		Me	mo Item	1			
	Receipt For:	Aggregate		1						
	Primary General Other (specify) ▼		639.38	P/R I	Dedu	ction (\$9	91.34 Mont	hly)		
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Shoemaker, Joe J., , Mr.,	ial) or Full O	Prganization Name	Dat	e of	Receipt				
	Mailing Address 3129 Floral Boulevard				07 [™]		B1	201		Ŷ
	City	State	Zip Code	Т	ransa	ction I	D : PR1888	317251	1	
	Butte	MT	59701-4622	Am	ount	of Each	Receipt t	his Pe	eriod	
	FEC ID number of contributing federal political committee.	С			_	y	, , ,	_	33.00	0
	Name of Employer (for Individual) New York Life Insurance Company	Occi Ager	upation (for Individual) nt		Me	mo Item	1			
	Receipt For:	1.0	Year-to-Date ▼							
	Primary General Other (specify)		231.00	P/R	Dedu	ction (\$	33.00 Mon	thly)		
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of				-	9 - 7	5		374.34	4

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ITEMIZED RECE	IPTS		for each category of the Detailed Summary Page	(cneck only 11a 13	y one) 11b 11c 12 14 15 16	17
Any information copied for for commercial purpos	rom such Reports and Statem ses, other than using the name	ents may	not be sold or used by any pe dress of any political committee	rson for the p to solicit con	purpose of soliciting contributions tributions from such committee.	3
NAME OF COMMITT	EE (In Full) Insurance Company	Politic	al Action Committee			
Full Name of Individua A. Mc Kenna Jr., Joh	al (Last, First, Middle Initial) or n, , Mr.,	r Full Org	ganization Name	Date of	Receipt	
Mailing Address 110	Churn Creek Drive		-1	м м 07	/ D D / Y Y Y Y 31 2017	
City		tate	Zip Code	Transa	action ID : PR189117251	
Bozeman	N	1T	59715-7872	Amount	of Each Receipt this Period	
FEC ID number of co federal political comm	ş	;			250.00	
Name of Employer (for	or Individual)	Occup	pation (for Individual)	Me	emo Item	
New York Life Insuran	ce Company	Agent	t , ,			
Receipt For:	Aad	aregate Y	'ear-to-Date ▼			
Other (specify)	General	,	1750.00	P/R Dedu	uction (\$250.00 Monthly)	
Full Name of Individua B. Bansal, Rakesh	al (Last, First, Middle Initial) or R., , Mr.,	r Full Org	ganization Name	Date of	Receipt	
Mailing Address 1 Ho	rseshoe Court	07 31 Y Y Y Y 07 31 2017				
City	S	tate	Zip Code	Transa	action ID : PR18917251	
Monroe	١	1J	08831-2368	Amount	of Each Receipt this Period	
FEC ID number of co federal political comm	ş	;			250.00	
Name of Employer (for New York Life Insurance		Occup Agen	oation (for Individual) t	Me	emo Item	
Receipt For:	General	gregate Y	′ear-to-Date ▼	P/R Dedu	uction (\$250.00 Monthly)	
Other (specify)	• L	, , ,	1750.00			
c. Danco, Stepher		r Full Org	ganization Name	Date of	Receipt	
Mailing Address 1041				07	/ D D / Y Y Y Y 31 2017	
City		tate ⁻ L	Zip Code 33626-5401		action ID : PR189272717251	
Tampa		L	33020-3401	Amount	of Each Receipt this Period	
FEC ID number of co federal political comm	ş	;			30.00	
Name of Employer (for	or Individual)	Occup	pation (for Individual)	Me	emo Item	
New York Life Insuran	ce Company	Vice F	President			
Receipt For:		gregate Y	′ear-to-Date ▼			
Other (specify)	General	7	225.00	P/R Dedu	uction (\$15.00 Bi-Weekly)	
SUBTOTAL of Receipts	This Page (optional)				530.00	
TOTAL This Period (las	t page this line number only)					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)					
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Polit	ical Action Committee						
Full Name of Individual (Last, First, Middle In Sell, David, , Mr.,	nitial) or Full (Drganization Name	Date of Receipt					
Mailing Address 75 Sasapequan Road			07 31 Y Y Y Y Y 2017					
City	State CT	Zip Code	Transaction ID : PR189273117251					
Fairfield		06824-7205	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		86.00					
Name of Employer (for Individual)	Oco	cupation (for Individual)	Memo Item					
New York Life Insurance Company	Ma	naging Director						
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 645.00	P/R Deduction (\$43.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle In	nitial) or Full (Drganization Name						
B. Schwan, John P., , Mr.,			Date of Receipt					
Mailing Address 112 W Perry Lane	Ctoto	Zin Code	07 / D D / Y Y Y Y 2017					
City Mina	State SD	Zip Code 57451-3014	Transaction ID : PR189717251					
		37431-3014	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		416.66					
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) ent	Memo Item					
Receipt For:	Aggregate	e Year-to-Date ▼						
Primary General Other (specify) ▼		2916.62	P/R Deduction (\$416.66 Monthly)					
Full Name of Individual (Last, First, Middle In C. Marsh, Jeffrey S., , Mr.,	nitial) or Full (Drganization Name	Date of Receipt					
Mailing Address 1749 W 15th Avenue			07 / D D / Y Y Y Y Y 2017					
City	State	Zip Code	Transaction ID : PR191717251					
Torrington	WY	82240-3706	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		83.33					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual)	Memo Item					
Receipt For:								
Primary General	Aggregate	e Year-to-Date ▼	P/R Deduction (\$83.33 Monthly)					
Other (specify)		583.31						
SUBTOTAL of Receipts This Page (optional)		••••••	585.99					
TOTAL This Period (last page this line numbe	r only)							

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)						
11			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15		12 16	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe Iddress of any political committee	erson fo to soli	or the	pur ntrit	pose of	soliciting	g cont	tributio	ons
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	cal Action Committee								
А.	Full Name of Individual (Last, First, Middle Initi Fengler, Donald R., , Mr.,	al) or Full O	rganization Name		Date o	f Re	eceipt				
	Mailing Address 25 Anglesite				м м 07	1	D D D 31	/ Y	ې 201	17	Y
	City Rancho Santa Margarita	State CA	Zip Code 92688-3524	A				PR1922			
	FEC ID number of contributing federal political committee.	С			_					40.00	0
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	P/	R Ded	ucti	on (\$40.	00 Montl	hly)		
в.	Full Name of Individual (Last, First, Middle Initi Somerville Jr., David R., , Mr.,	al) or Full O	organization Name		Date o	f Re	eceipt				
	Mailing Address 725 Rosarita Drive		07 / D D / Y Y Y Y Y 2017								
	City	State	Zip Code		Trans	act	ion ID :	PR19261	17251		
	Fullerton	CA	92835-1842	A	moun	t of	Each R	eceipt th	nis Pe	riod	
	FEC ID number of contributing federal political committee.	С			_		-			83.3	3
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.31	P/I	R Ded	ucti	on (\$83.	33 Month	nly)		
с.	Full Name of Individual (Last, First, Middle Initi Maycock, Loy S., , Mr.,	al) or Full O	organization Name		Date o	f Re	eceipt				
	Mailing Address 359 County Road 250				^M 07	/	D D 31	/ Y	201	7	Y
	City Durango	State CO	Zip Code 81301-6976					PR1934 eceipt th			
	FEC ID number of contributing federal political committee.	С			inioun			eceipt ti	lis re	41.6	7
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		М	emo	b Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/	R Dec	lucti	on (\$41.	.67 Mont	hly)		
s	UBTOTAL of Receipts This Page (optional)		•		-	-	,	,	1	165.00	0
т	OTAL This Period (last page this line number of	only)	••••••				-			-	

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma	ay not be sold or used by any po ddress of any political committee	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initia Hayes, Richard, , Mr.,		rganization Name	Date of Receipt
	Mailing Address 1468 Cathlamet Court Northwes			07 / ^D D / ^Y Y Y Y 31 2017
	City Salem	State OR	Zip Code 97304-2444	Transaction ID : PR194217251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.48
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 215.54	P/R Deduction (\$13.62 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initia Tigert, Joseph, , Mr.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 8620 Brentmoor Street	State	Zip Code	07 / D D / Y Y Y Y 2017
	Wichita	KS	67206-2404	Transaction ID : PR194317251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		230.78
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initia Enders, Kap S., , Ms.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 11569 Discovery View Drive			07 / ^D D / ^Y Y Y Y Y 2017
	City Anchorage	State AK	Zip Code 99515-2752	Transaction ID : PR195017251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)
s	UBTOTAL of Receipts This Page (optional)		•	369.26
Т	OTAL This Period (last page this line number or	ıly)	••••••	

Use separate schedule(s)

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: Imag
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma ame and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initial Mindak, Steven T., , Mr.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 8702 E San Martin Drive	State	Zip Code	07 31 2017
	Scottsdale	AZ	85258-2606	Transaction ID : PR195217251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		175.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1225.00	P/R Deduction (\$175.00 Monthly)
в.	Full Name of Individual (Last, First, Middle Initial Hall, Carrie L., , Ms.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 5628 E Monterosa Street	07 31 2017		
	City Phoenix	State AZ	Zip Code 85018-4646	Transaction ID : PR195317251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2100.00	P/R Deduction (\$300.00 Monthly)
C.	Full Name of Individual (Last, First, Middle Initial Goodman, Charmaine, , Ms.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 8100 Strecker Lane	1		07 / D D / Y Y Y Y 07 31 2017
	City Plano	State TX	Zip Code 75025-4349	Transaction ID : PR195517251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.48
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			513.48
т	OTAL This Period (last page this line number on	ly)		

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ITE	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Coneck only one) Image: Coneck one)<
	/ information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions
\ \	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initia Glass, John, , Mr., Mailing Address 6174 N Paradise View Drive) or Full C	rganization Name	Date of Receipt
				07 31 2017
	City Paradise Valley	State AZ	Zip Code 85253-3816	Transaction ID : PR195717251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	New York Life Insurance Company	Age	nt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	P/R Deduction (\$150.00 Monthly)
	Full Name of Individual (Last, First, Middle Initia Christensen, Jan, , Mr.,) or Full C	rganization Name	Date of Receipt
	Mailing Address 2356 E Bear Hills Drive			07 31 2017
	City	State	Zip Code	Transaction ID : PR197117251
	Draper	UT	84020-9672	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)
	Full Name of Individual (Last, First, Middle Initia Del Mastro, Donna L., , Ms.,) or Full C	rganization Name	Date of Receipt
	Mailing Address 517 N Lucia Avenue Unit B			07 / D D / Y Y Y Y 2017
	City Redondo Beach	State CA	Zip Code 90277-3009	Transaction ID : PR197517251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		34.66
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 242.62	P/R Deduction (\$34.66 Monthly)
SI	JBTOTAL of Receipts This Page (optional)		•••••	434.66
т	OTAL This Period (last page this line number on	ly)		

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ITE	MIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17							
	r information copied from such Reports and Stat or commercial purposes, other than using the n			erson for the purpose of soliciting contributions							
\	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee								
A .	Full Name of Individual (Last, First, Middle Initia Wallace, Michael J., , Mr., Mailing Address 1654 Wheatgrass Court) or Full Or	rganization Name	Date of Receipt							
1	Maning Address 1004 Wheatgrass Court			07 31 2017							
	Dity	State	Zip Code	Transaction ID : PR198017251							
-	Reno	NV	89509-6912	Amount of Each Receipt this Period							
	FEC ID number of contributing ederal political committee.	С		100.00							
ī	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item							
_	New York Life Insurance Company	Ager	nt								
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)							
	Full Name of Individual (Last, First, Middle Initia Hall, Robert D., , Mr.,) or Full Or	rganization Name	Date of Receipt							
_	Mailing Address 2015 Evergreen Court			07 / D D / Y Y Y Y 2017							
	City Yakima	State WA	Zip Code 98902-1200	Transaction ID : PR198617251							
-		WA	96902-1200	Amount of Each Receipt this Period							
	FEC ID number of contributing ederal political committee.	С		250.00							
 	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item							
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1750.00	P/R Deduction (\$250.00 Monthly)							
	Full Name of Individual (Last, First, Middle Initia Call, Dennis B., , Mr.,) or Full Or	rganization Name	Date of Receipt							
_	Mailing Address 2612 Ashwood Lane			07 / D D / Y Y Y Y 2017							
	City Bedford	State TX	Zip Code 76021-2622	Transaction ID : PR199217251							
F	EEC ID number of contributing ederal political committee.	C	10021-2022	Amount of Each Receipt this Period 83.34							
	Name of Employer (for Individual)		ipation (for Individual)	Memo Item							
	New York Life Insurance Company Receipt For:	Ager		_							
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)							
รเ	BTOTAL of Receipts This Page (optional)			433.34							
тс	TAL This Period (last page this line number on	ly)	••••••								

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PAGE 86 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	x 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma ame and ad	y not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee	
A.	Full Name of Individual (Last, First, Middle Initia Austin, Rick G., , Mr.,	l) or Full Or	rganization Name	Date of Receipt
	Mailing Address 6510 Claret	1		07 31 / Y Y Y Y Y 2017
	City	State	Zip Code	Transaction ID : PR199417251
	Parkville	MO	64152-6086	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	New York Life Insurance Company	Ager		
	Receipt For:	Aggregate	Year-to-Date V	
	Primary General Other (specify) ▼		1750.00	P/R Deduction (\$250.00 Monthly)
в.	Full Name of Individual (Last, First, Middle Initia Stevens, Colleen, , Ms.,	l) or Full Or	rganization Name	Date of Receipt
	Mailing Address 6620 S Custer Road			07 31 2017
	City	State	Zip Code	Transaction ID : PR199617251
	Spokane	WA	99223-1825	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		, 266.00	P/R Deduction (\$38.00 Monthly)
C.	Full Name of Individual (Last, First, Middle Initia Parker, Warin J., , Mr.,	l) or Full Or	rganization Name	Date of Receipt
	Mailing Address 563 Leafhaven Lane			07 31 2017
	City	State	Zip Code	Transaction ID : PR199917251
	Windsor	CA	95492-8159	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		41.67
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	New York Life Insurance Company	Ager	nt	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify)		291.69	P/R Deduction (\$41.67 Monthly)
s	UBTOTAL of Receipts This Page (optional)			329.67
т	OTAL This Period (last page this line number on	ly)		

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Politi	cal Action Committee										
Full Name of Individual (Last, First, Middle A. Wright, Allen O., , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt									
Mailing Address 2027 143rd Place Southw	vest											
City Lynnwood	State WA	Zip Code 98087-5945	Transaction ID : PR200017251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		75.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	P/R Deduction (\$75.00 Monthly)									
Full Name of Individual (Last, First, Middle B. Rockett, Robert, , Mr.,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 206 Skees Road			07 / D D / Y Y Y Y Y 2017									
City Raymond	State WA	Zip Code 98577-9332	Transaction ID : PR200717251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		50.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)									
Full Name of Individual (Last, First, Middle C. Henker, John K., , Mr.,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 2741 Lapierre Canyon Dr			07 31 / Y Y Y Y Y 2017									
City Kennewick	State WA	Zip Code 99338-7307	Transaction ID : PR202117251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		58.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)									
SUBTOTAL of Receipts This Page (optiona	l)		183.00									
TOTAL This Period (last page this line num	ber only)											

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IT	EMIZED RECEIPTS		1	Use separate schedule(s) for each category of the Detailed Summary Page	•	eck onl 11a 13		e) 11b 14	11c 15	12		17
	y information copied from such Reports and State for commercial purposes, other than using the na											S
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	ıy Politi	ica	Action Committee								
Α.	Full Name of Individual (Last, First, Middle Initial Whitehead, John W., , Mr.,) or Full C	Orga	nization Name		Date o	f Rec	ceipt				
	Mailing Address 20782 SW Hillboro Highway					07	/	D D D 31	/ Y	y 2017	Y Y 7	
	City Newberg	State OR		Zip Code 97132-9412					PR2035 eceipt th		od	
	FEC ID number of contributing federal political committee.	С						y	1 - 90-	ť	60.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	•	tion (for Individual)		M	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 420.00	F	P/R Dec	luctio	n (\$60.	00 Mont	hly)		
B.	Full Name of Individual (Last, First, Middle Initial Cannon III, Robert L., , Mr.,) or Full C	Orga	nization Name		Date o	f Rec	ceipt				
	Mailing Address 30700 19th Avenue S	1		1		^M 07		D D D 31	/ Y	2017		
	City Federal Way	State WA		Zip Code 98003-5103	-				PR2039 eceipt th		iod	
	FEC ID number of contributing federal political committee.	С						y			50.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	•	tion (for Individual)	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 1050.00	P/R Deduction (\$150.00 Monthly)							
с.	Full Name of Individual (Last, First, Middle Initial Fincham, Robert J., , Mr.,) or Full C	Orga	nization Name		Date o	f Rec	ceipt				
	Mailing Address 61030 River Bluff Trail					07	/	D D D 31	/ Y	2017		
	City Bend	State OR		Zip Code 97702-1989	_				PR2042 eceipt th		iod	
	FEC ID number of contributing federal political committee.	С									50.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	•	tion (for Individual)		M	lemo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 350.00	F	P/R Dec	luctio	ın (\$50.	.00 Mont	hly)		
s	UBTOTAL of Receipts This Page (optional)			>				9		26	60.00	
т	OTAL This Period (last page this line number onl	y)		••••••••••••••••••••••••••••••••••••••				y			400	

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a 13		11b 14	11c	12		17		
	ny information copied from such Reports and S for commercial purposes, other than using the							soliciting	g contri	ibutio	ons		
\setminus	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	any Politi	cal Action Committee										
<u>/</u>	Full Name of Individual (Last, First, Middle Init	tial) or Full O											
Α.		,		Date of Receipt									
	Mailing Address 679 Lincoln Street				м м 07	/	D D 31	/ Y	2017		1		
	City	State	Zip Code		Trans	sact	ion ID :	PR2044	17251				
	Santa Clara	CA	95050-5318	_	Amoun	t of	Each R	eceipt th	is Peri	iod			
	FEC ID number of contributing federal political committee.	С					-		ę	50.00			
	Name of Employer (for Individual)	Осси	upation (for Individual)	_	M	emo	ltem						
	New York Life Insurance Company	Age											
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General			F	P/R Ded	lucti	on (\$50.	00 Mont	hly)				
	Other (specify) v		350.00										
	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rappization Namo										
в.	Engstrom, Nathan E., , Mr.,	lial) of Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 17140 Southwest Hillsboro Hig	nhwav			M M	/	D D	/ Y	Y	YY			
					07		31		2017				
	City	State	Zip Code		Trans	act	ion ID :	PR2047	17251				
	Sherwood	OR	97140-8622	_	Amoun	t of	Each R	eceipt th	nis Peri	iod			
	FEC ID number of contributing federal political committee.	С					-		į	50.00	j		
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		М	emo	tem						
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General		350.00	T F	P/R Ded	ucti	on (\$50.	00 Montł	nly)				
	Other (specify) v												
C.	Full Name of Individual (Last, First, Middle Init Simmaly, Victoria V., , Ms.,	tial) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 450 Middlefield Road				07	/	31	/ Y	2017		1		
	City	State	Zip Code	_		act	1.00	PR2053	1	_	- L		
	Atherton	CA	94027-3216					eceipt th		iod			
	FEC ID number of contributing				, ano an		Laon n				-		
	federal political committee.	С			<u> </u>		9	9		41.67			
	Name of Employer (for Individual)	Осси	upation (for Individual)		М	emo	tem						
	New York Life Insurance Company	Ager	nt										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General		201.60	1 1	P/R Ded	lucti	on (\$41.	67 Mont	hly)				
	Other (specify)		291.69										
s	UBTOTAL of Receipts This Page (optional)		······				9	,	14	41.67			
_	OTAL This Period (last page this line number	only)		_									
L '	ente milo i onoa (laot page tino inte number	····y/······			la de la companya de	1	7		all second second	-	- Includes		

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	-	Use separate schedule(s)			(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b 14	11c 15	12 16	17					
Any information copied from such Reports and or for commercial purposes, other than using			erson for the		pose of	soliciting	contribut	ions					
NAME OF COMMITTEE (In Full)		<u> </u>											
New York Life Insurance Com	npany Politi	cal Action Committee											
Full Name of Individual (Last, First, Middle Brennan, Armondo J., , Mr.,	Initial) or Full C	rganization Name	Date	Date of Receipt									
Mailing Address 8315 N 22nd Lane			M 07	07 31 2017									
City McAllen	State TX	Zip Code 78504-5733				PR20541 Receipt th							
FEC ID number of contributing federal political committee.	С				-		40.0	00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 280.00	P/R De	educti	on (\$40.	.00 Month	nly)						
Full Name of Individual (Last, First, Middle B. Kinjo, Yoshio, , Mr.,	Initial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 241 S Peralta Hills Drive			07		31		2017	Y					
City Anaheim	State CA	Zip Code 92807-3425				PR20601							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 83.33										
Name of Employer (for Individual) New York Life Insurance Company		Occupation (for Individual) Agent				Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.31	P/R Deduction (\$83.33 Monthly)										
Full Name of Individual (Last, First, Middle C. Cole, Barbara L., , Ms.,	Initial) or Full C	rganization Name	Date	of Re	eceipt								
Mailing Address 3531 E Baron Court			M 07		31) / Y	ү ү 2017	Y					
City Orange	State CA	Zip Code 92869-2584				PR20611 Receipt th							
FEC ID number of contributing federal political committee.	С				y	, ,	83.3	33					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt		Memo	o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 583.31	P/R De	educti	ion (\$83	.33 Month	ıly)						
SUBTOTAL of Receipts This Page (optional)					7		206.6	6					
TOTAL This Period (last page this line numb	er only)												

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports	and Statements ma	l ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	ig no name and a											
New York Life Insurance Co	ompany Politi	cal Action Committee										
Full Name of Individual (Last, First, Mid A. Fuirst, Kenneth, , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 43 Devoe Road												
City	State	Zip Code	Transaction ID : PR20617251									
Chappaqua	NY	10514-3602	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
New York Life Insurance Company	Age	nt										
	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		210.00	P/R Deduction (\$30.00 Monthly)									
			1									
Full Name of Individual (Last, First, Mid	dle Initial) or Full O	rganization Name										
B. Acomb, John S., , Mr.,			Date of Receipt									
Mailing Address 1762 Vista Del Lago			07 31 2017									
City	State	Zip Code	Transaction ID : PR206717251									
Fallbrook	CA	92028-1748	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		210.00	P/R Deduction (\$30.00 Monthly)									
			1									
Full Name of Individual (Last, First, Mid C. Horstmann, John H., , Mr.,		rganization Name	Date of Receipt									
Mailing Address 804 E Country View Cir			07 31 Y Y Y Y Y 2017									
City Fresno	State CA	Zip Code 93730-0725	Transaction ID : PR206917251									
		93730-0723	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		45.00									
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item									
New York Life Insurance Company Receipt For:	Age	nt										
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$45.00 Monthly)									
Other (specify)		315.00										
SUBTOTAL of Receipts This Page (option	nal)		105.00									
TOTAL This Period (last page this line nu	imber only)	······										

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
New York Life Insurance Comp	bany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle II A. Huebert, Katherine H., , Ms.,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 294 Robinwood Circle			M M / D D / Y Y Y Y Y 07 31 2017						
City	State CA	Zip Code 93654-2767	Transaction ID : PR207017251						
Reedley		93034-2707	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		83.33						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
New York Life Insurance Company	Age	nt							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		583.31	P/R Deduction (\$83.33 Monthly)						
		Age Age Age	1						
Full Name of Individual (Last, First, Middle II	nitial) or Full O	rganization Name							
Brody, William V., , Mr., Mailing Address 19 Corte Miguel			Date of Receipt						
Maining Address 19 Coffe Miguel			07 31 2017						
City	State	Zip Code	Transaction ID : PR207817251						
San Rafael	CA	94903-1810	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General		4750.00	P/R Deduction (\$250.00 Monthly)						
Other (specify) ▼		, 1750.00	1						
Full Name of Individual (Last, First, Middle II C. Goodin, Stan, , Mr.,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6117 Carriage House Way			07 31 2017						
City	State	Zip Code	Transaction ID : PR208217251						
Reno	NV	89519-7324	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		100.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
New York Life Insurance Company	Age	1 ()							
Receipt For:	Aggregate	Year-to-Date V							
Primary General		700.00	P/R Deduction (\$100.00 Monthly)						
Other (specify)		700.00	1						
SUBTOTAL of Receipts This Page (optional)			433.33						
TOTAL This Period (last page this line number	r only)								

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FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
New York Life Insurance Com	pany Politi	cal Action Committee										
Full Name of Individual (Last, First, Middle Wirth, Troy M., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt 07 31 2017									
Mailing Address 9 Satinwood Way												
City Irvine	State CA	Zip Code 92612-2111	Transaction ID : PR209117251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		41.67									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)									
Full Name of Individual (Last, First, Middle I B. Taing, Kenny M., , Mr.,	Initial) or Full C	rganization Name	Date of Descipt									
Mailing Address 4821 Corso Circle			Date of Receipt 07 31 2017									
City	State	Zip Code	Transaction ID : PR209717251									
Cypress	CA	90630-3564	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		41.67									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)									
Full Name of Individual (Last, First, Middle I Mueller, Christie S., , Ms.,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 6841 Ripley Lane North			07 / D D / Y Y Y Y 31 2017									
City Renton	State WA	Zip Code 98056-1529	Transaction ID : PR209917251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		100.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)									
SUBTOTAL of Receipts This Page (optional)			183.34									
TOTAL This Period (last page this line number	er only)											

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IT.		Use separate schedule(s)			(check only one)							
11			for each category of the Detailed Summary Page		¥ 11a 13		11b	11c 15		12 16	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committee	erson e to s	for the	pur ntrib	pose of	soliciting	g cont	tributio	ons	
	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Compa	-										
Α.	Full Name of Individual (Last, First, Middle Init Dill, Stephen C., , Mr.,	ial) or Full O		Date of Receipt								
	Mailing Address 4082 Prestwick Lane				07	/	D D D 31	/ Y	Y 201	17	Y	
	City Palmdale	State CA	Zip Code 93551-5381					PR2102 eceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>			· ·	_	83.34	4	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		М	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	1	P/R Ded	ucti	on (\$83.	34 Montl	hly)			
В.	Full Name of Individual (Last, First, Middle Init Murray Jr., Louis L., , Mr.,	ial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 60 Manthorne Road		07 / D D / Y Y Y Y 2017									
	City Boston	State MA	Zip Code 02132-1505					PR21144				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)								
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Price, Hillary K., , Ms.,	ial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 6 Kesseler Way				^M 07	/	D D D 31	/ Y	201	Y 17	Y	
	City Chestnut Hill	State MA	Zip Code 02467-2659					PR2115 eceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	, y		49.6	7	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) nt		М	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 347.69] '	P/R Ded	lucti	on (\$49.	67 Mont	hly)			
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Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any pe ddress of any political committee	erson e to s	for the	pur ntrik	pose of	soliciting	cont	ributio	ons	
\setminus	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Compa	any Politi	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Init Philpott, Gary D., , Mr.,	ial) or Full O	Date of Receipt									
	Mailing Address 5780 S Kline Street				м м 07	/	D D D 31	/ Y	ү 201	7	ſ	
	City Littleton	State CO	Zip Code 80127-2021					PR2115 eceipt th				
	FEC ID number of contributing federal political committee.	С								50.00)	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age		M	emo	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)								
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name		Data							
D.	Byrne, Kevin A., , Mr., Mailing Address 7716 Evers Boulevard				Date of	/	31	/ Y	y 201			
	City	State	Zip Code		Trans	acti	ion ID :	PR21159	91725	1	_	
	Cheyenne	WY	82009-5920	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>		-			50.00)	
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 350.00	P/R Deduction (\$50.00 Monthly)								
С.	Full Name of Individual (Last, First, Middle Init Lewis, Deborah, , Ms.,	ial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 4280 Country Squire Lane				07	/	D 31	JL	ү 201	7	ſ	
	City Fairfax	State VA	Zip Code 22032-1610	_				PR2117				
	FEC ID number of contributing federal political committee.	С					,			83.34	4	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) nt		М	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)								
\vdash	UBTOTAL of Receipts This Page (optional)			- ·	ļ.	-	,	9	1	83.34	1	
Т	OTAL This Period (last page this line number of	only)	•••••••••									

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111			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17		
An or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any p ddress of any political committee	erson t	for the	l pur htrik	pose o	f soliciting	g contribut	tions		
	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Compa	ny Politio	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Initia Lewis, Everton M., , Mr.,	al) or Full O	ganization Name	Date of Receipt								
	Mailing Address 774 Bartholdi Street			07 31 2017								
	City Bronx	State NY	Zip Code 10467-6208					: PR2117 Receipt th	517251 nis Period			
	FEC ID number of contributing federal political committee.	С						1.75	250.0	00		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	pation (for Individual) nt		Me	emo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P	/R Ded	ucti	on (\$28	50.00 Mor	nthly)			
в.	Full Name of Individual (Last, First, Middle Initia Franklin, Sara R., , Ms.,	al) or Full O	ganization Name		Date of	Re	eceipt					
	Mailing Address 7019 Rock Dove Court		07 / 07 / 01 / 2017 Transaction ID : PR2117817251									
	City Charlotte	State NC	Zip Code 28277-1002									
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period									
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	P/R Deduction (\$40.00 Monthly)								
С.	Full Name of Individual (Last, First, Middle Initia Heinemann, Mark G., , Mr.,	al) or Full O	rganization Name		Date of	Re	eceipt					
	Mailing Address 1 Hanford Street				м м 07	/	31		2017	Y		
	City Melville	State NY	Zip Code 11747-1323				-	: PR2118 Receipt th	917251 nis Period			
	FEC ID number of contributing federal political committee.	С					y	, y	41.0	67		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	pation (for Individual) It		M	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)								
⊢	UBTOTAL of Receipts This Page (optional)			- - -			, . , .	· · ·	331.6	57		

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	eck only	y or	ne)				
11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15		12 16	17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma name and a	I ay not be sold or used by any pe address of any political committee	erson e to so	for the	purp ntrib	oose of	soliciting	g cont	tributio	ons
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Comp	any Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Ini Forte, John A., , Mr.,	itial) or Full O	Date of Receipt								
	Mailing Address 1 Chandler Drive				07 31 2017 Transaction ID : PR2119217251						
	City Ballston Lake	State NY	Zip Code 12019-1335					PR21192 eceipt th			
	FEC ID number of contributing federal political committee.		С						·	125.00	0
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 875.00	F	P/R Ded	uctio	on (\$125	5.00 Mon	thly)		
R	Full Name of Individual (Last, First, Middle Ini Owen, Mitchell R., , Mr.,	itial) or Full O	Organization Name		Date of	Re	ceint				
0.	Mailing Address 708 Preston Road				07	/	31	/ Y	y 201		ŕ
	City	State PA	Zip Code					PR21193			
	Erdenheim		19038-7327	_	Amount	tof	Each R	eceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С			Ľ.		-			75.00	D
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent			Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	P/R Deduction (\$75.00 Monthly)							
с.	Full Name of Individual (Last, First, Middle Ini Brown, David P., , Mr.,	itial) or Full O	Organization Name		Date of	Re	ceipt				
	Mailing Address 524 Terrace Avenue				^M 07	/	D D D 31	/ Y	201	7	Y
	City Garden City	State NY	Zip Code 11530-5442					PR2119 eceipt th			
	FEC ID number of contributing federal political committee.	С			Amoun		, Lacii n			100.00	0
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		М	emc	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	F	P/R Ded	ucti	on (\$100).00 Mor	ithly)		
s	UBTOTAL of Receipts This Page (optional)			-			,	,	3	300.00)
Т	OTAL This Period (last page this line number	only)			L						

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b 14	11c		12 16	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	y not be sold or used by any poldress of any political committee	erson e to so	for the	purp ntrib	oose of	soliciting	g con	tributio	ons
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	ny Politio	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Initi Kuehne, Otto A., , Mr.,	al) or Full O	ganization Name		Date o	f Re	ceipt				
	Mailing Address 6213 Ranch View Dr. N				07 / 07 / 2017						
	City	State NY	Zip Code		Trans	acti	on ID :	PR2119	91725	51	
	East Amherst		14051-2094	_	Amoun	t of	Each R	eceipt th	nis Pe	riod	
	FEC ID number of contributing federal political committee.									100.00	
	Name of Employer (for Individual)	Occu	pation (for Individual)		М	emo	Item				
	New York Life Insurance Company	Agei	nt								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General			I F	P/R Ded	uctio	on (\$100	0.00 Mor	thly)		
	Other (specify) v		700.00								
_	Full Name of Individual (Last, First, Middle Initi	al) or Full O	ganization Name								
Β.	Kaplan, Lori L., , Ms.,		Date of	f Re	ceipt						
	Mailing Address 1812 Beaconwood Avenue			07	/	31	/ Y	201		Y	
	City	State	Zip Code					PR21207			
	South Euclid	OH	44121-3782	_	Amoun	t of	Each R	eceipt th	nis Pe	riod	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Agent			<u> </u>	_				41.6	7
	Name of Employer (for Individual) New York Life Insurance Company				Memo Item						
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General	, iggi oguto		P	P/R Ded	uctio	on (\$41.	67 Month	nly)		
	Other (specify)		, 291.69								
с.	Full Name of Individual (Last, First, Middle Initi Lobaugh, Phillip, , Mr.,	al) or Full Oi	ganization Name		Date o	f Re	ceipt				
	Mailing Address 2657 Airport Road				07	/	31	/ Y	y 201	Y 7	Y
	City	State	Zip Code		Trans	sact	ion ID :	PR2121	2172	51	
	Chambersburg	PA	17201-7887	_	Amoun	t of	Each R	eceipt th	nis Pe	riod	
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	. ,		30.00	0
	Name of Employer (for Individual)	Occu	pation (for Individual)		М	emc	Item				
	New York Life Insurance Company	Ager	it y								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General		210.00	F	P/R Dec	lucti	on (\$30.	.00 Mont	hly)		
	Other (specify)		210.00								
⊢	UBTOTAL of Receipts This Page (optional)		r	•			<u>,</u>			171.67	7

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
New York Life Insurance Con	npany Politi	cal Action Committee									
Full Name of Individual (Last, First, Middle Weller, Ronnie D., , Mr.,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 723 Whig Hill Road			07 31 / Y Y Y Y								
City Tionesta	State PA	Zip Code 16353-8046	Transaction ID : PR2121317251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		174.67								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1222.69	P/R Deduction (\$174.67 Monthly)								
Full Name of Individual (Last, First, Middle B. Dietz, Richard L., , Mr.,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 14 Cardinal Drive			07 / D D / Y Y Y Y 2017								
City Poughkeepsie	State NY	Zip Code 12601-5719	Transaction ID : PR2121517251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		50.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)								
Full Name of Individual (Last, First, Middle C. Hellyer Jr., Jesse K., , Mr.,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address PO Box 931			07 / D D / Y Y Y Y 07 31 2017								
City Waverly	State VA	Zip Code 23890-0931	Transaction ID : PR2122017251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		50.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)								
SUBTOTAL of Receipts This Page (optional)			274.67								
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	y information copied from such Reports and Stat for commercial purposes, other than using the na							
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	y Politic	cal Action Committee					
Α.	Full Name of Individual (Last, First, Middle Initial Horstmann, John E., , Mr., Mailing Address 7684 N Kincaid Avenue) or Full Or	ganization Name	Date of Receipt				
		1		07 31 2017				
	City Fresno	State CA	Zip Code 93711-0363	Transaction ID : PR212217251				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agen	pation (for Individual) It	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)				
В.	Full Name of Individual (Last, First, Middle Initial Ryan, Thomas B., , Mr.,) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 1303 Meadow Lane			07 31 2017				
	City Berwyn	State PA	Zip Code 19312-1971	Transaction ID : PR2122217251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		41.67				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	pation (for Individual) ht	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 291.69	P/R Deduction (\$41.67 Monthly)				
с.	Full Name of Individual (Last, First, Middle Initial Mathas, Thomas E., , Mr.,) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 1336 Cornwall Place			07 31 2017				
	City Norfolk	State VA	Zip Code 23508-1108	Transaction ID : PR2122817251				
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 62.50				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agen	pation (for Individual) t	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 437.50	P/R Deduction (\$62.50 Monthly)				
s	UBTOTAL of Receipts This Page (optional)			204.17				
т	OTAL This Period (last page this line number on	y)	·····					

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ITI	EMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politic	al Action Committee							
Α.	Full Name of Individual (Last, First, Middle Initial Hudson, Jeffrey M., , Mr., Mailing Address 5075 Midland Trace) or Full Org	ganization Name	Date of Receipt						
	City	Ctoto	Zin Codo	07 31 2017						
	City Midland	State GA	Zip Code 31820-3425	Transaction ID : PR2124217251 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item						
	New York Life Insurance Company	Agen	t							
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
в.	Full Name of Individual (Last, First, Middle Initial Kaiser, Valerie P., , Ms.,) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 20604 Marsh Court			07 31 / Y Y Y Y 2017						
	City	State VA	Zip Code	Transaction ID : PR2124617251						
	Sterling	VA	20165-7315	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agen	pation (for Individual) t	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
<u>с.</u>	Full Name of Individual (Last, First, Middle Initial Carey, Curtis P., , Mr.,) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 952 Meadowood Lane			07 31 2017						
	City	State	Zip Code	Transaction ID : PR2126817251						
	Hudson	WI	54016-7518	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		30.00						
	Name of Employer (for Individual)		pation (for Individual)	Memo Item						
	New York Life Insurance Company Receipt For:	Agent								
	Primary General Other (specify)	Aggregate Y	′ear-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)						
s	UBTOTAL of Receipts This Page (optional)			130.00						
	OTAL This Period (last page this line number on									

Use separate schedule(s)

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			Use separate schedule(s)	(che	eck only	/ on	e)	L			-			
			for each category of the Detailed Summary Page	×	11a 13		11b	11c	12	[17			
	nformation copied from such Reports and Star				or the		ose of	soliciting	contrib		IS			
	ME OF COMMITTEE (In Full)													
	ew York Life Insurance Compar	ny Politio	cal Action Committee											
	Il Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name											
	Dlig, Todd, , Mr.,				Date of	Re	ceipt	_			_			
IVIč	ailing Address 1006 Dewey Street				07 31 2017									
Cit		State	Zip Code		Trans	acti	on ID :	PR21273	317251					
Ki	el	WI	53042-1242	/	Amount of Each Receipt this Period									
	C ID number of contributing deral political committee.	С						1.40	250	0.00				
No	ame of Employer (for Individual)	000	pation (for Individual)	- 1	Me	amo	Item	,						
New York Life Insurance Company			,			,1110	nom							
	agint For	-	Year-to-Date 🔻											
Primary General			1750.00	P/	R Ded	uctic	on (\$250	0.00 Mon	thly)					
	Other (specify)		, , , , , , , , , , , , , , , , , , , ,											
	II Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name											
	nzaldo, Oscar A., , Mr.,			[Date of	Re	· .							
IVIC	ailing Address 2644 W Benjamin Holt Drive				м м 07	1	31	/ Y	2017	Y				
Cit		State	Zip Code				-	PR21281						
	ockton	CA	95207-3214	/	Amount	of	Each R	eceipt th	is Perio	d	_			
	C ID number of contributing deral political committee.	C Occupation (for Individual) Agent			100.00									
Na Ne	ame of Employer (for Individual) w York Life Insurance Company				Memo Item									
Re	eceipt For:	Aggregate `	\neg											
_	Primary General Other (specify) ▼		700.00	P/	R Dedu	uctio	n (\$100	.00 Mon	thly)					
	Other (specify) ♥		J											
	II Name of Individual (Last, First, Middle Initia Perry, Elizabeth, , Ms.,	l) or Full Or	ganization Name		Date of	Re	ceipt							
Ma	ailing Address PO Box 1352				м м 07	/	D D D 31	/ Y	2017	Y				
Cit	676 Bradley Cove Road	State	Zip Code	-		acti	1 million 100	PR2128	1					
R	ussellville	AR	72811-1352		Amount	of	Each R	eceipt th	is Perio	d				
	C ID number of contributing deral political committee.	С					, .	9	4(0.00				
Na	ame of Employer (for Individual)	Occu	pation (for Individual)		Me	emo	Item							
	ew York Life Insurance Company	Agen												
	Primary General	Aggregate `	Year-to-Date 🔻	P.	/R Ded	uctio	on (\$40.	00 Montl	nlv)					
	Other (specify)					(¢ . 0		,,						
SUB	TOTAL of Receipts This Page (optional)			•			, .	, , ,	39(0.00				
тот	AL This Period (last page this line number on	ly)					.			-				

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle I A. Littlejohn, Joseph W., , Mr.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 111 Robert E Lee Place			07 / D D / Y Y Y Y 2017						
City Bossier City	State LA	Zip Code 71111-5025	Transaction ID : PR2129517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			100.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)						
Full Name of Individual (Last, First, Middle I B. Perry, Budo D., , Mr.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 305 S Scott Street			07 31 2017						
City Fort Gibson	State OK	Zip Code 74434-8722	Transaction ID : PR2129917251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	s l								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
Full Name of Individual (Last, First, Middle I Bressick, Sanford E., , Mr.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 611 El Dorado Court	0	7. 0.1	M M / D D / Y Y Y Y 31 2017						
City Santa Rosa	State CA	Zip Code 95404-2116	Transaction ID : PR213017251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
SUBTOTAL of Receipts This Page (optional)			191.67						
TOTAL This Period (last page this line numbe	r only)								

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12					
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements ma	ay not be sold or used by any pe	erson f	13 or the licit con	 purp	14 Dose of	15 soliciting	16 contribu	tions				
	NAME OF COMMITTEE (In Full)			10 50			ulions	nom suci	T COMMIN					
\rangle	New York Life Insurance Compa	ny Politio	cal Action Committee											
Α.	Full Name of Individual (Last, First, Middle Initia Mellish, Zerbe M., , Mr.,	al) or Full Oi	rganization Name	[Date of	Re	ceipt							
	Mailing Address 2503 Valleyfield Drive			07 / D D / Y Y Y Y Y 2017										
	City Houston	State TX	Zip Code 77080-4406					PR2131	117251 iis Period					
New York Life Insurance Company Ag									41.	67				
			upation (for Individual) nt		Me	emo	Item							
			Year-to-Date ▼ 291.69	P	/R Dedu	uctio	on (\$41	.67 Montł	nly)					
R	Full Name of Individual (Last, First, Middle Initia Fish, Jerry, , Mr.,	al) or Full Oi	rganization Name	Г	Date of	Re	ceipt							
	Mailing Address 29 Garden Shadow Lane				M M 07	/	31) / Y	y y 2017	Ŷ				
	City	State NV	Zip Code					PR21311						
	Las Vegas		89135-7888	^	Amount	of	Each F	leceipt th	iis Period					
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Zone Vice President			230.78									
	Name of Employer (for Individual) New York Life Insurance Company				Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)										
C.	Full Name of Individual (Last, First, Middle Initia Zwiener, Susan K., , Ms.,	al) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 10630 Dodge Mower Road				07 ^M	1	31		2017	Y				
	City Blmng Prairie	State MN	Zip Code 55917-6934				-	PR2132	417251 iis Period					
	FEC ID number of contributing federal political committee.	С					y .	, ,	70.	00				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		Me	emc	ltem							
Receipt For: Agg Primary General Other (specify)			Year-to-Date ▼ 490.00	P	/R Dedi	ucti	on (\$70	.00 Montl	hly)					
s	UBTOTAL of Receipts This Page (optional)						, .		342.	45				
т	OTAL This Period (last page this line number or	nly)	·····	ĺ			.							

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: Image
	y information copied from such Reports and Stat for commercial purposes, other than using the n			son for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initia Wiskus, Mark A., , Mr., Mailing Address 1005 Edgewater Drive City	l) or Full O	Drganization Name	Date of Receipt
	Pella	IA	50219-7669	Transaction ID : PR2133417251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	cupation (for Individual) ent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 770.00	P/R Deduction (\$110.00 Monthly)
B.	Full Name of Individual (Last, First, Middle Initia Rainforth, Richard, , Mr.,	l) or Full O	Drganization Name	Date of Receipt
	Mailing Address 1104 66th Place	State	Zin Code	07 / D D / Y Y Y Y 2017
	City West Des Moines	State IA	Zip Code 50266-2306	Transaction ID : PR2133617251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.				
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)
C.	Full Name of Individual (Last, First, Middle Initia Hentges, Wesley F., , Mr.,	l) or Full O	Drganization Name	Date of Receipt
	Mailing Address 17600 Hood Bridge Road			07 31 2017
	City Clarksburg	State MO	Zip Code 65025-2023	Transaction ID : PR2133817251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) New York Life Insurance Company	Age		Memo Item
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)	
s	UBTOTAL of Receipts This Page (optional)		•	190.00
т	OTAL This Period (last page this line number on	ıly)	▶	· · · · · · · · · · · ·

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			for each category of the Detailed Summary Page		11a 13	\vdash	11b	11c	12	17			
Any in or for	formation copied from such Reports and Sta commercial purposes, other than using the r	tements may ame and ac	y not be sold or used by any p Idress of any political committee	erson e to so	for the	purp	ose of	soliciting	contribu	tions			
\ \	ME OF COMMITTEE (In Full) ew York Life Insurance Compar	ny Politic	al Action Committee										
	I Name of Individual (Last, First, Middle Initia rown, Michael R., , Mr.,	l) or Full Or	ganization Name		Date of	Rec	ceipt						
Mai	iling Address 8976 Northeast Patton Road				07 / D D / Y Y Y Y 2017								
	City State Hamilton MO FEC ID number of contributing C federal political committee. C		Zip Code 64644-9166	_				PR21341 eceipt th	17251 is Period				
							y		250.	00			
	me of Employer (for Individual) w York Life Insurance Company	Occu Ager	pation (for Individual) It		Me	emo	Item						
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate] F	P/R Ded	uctio	n (\$250).00 Mon	thly)					
	I Name of Individual (Last, First, Middle Initia chmitt, Cathy K., , Ms.,	l) or Full Or	ganization Name		Date of	Rec	ceipt						
	Mailing Address 435 N Jenny Avenue						07 / 31 / 2017 Transaction ID : PR2134217251						
City Tea		State SD	Zip Code 57064-2404						17251 is Period				
FE	C ID number of contributing eral political committee.	C							28.	_			
	me of Employer (for Individual) w York Life Insurance Company	Occupation (for Individual) Agent			Memo Item								
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate `	/ear-to-Date ▼ 201.81	F	P/R Dedu	uctio	n (\$28.8	33 Month	ly)				
	I Name of Individual (Last, First, Middle Initia Ieeker, Ron, , Mr.,	l) or Full Or	ganization Name		Date of	Rec	ceipt						
	iling Address 804 N Dubuque Avenue				07	/	^D 31	L	2017	Y			
City Sic	/ oux Falls	State SD	Zip Code 57110-5825	_			-	PR21343 eceipt th	317251 is Period				
	C ID number of contributing eral political committee.	С			Ľ.		y	. y	50.	00			
Ne	me of Employer (for Individual) w York Life Insurance Company	Occu Agen	pation (for Individual) t		M	emo	ltem						
	ceipt For: Primary General Other (specify)	/ear-to-Date ▼ 350.00]	P/R Deduction (\$50.00 Monthly)									
SUB	TOTAL of Receipts This Page (optional)			•					328.	83			
ΤΟΤΑ	AL This Period (last page this line number or	ıly)		- •				, , , , , , , , , , , , , , , , , , ,					

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
II EIVIIZED KEGEIF 13		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions te to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
New York Life Insurance Cor	npany Politi	cal Action Committee										
Full Name of Individual (Last, First, Middle Bookout, Michael, , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 12109 South Encampmen	t Circle		07 31 Y Y Y Y Y 2017									
City St Draper U		Zip Code 84020-8236	Transaction ID : PR2134917251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		230.78									
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Partner	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. Thompson Jr., Lee B., , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2901 Redbird Lane			07 / D D / Y Y Y Y Y 2017									
City	State OK	Zip Code	Transaction ID : PR2135117251									
Enid		73703-1575	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$30.00 Monthly)									
Other (specify) V		, 210.00										
Full Name of Individual (Last, First, Middle C. Freckleton, Brian K., , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 3830 Saddleback Road			07 / D D / Y Y Y Y 2017									
City Park City	State UT	Zip Code 84098-4808	Transaction ID : PR2135517251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		58.00									
Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) ht	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)									
SUBTOTAL of Receipts This Page (optional)		318.78									
TOTAL This Period (last page this line num	ber only)											

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	ical Action Committee							
Full Name of Individual (Last, First, Mido Bond, E. Jay, , Mr.,	dle Initial) or Full C	Drganization Name	Date of Receipt						
Mailing Address 6670 E Green Lake Way	y N		07 31 / Y Y Y Y						
City	State	Zip Code	Transaction ID : PR2135717251						
Seattle	WA	98103-5419	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		166.67						
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item						
New York Life Insurance Company	Age	ent	-						
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) ▼		1166.69	P/R Deduction (\$166.67 Monthly)						
Full Name of Individual (Last, First, Mido B. Wallace, Richard S., , Mr.,	dle Initial) or Full C	Drganization Name	Date of Receipt						
Mailing Address 3025 Eagles Claw Aven	ue Northwest		07 31 2017						
City	State	Zip Code	Transaction ID : PR2136017251						
Salem	OR	97304-4224	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		30.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210,00	P/R Deduction (\$30.00 Monthly)						
Full Name of Individual (Last, First, Mido C. Werner, Richard J., , Mr.,	dle Initial) or Full C	Drganization Name	Date of Receipt						
Mailing Address 2154 Crespi Lane			07 / D D / Y Y Y Y 2017						
City	State	Zip Code	Transaction ID : PR213617251						
Westlake Village	CA	91361-1722	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		174.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	eupation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1222.69	P/R Deduction (\$174.67 Monthly)						
SUBTOTAL of Receipts This Page (option	al)		371.34						
TOTAL This Period (last page this line nu	mber only)								

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
> New York Life Insurance Cor	npany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle	e Initial) or Full O	rganization Name							
A. Beaulieu, Jeffrey R., , Mr., Mailing Address 9479 Newbridge Drive			Date of Receipt						
			07 31 2017						
City Riverside	State CA	Zip Code 92508-8003	Transaction ID : PR2136617251						
		92300-0003	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
New York Life Insurance Company	Age	nt							
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) V		291.69	P/R Deduction (\$41.67 Monthly)						
			·						
Full Name of Individual (Last, First, Middle B. Hong, Joe L., , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 19 Cedar Lane									
	07 31 2017								
City San Jose	State CA	Zip Code 95127-2313	Transaction ID : PR2136717251 Amount of Each Receipt this Period						
FEC ID number of contributing	С								
federal political committee.	100.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		700.00	P/R Deduction (\$100.00 Monthly)						
Full Name of Individual (Last, First, Middle C. Palani, Annamalai, , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5837 Corte Mente			07 31 2017						
City	State	Zip Code	Transaction ID : PR2138417251						
Pleasanton	CA	94566-5872	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual)		upation (for Individual)	Memo Item						
New York Life Insurance Company Receipt For:	Age		_						
Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$50.00 Monthly)						
Other (specify)		350.00	1						
SUBTOTAL of Receipts This Page (optional)		191.67						
TOTAL This Period (last page this line num	ber only)								

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: Mark one)				
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	ny Politi	cal Action Committee					
Α.	Full Name of Individual (Last, First, Middle Initial Takao, Eric K., , Mr., Mailing Address 752 Pahumele Place) or Full O	rganization Name	Date of Receipt				
	City Kailua	State HI	Zip Code	07 31 2017 Transaction ID : PR2138617251				
	Kailua FEC ID number of contributing federal political committee.	С	96734-3513	Amount of Each Receipt this Period				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2916.62	P/R Deduction (\$416.66 Monthly)				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Simons, John K., , Mr.,				Date of Receipt				
	Mailing Address 808 Thoroughbred Drive	State	Zip Code	07 / 0 D D / 9 Y Y Y Y 2017				
	Artesia	NM 88210-9373		Transaction ID : PR2138717251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		50.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 350.00	P/R Deduction (\$50.00 Monthly)				
С.	Full Name of Individual (Last, First, Middle Initial Rivera, Jesse C., , Mr.,) or Full O	rganization Name	Date of Receipt				
	Mailing Address 1933 Dock Street Unit 333	0	7. 0.1	M M / D D / Y Y Y Y 07 31 2017				
	City Tacoma	State WA	Zip Code 98402-3271	Transaction ID : PR2138917251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		41.67					
New York Life Insurance Company Age		Agei		Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)				
s	UBTOTAL of Receipts This Page (optional)		•	508.33				
т	OTAL This Period (last page this line number onl	ly)	•					

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		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle I A. Sanchala, Rajesh R., , Mr.,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 305 Highland Meadows Driv	e		07 31 2017					
City Wylie	State TX	Zip Code 75098-5074	Transaction ID : PR2139417251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		35.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	P/R Deduction (\$35.00 Monthly)					
Full Name of Individual (Last, First, Middle I B. Carbone, Jeanne, , Ms.,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 30 Eagle Court			07 31 / Y Y Y Y					
City White Plains	State NY	Zip Code 10605-5116	Transaction ID : PR21417251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		38.46					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President & Actuary	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 249.99	P/R Deduction (\$19.23 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I C. Macias, Jerry, , Mr.,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 1530 Avenida De Quintas			M M / D D / Y Y Y Y 07 31 2017					
City Las Cruces	State NM	Zip Code 88005-3509	Transaction ID : PR214317251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)					
SUBTOTAL of Receipts This Page (optional)			123.46					
TOTAL This Period (last page this line numbe	r only)							

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	
	y information copied from such Reports and State for commercial purposes, other than using the na			erson for the purpose of soliciting contributions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	ny Politi	cal Action Committee		
A.	Full Name of Individual (Last, First, Middle Initial Haddad, Angelo, , Mr.,) or Full O	rganization Name	Date of Receipt	
	Mailing Address 1816 Embarcadero Lane			07 / 07 / 07 / 07 / 07 / 07 / 07 / 07 /	
	City Bakersfield	State CA	Zip Code 93311-3151	Transaction ID : PR214517251 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		416.66	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item	
	Receipt For:	Aggregate	Year-to-Date ▼ 2916.62	P/R Deduction (\$416.66 Monthly)	
B.	Full Name of Individual (Last, First, Middle Initial Miller, Patrick D., , Mr.,	Date of Receipt			
	Mailing Address 2703 Starpine Drive	07 31 2017			
	City Duarte	State CA	Zip Code 91010-1314	Transaction ID : PR214717251 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		100.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)	
C.	Full Name of Individual (Last, First, Middle Initial Vignola, Philip, , Mr.,) or Full O	rganization Name	Date of Receipt	
	Mailing Address 4735 Reynolds Parkway			07 31 2017	
	City Boone	State NC	Zip Code 28607-5527	Transaction ID : PR21517251 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		41.67	
New York Life Insurance Company Ag			upation (for Individual) nt	Memo Item	
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 29'			P/R Deduction (\$41.67 Monthly)	
s	UBTOTAL of Receipts This Page (optional)			558.33	
т	OTAL This Period (last page this line number onl	ly)	•		

FOR LINE NUMBER:

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ITEMIZED F	RECEIPTS		for each category of the Detailed Summary Page	(check only one)
				rson for the purpose of soliciting contributions to solicit contributions from such committee.
	MMITTEE (In Full) CLife Insurance Compa	ny Politi	ical Action Committee	
Full Name of A. Choi, Kevin	Individual (Last, First, Middle Initia , , Mr.,	al) or Full C	Drganization Name	Date of Receipt
	ss 1160 Mission Street #1201			07 / D D / Y Y Y Y 2017
City San Francisco	h	State CA	Zip Code 94103-1574	Transaction ID : PR2153117251
	er of contributing	C		Amount of Each Receipt this Period
Name of From	Lauran (fan hadh dah al)		un ation (fan hadinishaal)	
	loyer (for Individual)		cupation (for Individual)	Memo Item
Receipt For:	Insurance Company		naging Partner	_
Primary	General General ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)
	Individual (Last, First, Middle Initia chard K., , Mr.,	al) or Full C	Drganization Name	Date of Receipt
	ss 425 Cove Tower Drive Apt. 120			07 / D D / Y Y Y Y 07 31 2017
City		State Zip Code FL 34110-6507		Transaction ID : PR215417251
Naples			34110-6507	Amount of Each Receipt this Period
FEC ID numb federal politica	er of contributing al committee.	С		250.00
	oloyer (for Individual) Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item
Receipt For: Primary Other (s	General General	Aggregate	Year-to-Date ▼ , 1750.00	P/R Deduction (\$250.00 Monthly)
	Individual (Last, First, Middle Initia Stephen, , Mr.,	al) or Full C	Drganization Name	Date of Receipt
Mailing Address 21 Willow Road				07 / D D / Y Y Y Y 07 31 2017
City Old Bethpage		State NY	Zip Code 11804-1133	Transaction ID : PR2154317251
	er of contributing	C		Amount of Each Receipt this Period
Name of Employer (for Individual) New York Life Insurance Company			eupation (for Individual) President	Memo Item
Receipt For: Primary Other (s	General General	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)
SUBTOTAL of I	Receipts This Page (optional)		•	519.26
TOTAL This Pe	riod (last page this line number o	nly)		

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ITEMIZED RECE	EIPTS		for each category of the Detailed Summary Page	(check only 11a 13	one) 11b 11c 14 15	12 16 17				
			not be sold or used by any political committee		ourpose of soliciting	g contributions				
NAME OF COMMIT	. ,	y Politica	al Action Committee							
A. Goldstein, Ross,) or Full Org	anization Name	Date of	Receipt					
Mailing Address 11 F	Riverside Drive 3Me			07	/ D D / Y 31	2017				
City		State	Zip Code	Transa	action ID : PR2154	917251				
New York		NY	10023-1289	Amount	of Each Receipt th	is Period				
FEC ID number of ca federal political comm	0	С				31.46				
Name of Employer (1	or Individual)	Occup	ation (for Individual)	Me	mo Item					
New York Life Insurar	nce Company	Vice F	President							
Receipt For:		Aggregate Ye	ear-to-Date 🔻							
Other (specify)	General		235.95	P/R Dedu	iction (\$15.73 Bi-Wo	eekly)				
Full Name of Individu B. Bronzo, Debra,	ual (Last, First, Middle Initial , Ms.,	Date of Receipt								
Mailing Address 107	Marsh Hill Road	1	_	07 / D D / Y Y Y Y 2017						
City		State Zip Code			Transaction ID : PR2155517251					
Putnam Valley		NY 10579-3117			of Each Receipt th	nis Period				
FEC ID number of configuration federal political comm	0	С				61.54				
Name of Employer (New York Life Insurar	for Individual) nce Company		ation (for Individual) President	Me	mo Item					
Receipt For:		Aggregate Ye	ear-to-Date 🔻	7						
Other (specify)	General ▼		461.55	P/R Dedu	ction (\$30.77 Bi-We	eekly)				
Full Name of Individu C. Sanford, Suzar	ual (Last, First, Middle Initial nne W., , Ms.,) or Full Org	anization Name	Date of	Receipt					
	6 Southwest Mariners Drive			07	/ D D / Y 31	2017				
City Wilsonville		State OR	Zip Code 97070-7456	Transa	action ID : PR2156	17251				
		UK	97070-7456	Amount	of Each Receipt th	is Period				
FEC ID number of configuration federal political comm	0	С			9 9	41.67				
Name of Employer (f	or Individual)	Occup	ation (for Individual)	Me	emo Item					
New York Life Insura	nce Company	Agent		_						
Receipt For: Primary Other (specify)	General	Aggregate Year-to-Date ▼ 291.69			uction (\$41.67 Mont	hly)				
SUBTOTAL of Receipt	s This Page (optional)					134.67				
			· · · · · · · · · · · · · · · · · · ·							

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FOR LINE NUMBER:

PAGE 115 OF

ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Check only one) X 11a 11b 11c 12 13 14 15 16 17				
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	itements ma name and a	ay not be sold or used by any per address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	ny Politi	ical Action Committee					
Full Name of Individual (Last, First, Middle Initial) A. Triplett, Raymond J., , Mr., Mailing Address 16171 Hillvale Avenue			Organization Name	Date of Receipt				
	City	State	Zip Code	07 31 2017				
	Monte Sereno	CA	95030-4159	Transaction ID : PR217217251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С						
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item				
	New York Life Insurance Company	Age	ent					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Smaldino, Nicholas J., , Mr.,				Date of Receipt				
	Mailing Address 1697 E Shadow Glen Drive			07 / D D / Y Y Y Y 07 31 2017				
	City Fresno	State Zip Code CA 93730-3533		Transaction ID : PR218117251				
			93730-3333	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		30.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , , , , , , , , , , , , , , , , , , ,	P/R Deduction (\$30.00 Monthly)				
с.	Full Name of Individual (Last, First, Middle Initia Grinnon, Michael, , Mr.,	al) or Full O	Drganization Name	Date of Receipt				
	Mailing Address 5728 Meadowhaven Drive			07 31 2017				
	City	State TX	Zip Code 75093-8555	Transaction ID : PR218672217251				
	Plano		75093-8555	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		230.76				
	Name of Employer (for Individual)		cupation (for Individual)	Memo Item				
	New York Life Insurance Company Receipt For:		porate Vice President	_				
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.70	P/R Deduction (\$115.38 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)			510.76				
т	OTAL This Period (last page this line number or	וy)						

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12				
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma	I ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	npany Politi	cal Action Committee					
Full Name of Individual (Last, First, Middle A. Ameli Jr., Nick, , Mr.,	e Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 4113 Coal Heritage Road			07 31 2017				
City Bluewell	State WV	Zip Code 24701-9193	Transaction ID : PR2188117251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		83.33				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.31	P/R Deduction (\$83.33 Monthly)				
Full Name of Individual (Last, First, Middle B. Kassam, Salim R., , Mr.,	e Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 4930 Plantation Colony D	07 / D D / Y Y Y Y 2017						
City Sugar Land	State TX	Zip Code 77478-5430	Transaction ID : PR2188317251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С						
Name of Employer (for Individual) New York Life Insurance Company	Occ	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)				
Full Name of Individual (Last, First, Middle C. Timmerman, Jerome, , Mr.,	e Initial) or Full C	Prganization Name	Date of Receipt				
Mailing Address 64 Windsor Lane			07 / D D / Y Y Y Y 2017				
City Breese	State IL	Zip Code 62230-3512	Transaction ID : PR2188517251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		250.00				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)				
SUBTOTAL of Receipts This Page (optional)		383.33				
TOTAL This Period (last page this line num	ber only)						

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: The image: The image is a straight one image is a s			
An or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma ame and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politie	cal Action Committee				
Α.	Full Name of Individual (Last, First, Middle Initial Turner, Michael K., , Mr.,	l) or Full O	rganization Name	Date of Receipt			
	Mailing Address 620 Turtle Creek Drive	State	Zip Code	07 31 2017			
	Shreveport	LA	71115-2408	Transaction ID : PR2188717251 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С					
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item			
	Dessint For:		Year-to-Date ▼ 201.81	P/R Deduction (\$28.83 Monthly)			
в.	Full Name of Individual (Last, First, Middle Initial Metzger, Jason, , Mr.,	Date of Receipt					
	Mailing Address 73 31st Avenue E						
	City West Fargo	StateZip CodeND58078-8312		Transaction ID : PR2189017251 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		38.48			
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 288.60	P/R Deduction (\$19.24 Bi-Weekly)			
с.	Full Name of Individual (Last, First, Middle Initial Wills, Douglas C., , Mr.,	l) or Full O	rganization Name	Date of Receipt			
	Mailing Address 12410 W Auburn Avenue			07 / D D / Y Y Y Y 2017			
	City Lakewood	State CO	Zip Code 80228-4986	Transaction ID : PR2189117251			
	EC ID number of contributing deral political committee.			Amount of Each Receipt this Period			
New York Life Insurance Company Ag		Occu Ager	upation (for Individual) nt	Memo Item			
	Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00			P/R Deduction (\$50.00 Monthly)			
s	UBTOTAL of Receipts This Page (optional)			117.31			
т	OTAL This Period (last page this line number on	ly)	·····				

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)					
11			for each category of the Detailed Summary Page	× 11: 13	a	11b 14	11c		12 16	17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committee	erson for t	he pu contr	irpose of	f soliciting	g con	tributio	ons
\setminus	NAME OF COMMITTEE (In Full)									
	New York Life Insurance Compa	any Politi	cal Action Committee							
/	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name							
Α.	Buzzard, Bryan T., , Mr.,	,	0	Date	of F	leceipt				
	Mailing Address 3311 E Dartmouth Street			м 0	7 ^M	/ D 31		ې 20	17	Y
	City	State	Zip Code	Tra	ansad	tion ID :	PR2189	21725	51	_
	Mesa	AZ	85213-7046	Amo	unt o	f Each F	Receipt th	nis Pe	riod	
	FEC ID number of contributing federal political committee.	С							80.00	C
	Name of Employer (for Individual)	Occi	pation (for Individual)	$- \square$	Men	no Item				
	New York Life Insurance Company	Age	,							
	Receipt For:		Year-to-Date V							
	Primary General	, iggi oguto		P/R D	educ	tion (\$80	.00 Mont	hly)		
	Other (specify) v	L	560.00							
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name							
Β.	Aguirre, David L., , Mr.,			Date	e of F	leceipt				
	Mailing Address 7518 South 240 E			07 / D D / Y Y Y Y 2017					Ŷ	
	City	State	Zip Code				PR2189			
	Midvale	UT	84047-2169	Amo	unt o	f Each F	Receipt th	nis Pe	riod	
	FEC ID number of contributing federal political committee.	С				-			100.00	C
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt		Men	no Item				
	Receipt For:	Aggregate	Aggregate Year-to-Date ▼			-				
	Primary General	riggiogato				tion (\$10	0.00 Mon	thly)		
	Other (specify) v	L	700.00							
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Allred, Robert D., , Mr.,	ial) or Full O	rganization Name	Date	e of F	leceipt				
	Mailing Address 731 Greenview Trail Northeas	t			М	/ D	D / Y	Y	YY	Y
					7	31		201	- 1 - C	
	City	State MS	Zip Code				: PR2190			
	Brookhaven		39601-8760	Amo	unt o	f Each F	Receipt th	nis Pe	riod	
FEC ID number of contributing federal political committee.						7	,		41.67	7
	Name of Employer (for Individual)	Осси	pation (for Individual)		Memo Item					
	New York Life Insurance Company	Ager	nt							
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Other (specify)		291.69	P/R D	educ	tion (\$41	.67 Mont	hly)		
	UBTOTAL of Receipts This Page (optional)					, ,			221.67	7

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$			
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma ame and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee				
Α.	Full Name of Individual (Last, First, Middle Initial Bast, William B., , Mr., Mailing Address 1163 Ridgepointe Drive) or Full O	rganization Name	Date of Receipt			
		1		07 31 2017			
	City Fairbanks	State AK	Zip Code 99709-5738	Transaction ID : PR220386617251			
			99709-5756	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		28.83			
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item			
	New York Life Insurance Company	Age	nt				
Receipt For: A Primary General Other (specify) ▼			Year-to-Date ▼ 201.81	P/R Deduction (\$28.83 Monthly)			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fincham Sr., Robert J., , Mr.,				Date of Receipt			
	Mailing Address 335 SW Mt. Washington Dr.			07 31 Y Y Y Y Y			
	City	State Zip Code		Transaction ID : PR221317251			
	Bend	OR	97702-9020	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		30.00			
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)			
С.	Full Name of Individual (Last, First, Middle Initial Allen, James A., , Mr.,) or Full O	rganization Name	Date of Receipt			
	Mailing Address 710 Avery Street	1		07 / D D / Y Y Y Y 2017			
	City South Windsor	State CT	Zip Code 06074-2303	Transaction ID : PR2217251 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		50.00			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)			
s	UBTOTAL of Receipts This Page (optional)			108.83			
т	OTAL This Period (last page this line number on	ly)					

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: Imag			
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee				
Α.	Full Name of Individual (Last, First, Middle Initial Soni, Jerry S., , Mr., Mailing Address 13265 Mission Tierra Way) or Full O	rganization Name	Date of Receipt			
				07 31 2017			
	City	State	Zip Code	Transaction ID : PR221817251			
	Granada Hills	CA	91344-1125	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		50.00			
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item			
	New York Life Insurance Company	Age	nt	_			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)			
— R	Full Name of Individual (Last, First, Middle Initial Lee, Bassie, , Ms.,) or Full O	rganization Name	Date of Receipt			
	Mailing Address 1210 Dana Avenue						
	City	State	Zip Code	Transaction ID : PR222017251			
	Palo Alto	CA	94301-3111	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		41.67			
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)			
с.	Full Name of Individual (Last, First, Middle Initial Paulsen, Richard R., , Mr.,) or Full O	rganization Name	Date of Receipt			
	Mailing Address 6280 Crooked Stick Circle	1 -		07 / D D / Y Y Y Y 2017			
	City Stockton	State CA	Zip Code 95219-1859	Transaction ID : PR222517251			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) ht	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)			
s	UBTOTAL of Receipts This Page (optional)		•	341.67			
т	OTAL This Period (last page this line number on	ly)	••••••				

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
> New York Life Insurance Co	mpany Politi	cal Action Committee						
Full Name of Individual (Last, First, Midd Rutledge, James A., , Mr.,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 142 14th St. Unit A			07 31 2017					
City Seal Beach	State CA	Zip Code 90740-6533	Transaction ID : PR223417251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		34.66					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 242.62	P/R Deduction (\$34.66 Monthly)					
Full Name of Individual (Last, First, Midd B. Rosenberg, Mitch, , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 870 Camino El Carrizo			07 / 31 / 2017					
City Thousand Oaks	State CA	Zip Code 91360-2324	Transaction ID : PR223617251					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 83.34					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)					
Full Name of Individual (Last, First, Midd C. Parrado, Nelsie T., , Ms.,	le Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 24-09 Cambridge Road			07 / D D / Y Y Y Y 2017					
City Fair Lawn	State NJ	Zip Code 07410-2946	Transaction ID : PR224617251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)					
SUBTOTAL of Receipts This Page (optional	al)		148.00					
TOTAL This Period (last page this line nur	nber only)							

Lise senarate schedule(s)

FOR LINE NUMBER:

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	ny Politio	cal Action Committee					
A.	Full Name of Individual (Last, First, Middle Initia Welch II, John K., , Mr., Mailing Address 4701 Bentcreek Drive	al) or Full O	rganization Name	Date of Receipt				
	Walling Address 4701 Bencheek Drive	07 31 2017						
	City	State	Zip Code	Transaction ID : PR224790117251				
	Fuquay-Varina	NC	27526-9461	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		32.00				
	Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item				
	New York Life Insurance Company	Age	nt					
	Receipt For:	Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼		224.00	P/R Deduction (\$32.00 Monthly)				
в.	Full Name of Individual (Last, First, Middle Initia Bedard, David, , Mr.,	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 192 Kingswood Drive			07 / D D / Y Y Y Y 07 31 2017				
	City	State	Zip Code	Transaction ID : PR224798217251				
	Avon	СТ	06001-3180	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		76.94				
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Vice President	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)				
с.	Full Name of Individual (Last, First, Middle Initia Meracle, Edward, , Mr.,	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 6950 Stagecoach Drive #205			07 / D D / Y Y Y Y 2017				
	City West Des Moines	State IA	Zip Code 50266-3888	Transaction ID : PR224803017251				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 38.48				
	Name of Employer (for Individual) New York Life Insurance Company		ipation (for Individual) or Partner	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)		•	147.42				
Т	OTAL This Period (last page this line number or	וy)	••••••					

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PAGE 123 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$				
			erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Politi	cal Action Committee					
Full Name of Individual (Last, First, Middl Ince, Peter, , Mr., Mailing Address 253 Jennings Avenue City Patchogue FEC ID number of contributing federal political committee.	State NY C	Zip Code 11772-2558	Date of Receipt 07 31 2017 Transaction ID : PR22517251 Amount of Each Receipt this Period 35.00				
Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	P/R Deduction (\$35.00 Monthly)				
Full Name of Individual (Last, First, Middl B. Cowart, Josh, , Mr., Mailing Address 2713 Northeast Seneca City Ankeny FEC ID number of contributing	State IA	Zip Code 50021-6722	Date of Receipt 07 07 Transaction ID : PR225754417251 Amount of Each Receipt this Period				
federal political committee. Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify) ▼	Sei	upation (for Individual) nior Partner Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)				
Full Name of Individual (Last, First, Middl Spickler, Scott V., , Mr., Mailing Address 10754 Horizon Drive	Date of Receipt						
City Juneau FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify)	Age	Zip Code 99801-7625 upation (for Individual) nt Year-to-Date ▼ 525.00	Transaction ID : PR225917251 Amount of Each Receipt this Period 75.00 Memo Item P/R Deduction (\$75.00 Monthly)				
SUBTOTAL of Receipts This Page (optiona	al)	····· •	148.46				
TOTAL This Period (last page this line nun	nber only)						

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	5	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
			erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In New York Life Insu		cal Action Committee					
A. Full Name of Individual (Las Urling, Curtis L., , Mr., Mailing Address 155 Botanic City Anchorage FEC ID number of contributi	State AK	Zip Code 99515-3680	Date of Receipt				
federal political committee. Name of Employer (for Indiv New York Life Insurance Com Receipt For: Primary Gene Other (specify) ▼	idual) Occ npany Age Aggregate	upation (for Individual) nt Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)				
Full Name of Individual (Las Doverspike , Jack L., , Mailing Address PO Box 159 <u>City</u>		Date of Receipt 07 / 31 / 2017 Transaction ID : PR228717251					
Larose FEC ID number of contributi federal political committee. Name of Employer (for Indiv New York Life Insurance Com	idual) Occ	upation (for Individual)	Amount of Each Receipt this Period 91.34 Memo Item				
Receipt For: Primary Gene Other (specify) ▼		Year-to-Date ▼ 639.38	P/R Deduction (\$91.34 Monthly)				
C. Full Name of Individual (Las Jaramillo, Jonathan, Mailing Address 10400 North		rganization Name	Date of Receipt				
Unit # 501S City Bellevue FEC ID number of contributi federal political committee. Name of Employer (for Indiv New York Life Insurance Con Receipt For: Primary Gene	idual) ng idual) Aggregate	Zip Code 98004-2326 upation (for Individual) aging Partner Year-to-Date ▼ 1730.85	07 31 2017 Transaction ID : PR229017251 Amount of Each Receipt this Period 230.78 Memo Item P/R Deduction (\$115.39 Bi-Weekly)				
SUBTOTAL of Receipts This F	Page (optional)	•	405.46				
TOTAL This Period (last page	this line number only)	••••••					

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) New York Life Insurance Com								
Full Name of Individual (Last, First, Middle A. Nguyen, Son V., , Mr.,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 6474 Marigayle Circle			M M / D D / Y Y Y Y 07 31 2017					
City Huntingtn Bch	State CA	Zip Code 92648-6728	Transaction ID : PR229817251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		30.00					
Name of Employer (for Individual) New York Life Insurance Company	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Senethavilay, Chanh, , Mr.,			Date of Receipt					
Mailing Address 5247 Sangara Drive			07 / D D / Y Y Y Y Y 2017					
City North Las Vegas	State NV	Zip Code 89031-7801	Transaction ID : PR230017251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		41.67					
Name of Employer (for Individual) New York Life Insurance Company	Name of Employer (for Individual) Occupation (for Individual) New York Life Insurance Company Agent							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)					
Full Name of Individual (Last, First, Middle C. Cama, Vincent A., , Mr.,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 19 Crestwood Drive	1		07 31 2017					
City East Hampton	State CT	Zip Code 06424-1322	Transaction ID : PR23017251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		34.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$34.00 Monthly)					
SUBTOTAL of Receipts This Page (optional)			105.67					
TOTAL This Period (last page this line numb	er only)							

FOR LINE NUMBER:

PAGE 126 OF

ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)						
			for each category of the Detailed Summary Page		′ 11a 13		11b	11c 15		12 16	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	erson to so	for the	pur ntrik	pose of	soliciting	g cont	tributio	ons
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	ny Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Initi Prolman, Earl S., , Mr.,	al) or Full O	rganization Name		Date o	f Re	eceipt				
	Mailing Address 45 Wood Street				м м 07	1	D D 31	/ Y	y 201	17	Ŷ
	City Nashua	State NH	Zip Code 03064-1929	_				PR23172 eceipt th		riod	
	FEC ID number of contributing federal political committee.	С			<u> </u>		-y 1		2	250.00	0
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	F	P/R Ded	ucti	on (\$250).00 Mon	thly)		
в.	Full Name of Individual (Last, First, Middle Initi Patel, Himatlal K., , Mr.,	al) or Full O	rganization Name		Date o	f Re	eceipt				
	Mailing Address 14677 Blazing Star Drive						07 31 2017				
	City	State	Zip Code		Trans	act	ion ID :	PR23181	7251		
	Eastvale	CA	92880-9138	_	Amoun	t of	Each R	eceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С			<u> </u>		7		_	30.00	0
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 210.00	F	P/R Ded	ucti	on (\$30.0	00 Month	ıly)		
с.	Full Name of Individual (Last, First, Middle Initi Altmann, Charles J., , Mr.,	al) or Full O	rganization Name		Date o	f Re	eceipt				
	Mailing Address 1829 Barry Avenue				07 31 2017					Y	
	City Los Angeles	State CA	Zip Code 90025-5306	_				PR2321 eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .			70.00	0
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) ht		М	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 490.00	F	P/R Dec	lucti	on (\$70.	00 Mont	hly)		
s	UBTOTAL of Receipts This Page (optional)		•				, .	,	3	350.00	
т	OTAL This Period (last page this line number o	nly)					-	-			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 127 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)					
I LIVILLU RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma ing the name and a	L ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) New York Life Insurance C	ompany Politi	cal Action Committee						
Full Name of Individual (Last, First, Mid A. Miller, Thomas, , Mr.,	Idle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1120 River Ridge Boul	evard		07 31 2017					
City Spokane	State WA	Zip Code 99224-7060	Transaction ID : PR238096617251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		230.78					
Name of Employer (for Individual) New York Life Insurance Company	ew York Life Insurance Company Managing Partner							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)					
Full Name of Individual (Last, First, Mid B. Rivera, John M., , Mr.,	Idle Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6706 E Magill Street			07 31 2017					
City _Wichita	State KS	Zip Code 67206-1346	Transaction ID : PR238097517251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		83.34					
Name of Employer (for Individual) New York Life Insurance Company								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)					
Full Name of Individual (Last, First, Mic C. Hart, Philip C., , Mr.,	Idle Initial) or Full C	rganization Name	Date of Receipt					
	Mailing Address 1624 Harvest Grove Court							
City Valrico	State FL	Zip Code 33596-5687	Transaction ID : PR238126517251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		58.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)					
SUBTOTAL of Receipts This Page (option	nal)		372.12					
TOTAL This Period (last page this line n	umber only)							

SCHEDULE A (FEC Form 3X)		separate schedule(s)	FOR LINE NUMBER: PAGE 128 OF 352 (check only one)				
ITEMIZED RECEIPTS		ach category of the led Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
			erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Political Ac	tion Committee					
Full Name of Individual (Last, First, Middl A. Welzien, Dirk, , Mr.,	e Initial) or Full Organizati	on Name	Date of Receipt				
Mailing Address 533 Silver Oak Lane	State Zip	Code	07 31 2017 Transaction ID - DD / Y Y Y Y				
Danville		4506-4647	Transaction ID : PR240559917251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		83.34				
Name of Employer (for Individual) New York Life Insurance Company	Occupation (Agent	(for Individual)	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)				
Full Name of Individual (Last, First, Middl Kameoka, Yosuke, , Mr.,	e Initial) or Full Organizati	on Name	Date of Receipt				
Mailing Address 17 Vashon Key			07 31 2017				
City Bellevue		Code 3006-1029	Transaction ID : PR240582517251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		76.92				
Name of Employer (for Individual) New York Life Insurance Company	Occupation Senior Partr	(for Individual) ner	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 576.90		P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middl Vanderstreet, Jason C., , Mr.,	e Initial) or Full Organizati	on Name	Date of Receipt				
Mailing Address 53 Morse Avenue			07 / D D / Y Y Y Y 07 31 2017				
City Dedham		Code 026-3123	Transaction ID : PR243502917251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		83.34				
Name of Employer (for Individual) New York Life Insurance Company	Occupation (Agent	(for Individual)	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate Year-to-	Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)				
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num	,	-	243.60				

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions te to solicit contributions from such committee.						
> New York Life Insurance C	ompany Politi	cal Action Committee							
Full Name of Individual (Last, First, Mic A. Salem, Nadeem S., , Mr.,	dle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2511 Wealdstone Road	I		07 31 Y Y Y Y Y 07 31 2017						
City Toledo	State OH	Zip Code 43617-1325	Transaction ID : PR243506917251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		49.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 347.69	P/R Deduction (\$49.67 Monthly)						
Full Name of Individual (Last, First, Mic B. Mulqueen, Kevin J., , Mr.,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 41 Silo Lane			07 31 2017						
City Middletown	State NY	Zip Code 10940-2603	Transaction ID : PR26917251						
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 58.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)						
Full Name of Individual (Last, First, Mic C. Righthand, Penny K., , Ms.,	dle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 565 Bellevue Avenue A	-		07 / D D / Y Y Y Y 2017						
City Oakland	State CA	Zip Code 94610-5038	Transaction ID : PR27517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)						
SUBTOTAL of Receipts This Page (option	nal)		357.67						
TOTAL This Period (last page this line nu	umber only)								

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ITEM	IIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)				
				erson for the purpose of soliciting contributions to solicit contributions from such committee.				
\ \	ME OF COMMITTEE (In Full) ew York Life Insurance Compar	y Politic	al Action Committee					
A . <u>G</u> a	l Name of Individual (Last, First, Middle Initial akmyan, Marat G., , Mr., iling Address 340 Travis Avenue) or Full Org	panization Name	Date of Receipt				
		07 31 2017						
City		State NY	Zip Code 10314-6129	Transaction ID : PR28117251				
- 512	aten Island		10314-6129	Amount of Each Receipt this Period				
	C ID number of contributing eral political committee.	С		34.67				
Nar	ne of Employer (for Individual)	Occup	pation (for Individual)	Memo Item				
	w York Life Insurance Company							
	ceipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 242.69	P/R Deduction (\$34.67 Monthly)				
	Name of Individual (Last, First, Middle Initial coney, Walden J., , Mr.,	Date of Receipt						
	iling Address 5 Mountain View Boulevard			07 / D D / Y Y Y Y 2017				
City		State Zip Code VT 05403-5825		Transaction ID : PR2817251 Amount of Each Receipt this Period				
	C ID number of contributing eral political committee.	С		75.00				
Nai Nev	me of Employer (for Individual) v York Life Insurance Company	Occup Agen	pation (for Individual) t	Memo Item				
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 525.00	P/R Deduction (\$75.00 Monthly)				
	Name of Individual (Last, First, Middle Initial tander, Lyle, , Mr.,) or Full Org	ganization Name	Date of Receipt				
	iling Address 16027 Glen Haven Drive	1		07 / D D / Y Y Y Y Y 2017				
City	/ mpa	State FL	Zip Code 33618-1650	Transaction ID : PR282424517251				
FEG	C ID number of contributing eral political committee.	C		Amount of Each Receipt this Period 38.46				
	ne of Employer (for Individual) w York Life Insurance Company	Occup Partne	pation (for Individual) er	Memo Item				
Rec	ceipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)				
SUBT	FOTAL of Receipts This Page (optional)		••••••	148.13				
τοτα	L This Period (last page this line number on	ly)	•••••					

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ITEMIZED REC	EIPTS		for each category of the Detailed Summary Page	(check or 11a 13	,	11c	12 16 1			
Any information copied or for commercial purp	d from such Reports and State poses, other than using the na	ements may	y not be sold or used by any pe Idress of any political committee	erson for the	e purpose of ontributions f	soliciting	contributions			
NAME OF COMMIN		y Politic	cal Action Committee							
Full Name of Indivi A. Kim, John, , Mr.	dual (Last, First, Middle Initial) ,) or Full Or	ganization Name	Date	of Receipt					
Mailing Address 23 E 22nd Street Unit 24A				07) / Y	2017			
City New York		State NY	Zip Code 10010-5304		nsaction ID :					
			10010-5304	Amou	nt of Each R	leceipt th	is Period			
FEC ID number of federal political con	0	С					104.00			
Name of Employer	(for Individual)	Occu	pation (for Individual)		Memo Item					
New York Life Insur	ance Company	Pres	ident							
Receipt For: Primary Other (specify	General	Aggregate `	Year-to-Date ▼ 780.00	P/R De	eduction (\$52	.00 Bi-We	eekly)			
Full Name of Indivi B. Fioritto, Christo	dual (Last, First, Middle Initial)) or Full Or	ganization Name	Date	of Receipt					
Mailing Address 11	ng Address 1100 Maxwell Lane Unit 416					07 / D D / Y Y Y Y 2017				
City		StateZip CodeNJ07030-6887			Transaction ID : PR284042417251 Amount of Each Receipt this Period					
Hoboken										
FEC ID number of federal political con	0	С					46.48			
Name of Employer New York Life Insur	(for Individual) ance Company	Occupation (for Individual) Corporate Vice President & Actuary			Memo Item					
Receipt For: Primary Other (specify	General	Aggregate Y	Year-to-Date ▼ 348.60	P/R De	duction (\$23.	24 Bi-We	ekly)			
Full Name of Indivi c. Mollah, Monz	dual (Last, First, Middle Initial) ur, , Mr.,) or Full Or	ganization Name	Date	of Receipt					
Mailing Address 22	162 Hollow Rock Court	4		M 07) / Y	2017 Y			
City Las Vegas		State NV	Zip Code 89135-1510		nsaction ID :					
FEC ID number of federal political con	0	C	09130-1510	Amou	nt of Each R	leceipt th	is Period 100.00			
Name of Employer	,		pation (for Individual)		Memo Item					
Poppint For:			aging Partner Year-to-Date ▼	_						
Other (specify	General	Jyroguid	750.00	P/R De	eduction (\$50	.00 Bi-We	eekly)			
SUBTOTAL of Recei	pts This Page (optional)		••••••			. ,	250.48			
TOTAL This Period (last page this line number onl	y)	•••••							

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 11c 12 13 14 15 16 17				
	y information copied from such Reports and Stat for commercial purposes, other than using the na			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee					
Α.) or Full O	rganization Name	Date of Receipt				
	Mailing Address 3851 Prima Buca	1		07 31 Y Y Y Y 2017				
	City Yorba Linda	State CA	Zip Code 92886-2866	Transaction ID : PR285431717251				
			92000-2000	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		30.00				
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item				
	New York Life Insurance Company	Age	nt					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)				
B	Full Name of Individual (Last, First, Middle Initial Dunn, Jennifer A., , Ms.,) or Full O	rganization Name	Date of Receipt				
D.	Mailing Address 49 Stirrup Drive							
	City	State	Zip Code	Transaction ID : PR285436417251				
	East Greenbush	NY	12061-1227	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		30.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item				
	Receipt For:	Aggregate	Year-to-Date ▼	7				
	Other (specify) ▼		210.00	P/R Deduction (\$30.00 Monthly)				
C.	Full Name of Individual (Last, First, Middle Initial Kho, Jenny O., , Ms.,) or Full O	rganization Name	Date of Receipt				
	Mailing Address 77 Cumberland Drive			07 31 2017				
	City	State	Zip Code	Transaction ID : PR29117251				
	Yonkers	NY	10704-3525	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item				
	Respiret For:		Year-to-Date V	—				
	Primary General Other (specify)		1750.00	P/R Deduction (\$250.00 Monthly)				
s	UBTOTAL of Receipts This Page (optional)		•••••	310.00				
т	OTAL This Period (last page this line number on	ly)	••••••					

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	L ay not be sold or used by any p Iddress of any political committe	erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full) New York Life Insurance Corr	npany Politi	cal Action Committee									
Full Name of Individual (Last, First, Middle A. Wilson, Christopher, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1015 N Hampton Avenue			07 31 2017								
City Orlando	State FL	Zip Code 32803-3412	Transaction ID : PR292937017251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		38.46								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Partner	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)								
Full Name of Individual (Last, First, Middle B. Fisher, Michael, , Mr. ,											
Mailing Address 1919 N Meryls Terrace		1	07 / D D / Y Y Y Y 2017								
City Palatine	State	Zip Code 60074-1049	Transaction ID : PR292943917251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		230.76								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.70	P/R Deduction (\$115.38 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. Fisher, Kimberly, , Ms.,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 10 Dekalb Avenue <u>Apt. 505</u> City	State	Zip Code	07 / 07 / 2017 Transaction ID : PR292946717251								
White Plains	NY	10605-6452	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			346.14								
TOTAL This Period (last page this line numb	er only)										

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	-	Use separate schedule(s)			(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	[17			
Any information copied from such Reports a or for commercial purposes, other than usin				or the		pose of	soliciting	g contrib					
NAME OF COMMITTEE (In Full)	-												
New York Life Insurance Co	mpany Politi	cal Action Committee											
Full Name of Individual (Last, First, Midd Shapiro, Joel A., , Mr.,	,	rganization Name		Date of Receipt									
Mailing Address 506 Eagleton Cove Trace				07 / D D / Y Y Y Y Y 2017									
City Palm Beach Gardens	State FL	Zip Code 33418-8496		Transaction ID : PR29317251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С						-	100	0.00				
Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		M	emo	tem							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P.	/R Ded	ucti	on (\$10	0.00 Mor	nthly)					
Full Name of Individual (Last, First, Midd B. Palmer, Bobby, , Mr.,		Date of	Re	eceipt									
Mailing Address 103 Syrah Court				07 31 Y Y Y Y Y 2017									
City	State	Zip Code 95425-3879		Trans	acti	ion ID :	PR2938	9817251					
Cloverdale	CA	/	Amount	t of	Each F	Receipt th	nis Perio	d					
FEC ID number of contributing federal political committee.	C	С					38.48						
Name of Employer (for Individual) New York Life Insurance Company		Occupation (for Individual) Senior Partner					Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)										
Full Name of Individual (Last, First, Midd C. Tobin, Michael, , Mr.,	le Initial) or Full O	rganization Name		Date of	Re	eceipt							
Mailing Address 10 Alice Lane				^M 07	1	31		2017					
City Rensselaer	State NY	Zip Code 12144-9614					Receipt th						
FEC ID number of contributing federal political committee.	С					, .	. ,	29	9.96				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President		Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 224.70] P	P/R Deduction (\$14.98 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional	al)		•			y	9	168	8.44				
TOTAL This Period (last page this line nur	nber only)					-							

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PAGE 135 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17				
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma ame and ac	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee					
A.	Full Name of Individual (Last, First, Middle Initial Feng, Yingyu, , Ms.,) or Full Or	rganization Name	Date of Receipt				
	Mailing Address 4827 Central Avenue			07 31 Y Y Y Y 07 31 2017				
	City	State	Zip Code	Transaction ID : PR296755817251				
	Fremont	CA	94536-6610	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		38.00				
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
	New York Life Insurance Company	Ager	nt					
	Receipt For:	Aggregate	Year-to-Date V					
	Primary General Other (specify) ▼		266.00	P/R Deduction (\$38.00 Monthly)				
в.	Full Name of Individual (Last, First, Middle Initial Goodyear, Samuel S., , Mr.,) or Full Or	rganization Name	Date of Receipt				
	Mailing Address 9204 Citrus Glen Lane	07 31 2017						
	City	State	Zip Code	Transaction ID : PR296756817251				
	Orangevale	CA	95662-4831	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1750.00	P/R Deduction (\$250.00 Monthly)				
— C.	Full Name of Individual (Last, First, Middle Initial Morris, Terence, , Mr.,) or Full Or	rganization Name	Date of Receipt				
	Mailing Address 175 Elm Street			07 31 2017				
	City	State	Zip Code	Transaction ID : PR298470417251				
	Rocky Hill	СТ	06067-2307	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		41.67				
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
	New York Life Insurance Company	Ager	nt	_				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)				
	UBTOTAL of Receipts This Page (optional)			329.67				
	OTAL This Period (last page this line number on		·					

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
I LIVILLU RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Politi	cal Action Committee									
Full Name of Individual (Last, First, Midd A. Ford, Vickie L., , Ms.,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 3910 S Sandusky Avenu	e		M M / D D / Y Y Y Y Y 07 31 2017								
City Tulsa	State OK	Zip Code 74135-2516	Transaction ID : PR298513317251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		60.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$60.00 Monthly)								
Full Name of Individual (Last, First, Midd B. Smith, Daniel, , Mr.,											
Mailing Address 3402 Doral Drive			07 31 Y Y Y Y Y 2017								
City Little Rock	State AR	Zip Code 72212-2904	Transaction ID : PR298517517251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.48								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)								
Full Name of Individual (Last, First, Midd C. Liu, Hong Pian, , Ms.,	le Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2027 77th Street			07 / D D / Y Y Y Y Y 2017								
City Brooklyn	State NY	Zip Code 11214-4444	Transaction ID : PR300150017251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.46								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Partner	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional	al)		136.94								
TOTAL This Period (last page this line nur	nber only)										

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) New York Life Insurance Com	ipany Politi	cal Action Committee										
Full Name of Individual (Last, First, Middle A. Gould, Gabriel, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 29 Emm Lane			07 31 2017									
City Roslyn	State NY	Zip Code 11576-2005	Transaction ID : PR300186317251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		76.94									
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)									
Full Name of Individual (Last, First, Middle B. Halpern, Heidi, , Ms.,	· ·											
Mailing Address 170 E 87th Street Apt. E-4E			07 / D D / Y Y Y Y Y 2017									
City New York	State NY	Zip Code 10128-2215	Transaction ID : PR301232117251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		38.48									
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.50	P/R Deduction (\$15.54 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. Stockmaster, Jason A., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 6729 N Weatherby Drive			07 / D D / Y Y Y Y Y 31 2017									
City Mentor	State OH	Zip Code 44060-4045	Transaction ID : PR302136517251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		41.67									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)									
SUBTOTAL of Receipts This Page (optional).			157.09									
TOTAL This Period (last page this line numb	er only)											

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports an or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) New York Life Insurance Con											
Full Name of Individual (Last, First, Middle Lang, Ann Marie B., , Ms.,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 2017 Delaware Avenue			07 31 2017								
City Santa Cruz	State CA	Zip Code 95060-6307	Transaction ID : PR302139917251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		28.84								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 201.88	P/R Deduction (\$28.84 Monthly)								
Full Name of Individual (Last, First, Middle B. Sola, Matthew, , Mr.,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 17 Highland Place			07 / D D / Y Y Y Y 2017								
City Maplewood	State NJ	Zip Code 07040-2507	Transaction ID : PR302147217251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		50.00								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. Berning, Erica, , Ms.,	,	organization Name	Date of Receipt								
Mailing Address 625 West Jackson Bouleva Unit 201 City	ard State	Zip Code	07 / 31 / 2017 Transaction ID : PR302151717251								
Chicago	IL	60661-5610	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		76.92								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Partner	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			155.76								
TOTAL This Period (last page this line numb	per only)										

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		Use separate schedule(s)			(check only one)									
11	LIVIIZED REGEIFIJ		for each category of the Detailed Summary Page		K 11a		11b	11c	12	<u> </u>				
Ar	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma	A not be sold or used by any p ddress of any political committee	erson	for the	pur	pose of	15 f soliciting from such	16 contribut	ions				
	NAME OF COMMITTEE (In Full)			0 10 3		TUTIC								
\rangle	New York Life Insurance Comp	any Politi	cal Action Committee											
Α.	Full Name of Individual (Last, First, Middle Ini De Lisio, Paul, , Mr.,	itial) or Full O	rganization Name		Date of Receipt									
	Mailing Address 99 Wildflower Lane				M M / D D / Y Y Y Y Y 07 31 2017									
	City Shokan	State NY	Zip Code 12481-5322		Transaction ID : PR30417251 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C			<u> </u>		-		50.0	00				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		M	emo	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00] '	P/R Ded	ucti	on (\$50	0.00 Month	nly)					
в.	Full Name of Individual (Last, First, Middle Ini Foley, Maureen, , Ms.,	itial) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 474 48th Avenue Apt. 12C		07 / D D / Y Y Y Y Y 2017											
	City	State NY	Zip Code					PR30617						
	Long Island City		11109-5612		Amount	t of	Each F	Receipt th	iis Period	_				
	FEC ID number of contributing federal political committee.	C		30.00										
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		P/R Deduction (\$30.00 Monthly)									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00] 「										
<u>с.</u>	Full Name of Individual (Last, First, Middle Ini Wilson, Lenora D., , Ms.,	itial) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 9817 Hadrians Way				м м 07	/	31		2017	Y				
	City Shreveport	State LA	Zip Code 71118-4843					PR3141 Receipt th	7251 iis Period					
	FEC ID number of contributing federal political committee.	С			41.67									
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager		Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date 291.69]	P/R Deduction (\$41.67 Monthly)									
s	UBTOTAL of Receipts This Page (optional)			•			,	. ,	121.6	67				
⊢	OTAL This Period (last page this line number			- -	Ċ.		, .							

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
ILEIVILLED RECEIFIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 12 14 15 16 11c								
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	cal Action Committee									
Full Name of Individual (Last, First, Mide A. Albright, Michelle R., , Ms.,	dle Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2006 Sea Palms Drive V	Vest										
City St. Simons Island	State GA	Zip Code 31522-5294	Transaction ID : PR316092017251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1456.00	P/R Deduction (\$208.00 Monthly)								
Full Name of Individual (Last, First, Mide B. Murphy, Marijo, , Ms.,	dle Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1672 Morningview Drive			07 31 / Y Y Y Y 07 31 2017								
City Yorktown Heights	State NY	Zip Code 10598-5511	Transaction ID : PR31617251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.48								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)								
Full Name of Individual (Last, First, Mide C. Howland, Abbett, , Mr.,	dle Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 240 East 86th Street Apt. 24H City	State	Zip Code	07 31 2017 Transaction ID : PR33317251								
New York	NY	10028-3083	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		38.48								
Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Man	upation (for Individual) aging Director	Memo Item								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)								
SUBTOTAL of Receipts This Page (option	al)		284.96								
TOTAL This Period (last page this line nu	mber only)										

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			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □								
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions								
\setminus	NAME OF COMMITTEE (In Full)	-										
	New York Life Insurance Compa	any Politi	cal Action Committee									
<u>/</u>	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name									
Α.	Rodriguez, Alfredo, , Mr.,			Date of Receipt								
	Mailing Address 708 Bryans Way			07 31 2017								
	City	State PA	Zip Code	Transaction ID : PR340923117251								
	Warrington	FA	18976-1912	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		30.00								
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item								
	New York Life Insurance Company	Mar	naging Partner									
	Receipt For: Primary General	Aggregate	Year-to-Date V									
	Other (specify) V		225.00	P/R Deduction (\$15.00 Bi-Weekly)								
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name									
в.	Sprik, Darwyn, , Mr., Mailing Address 2600 E Carlyle Circle			Date of Receipt								
	Maining Address 2600 E Carlyle Circle											
	City	State	Zip Code	Transaction ID : PR340932117251								
	Sioux Falls	SD	57108-2830	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		30.00								
	Name of Employer (for Individual) New York Life Insurance Company	Occ	upation (for Individual) ent	Memo Item								
	Receipt For:	Aggregate	Year-to-Date V	7								
	Primary General			P/R Deduction (\$30.00 Monthly)								
	Other (specify) v	L	210.00									
C.	Full Name of Individual (Last, First, Middle Init Wion, Matthew, , Mr.,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 46 Dykers Farm Road			07 31 / Y Y Y Y 2017								
	City	State NJ	Zip Code	Transaction ID : PR340952517251								
	North Haledon	INJ	07508-2649	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		76.94								
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item								
	New York Life Insurance Company	Seni	ior Vice President	_								
	Receipt For:	Aggregate	Year-to-Date ▼	P/P Doduction (\$19.24 Ri Wookly)								
	Other (specify)		327.06	P/R Deduction (\$19.24 Bi-Weekly)								
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o			136.94								

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IT.			(ch	(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c		12 16	17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements mana and a	ay not be sold or used by any p address of any political committe	erson e to so	for the	pur ntrib	pose of	soliciting	g cont	tributio	ons		
	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	iny Politi	cal Action Committee										
Α.	Full Name of Individual (Last, First, Middle Initia Bonk, Robert, , Mr.,	al) or Full C	Organization Name		Date of Receipt								
	Mailing Address 4011 S 31st Street			07 31 2017									
	City Lincoln	State NE	Zip Code 68502-5915				-	PR3409 Receipt th		-			
	FEC ID number of contributing federal political committee.	С								108.00)		
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Partner		М	emo	ttem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 810.00]	P/R Ded	ucti	on (\$54	.00 Bi-W	eekly)				
B.	Full Name of Individual (Last, First, Middle Initi Lawrence, John, , Mr., Mailing Address 1008 Hollyhock Drive	al) or Full C	Organization Name	Date of Receipt									
	City	State	Zip Code		07 31 2017 Transaction ID : PR340974917251								
	Oakley	CA	94561-1874				-	Receipt th		-			
	FEC ID number of contributing federal political committee.	С		30.00									
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) tner		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼					P/R Deduction (\$15.00 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initi Weis, Donald, , Mr.,	al) or Full C	Organization Name		Date of	f Re	eceipt						
	Mailing Address 141 Harold Avenue				07 / D D / Y Y Y Y 07 31 2017								
	City Cornwall	State NY	Zip Code 12518-1701					PR3409 Receipt th					
	FEC ID number of contributing federal political committee.	С			Ē		,	9		38.48	3		
	Name of Employer (for Individual) New York Life Insurance Company	Man	upation (for Individual) naging Partner		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60] f	P/R Deduction (\$19.24 Bi-Weekly)								
	UBTOTAL of Receipts This Page (optional)			<u> </u>			9	5	1	176.48	3		

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)								
I EIVILED KEGEIF13		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	l ay not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
New York Life Insurance Com	npany Politi	cal Action Committee									
Full Name of Individual (Last, First, Middle Meyer, Shawna, , Ms.,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 10711 Twisted Elm Drive			07 31 2017 Transaction ID : PR342009717251 Amount of Each Receipt this Period								
City Austin	State TX	Zip Code 78726-2373									
FEC ID number of contributing federal political committee.	C		38.48								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President & Actuary	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)								
Full Name of Individual (Last, First, Middle 3. Kenyon, Michelle , , Ms.,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5246 Park Ridge Drive			07 / 07 / 07 / 07 / 07 / 07 / 07 / 07 /								
City	State TX	Zip Code	Transaction ID : PR342588617251								
Frisco	1	75034-4612	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		46.48								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 348.60	P/R Deduction (\$23.24 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Tyler, Thomas, , Mr.,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3 High Oak Court			07 / D D / Y Y Y Y Y 07 31 2017								
City Huntington	State NY	Zip Code 11743-4208	Transaction ID : PR342593017251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		90.00								
Name of Employer (for Individual) New York Life Insurance Company	Occi	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 630.00	P/R Deduction (\$90.00 Monthly)								
SUBTOTAL of Receipts This Page (optional).			174.96								
TOTAL This Period (last page this line number	er only)										

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17	EMIZED RECEIPTS	Use separate schedule(s)			(ch	(check only one)								
			for each cate Detailed Sun			4 11a 13		11b 14	11c 15		12 16 [17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold o ddress of any p	r used by any pe olitical committee	erson e to s	for the olicit co	pur ntrib	pose of outions f	soliciting	g cont h corr	ributic	ons		
\setminus	NAME OF COMMITTEE (In Full)													
	New York Life Insurance Compa	any Politi	cal Action (Committee										
Α.	Full Name of Individual (Last, First, Middle Init McClain, Keith, , Mr.,	tial) or Full O	rganization Narr	ie		Date of Receipt								
	Mailing Address 1 Carter Road					07	/	D D D 31	/ Y	y 201	ү ү 17	Γ		
	City	State	Zip Code			Trans	act	ion ID :	PR3433	88617	251			
	West Orange	NJ	07052-46	11	_	Amoun	t of	Each R	eceipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	С						-			36.00)		
	Name of Employer (for Individual)	Occi	upation (for Indiv	/idual)	_	М	emc	Item						
	New York Life Insurance Company		President											
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Primary General			270.00	F	P/R Ded	ucti	on (\$18.	00 Bi-W	eekly)				
	Other (specify) v													
в.	Full Name of Individual (Last, First, Middle Init Molinaro, Michael, , Mr.,	tial) or Full O		Date o	f Re	eceipt								
	Mailing Address 360 First Avenue # 13B						07 31 Y Y Y Y Y							
	City	State	Zip Code			Trans	acti	on ID :	PR3433	92517	251			
	New York	NY		Amoun	t of	Each R	eceipt th	nis Pe	riod					
	FEC ID number of contributing federal political committee.	С	60.00											
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Indi		Memo Item									
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Primary General	33 - 3		450.00	F	P/R Ded	uctio	on (\$30.	00 Bi-We	eekly)				
	Other (specify) v	<u> </u>												
с.	Full Name of Individual (Last, First, Middle Init Pineda, Jesus, , Mr.,	tial) or Full O	rganization Narr	le		Date o	f Re	eceipt						
	Mailing Address 21984 N 104th Lane					м м 07	/	31	/ Y	y 201		7		
	City	State	Zip Code			Trans	sact	ion ID :	PR3434	33617	7251			
	Peoria	AZ	85383-267	'4		Amoun	t of	Each R	eceipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	С						, .	, ,		83.34	ļ		
	Name of Employer (for Individual)	Occi	upation (for Indiv	vidual)	_	М	emo	ltem						
	New York Life Insurance Company	Age		,										
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify)			'	P/R Deduction (\$83.34 Monthly)									
s	UBTOTAL of Receipts This Page (optional)				 	Ľ.		y		1	179.34			
т	OTAL This Period (last page this line number	only)		••••••						_				

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ITI	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ✗ 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Stat for commercial purposes, other than using the na									
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ıy Politi	tical Action Committee							
Α.	Full Name of Individual (Last, First, Middle Initial Yu, Jie, , Ms.,	Organization Name	Date of Receipt							
	Mailing Address 84-05 Wareham Place			07 31 2017						
	City	State NY	Zip Code	Transaction ID : PR343451917251						
	Jamaica		11432-2221	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		38.46						
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item						
	New York Life Insurance Company	Ser	enior Partner							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initial) or Full C	Organization Name							
B.	Holm, Jeanmarie, , Ms.,			Date of Receipt						
	Mailing Address 4325 Cobblers Circle	State	Zip Code	M M M J D D Y						
	Dallas	TX	75287-6700							
	FEC ID number of contributing federal political committee.	С								
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) prporate Vice President	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	P/R Deduction (\$50.00 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Initial Pascual, Agustin, , Mr.,) or Full C	Organization Name	Date of Receipt						
	Mailing Address 4612 North 11th Street			07 31 / Y Y Y Y 07 31 2017						
	City	State	Zip Code	Transaction ID : PR344567317251						
	McAllen	ТХ	78504-3608	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		40.00						
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item						
New York Life Insurance Company Exe			ecutive Partner							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			178.46						
Т	OTAL This Period (last page this line number on	y)								

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
> New York Life Insurance Com	npany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle Barilotti, Dina, , Ms.,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1827 Duffield Lane			07 31 2017					
City Alexandria	State VA	Zip Code 22307-1176	Transaction ID : PR345983217251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		41.67					
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) Int	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)					
Full Name of Individual (Last, First, Middle B. Brightman, Matthew, , Mr.,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 1 Repton Place #1434			07 / 07 / Y Y Y Y 07 31 2017					
City Watertown	State MA	Zip Code 02472-2499	Transaction ID : PR346032017251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		40.00					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Partner	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. Peterson, Neil, , Mr.,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 34 Rockhouse Road			07 31 2017					
City Wilton	State CT	Zip Code 06897-1827	Transaction ID : PR348053417251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		38.48					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Director	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			120.15					
TOTAL This Period (last page this line numb	per only)							

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)						
11			for each category of the Detailed Summary Page		11a 13		11b	11c 15		12 16	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe address of any political committee	erson to so	for the	pur ntrib	pose of	soliciting	, con	tributio	ons
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Initi D'Agostino, Alexander, , Mr.,	ial) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 818 E Columbary Court				м м 07	1	D D 31	/ Y	20 ⁻	17	Y
	City Eagle	State ID	Zip Code 83616-7019	_				PR3480 eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>					38.46	6
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner		M	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	F	P/R Ded	ucti	on (\$19.:	23 Bi-We	eekly)		
B	Full Name of Individual (Last, First, Middle Initi Rocchi, Gerard, , Mr.,	ial) or Full O	Organization Name		Date of	F Bc	coint				
D.	Mailing Address 285 Drive South Broadway		Date of Receipt								
	City	State	Zip Code		Trans	acti	ion ID : I	PR35117	7251		
	Tarrytown	NY	10591-5338	_	Amount	t of	Each R	eceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С			<u> </u>		-			230.78	8
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Vice President		M	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	F	9/R Ded	uctio	on (\$115	5.39 Bi-W	/eekly	<i>י</i>)	
С.	Full Name of Individual (Last, First, Middle Initi Lebovits, Moshe, , Mr.,	ial) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 6 Israel Zupnick Drive Unit 201				07 ^M	1	31	JL	201	7	Y
	City Monroe	State NY	Zip Code 10950-8473				-	PR3531	-	riod	
	FEC ID number of contributing federal political committee.	С					,	, j		100.00	0
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		М	emo	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	F	P/R Ded	lucti	on (\$100	0.00 Mor	ithly)		
⊢	UBTOTAL of Receipts This Page (optional)					-	,	,		369.24	4
I T	OTAL This Period (last page this line number of	only)	····· •				_			-	_

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
New York Life Insurance	Company Politi	cal Action Committee									
Full Name of Individual (Last, First, M A. Zhang, Lucy, , Ms.,	1iddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 69 Fawn Hill Road			07 31 2017								
City Upper Saddle River	State NJ	Zip Code 07458-1518	Transaction ID : PR355594117251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.48								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Partner	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)								
Full Name of Individual (Last, First, M B. Wang, Xinfang, , Ms.,	fiddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 160 E 89th Street Apt	t. 5F		07 31 2017								
City	State	Zip Code	Transaction ID : PR355598717251								
New York		10128-2307	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		91.34								
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		639.38	P/R Deduction (\$91.34 Monthly)								
Full Name of Individual (Last, First, M Assad, Elizabeth, , Ms.,	1iddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4112 Ascot Lane		1	07 / D D / Y Y Y Y 07 31 2017								
City Houston	State TX	Zip Code 77092-8312	Transaction ID : PR356951617251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)								
SUBTOTAL of Receipts This Page (opt	ional)		159.82								
TOTAL This Period (last page this line	number only)										

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Concert only one) Image: The second secon				
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any peresented and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Comp	any Political Action Committee					
Full Name of Individual (Last, First, Middle In Colombo, Joseph, , Mr.,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 14 White Pine Lane		07 31 2017				
City	State Zip Code	Transaction ID : PR357655817251				
Poquott	NY 11733-3960	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	38.46				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
New York Life Insurance Company	Senior Partner	-				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	288.45	P/R Deduction (\$19.23 Bi-Weekly)				
Full Name of Individual (Last, First, Middle In B. Dries, Brett, , Mr.,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 25 Calthrop Drive		07 31 2017				
City	State Zip Code	Transaction ID : PR357658717251				
Bridgewater	MA 02324-2892	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Senior Partner	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼	-				
Other (specify) ▼	750.00	P/R Deduction (\$50.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle In Bauer, Elizabeth R., , Ms.,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 119 2nd Street Apt. 2F		07 31 2017				
City	State Zip Code	Transaction ID : PR357663117251				
Troy	NY 12180-4009	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	28.84				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
New York Life Insurance Company	Agent	_				
Receipt For:	Aggregate Year-to-Date ▼					
Other (specify)	201.88	P/R Deduction (\$28.84 Monthly)				
SUBTOTAL of Receipts This Page (optional)		167.30				
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)						
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	oany Polit	ical Action Committee							
Full Name of Individual (Last, First, Middle I Bopp, Kevin, , Mr.,	nitial) or Full C	Organization Name	Date of Receipt						
Mailing Address 18 Redwood Road			07 31 2017						
City	State	Zip Code	Transaction ID : PR358251617251						
Morris Township	NJ	07960-2610	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		36.00						
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item						
New York Life Insurance Company	Vic	e President							
Receipt For:	Aggregate	Year-to-Date V							
Primary General Other (specify) ▼		270.00	P/R Deduction (\$18.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. Rusert, James H., , Mr.,	nitial) or Full C	Organization Name	Date of Receipt						
Mailing Address 120 Colonial Circle			07 31 2017						
City	State	Zip Code	Transaction ID : PR36317251						
Tonawanda	NY	14150-5207	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		30.00						
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) ent	Memo Item						
Receipt For:	Aggregate	Year-to-Date V	1						
Primary General Other (specify) ▼		, 210.00	P/R Deduction (\$30.00 Monthly)						
Full Name of Individual (Last, First, Middle I C. Yin, Benjamin B., , Mr.,	nitial) or Full C	Drganization Name	Date of Receipt						
Mailing Address 5012 Audley Lane			07 31 Y Y Y Y Y 2017						
City	State	Zip Code	Transaction ID : PR366451217251						
Peachtree Corners	GA	30092-1787	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
New York Life Insurance Company	Age	ent							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)						
SUBTOTAL of Receipts This Page (optional)		•	316.00						
TOTAL This Period (last page this line numbe									

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
ILEIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
> New York Life Insurance Cor	npany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. Del Secolo, Michael, , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 5 Passaic Court			07 31 2017						
City	State	Zip Code	Transaction ID : PR371121417251						
Marlboro	NJ	07746-2604	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		125.00						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Vice President	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 403.50	P/R Deduction (\$18.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. Brill, Elizabeth, , Ms.,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 61 Stuart Place	07 31 Y Y Y Y Y 2017								
City	State NY	Zip Code	Transaction ID : PR371122817251						
Manhasset		11030-2619	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	FEC ID number of contributing federal political committee.								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President & Actuary	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		375.00	P/R Deduction (\$25.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. Cook, Alexander, , Mr.,	e Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 1510 Lexington Avenue Apt. PHE			07 31 / Y Y Y Y 2017						
City New York	State NY	Zip Code 10029-7149	Transaction ID : PR371504717251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		36.00						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Vice President	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00	P/R Deduction (\$18.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		211.00						
TOTAL This Period (last page this line num	ber only)								

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		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle I A. Brady Jr., Alphonso, , Mr.,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 6055 Lakeside Commons D Suite 300	rive		07 31 Y Y Y Y Y					
City Macon	State GA	Zip Code 31210-5791	Transaction ID : PR371506217251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		84.92					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 636.90	P/R Deduction (\$42.46 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I B. Rice, Scott, , Mr.,	Date of Receipt							
Mailing Address 17 North Gateway			07 31 / Y Y Y Y Y 2017					
City Toms River	State NJ	Zip Code 08753-6613	Transaction ID : PR371507717251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		27.24					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 204.30	P/R Deduction (\$13.62 Bi-Weekly)					
Full Name of Individual (Last, First, Middle I C. Goech, Guillermo J., , Mr.,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 11116 Woodley Avenue			07 / 07 / 2017					
City Granada Hills	State CA	Zip Code 91344-3806	Transaction ID : PR372163017251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)					
SUBTOTAL of Receipts This Page (optional)			142.16					
TOTAL This Period (last page this line numbe	er only)							

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
II LIVIIZED KEGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Con	npany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. Ashworth, Elaine, , Ms.,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 300 E 85th Street Apt. 140)4		M M / D D / Y Y Y Y 07 31 2017						
City New York	State NY	Zip Code 10028-4594	Transaction ID : PR37217251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)						
Full Name of Individual (Last, First, Middle B. Castellani, David, , Mr.,	e Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 29 Indian Mill Road			07 / D D / Y Y Y Y Y 2017						
City Cos Cob	State CT	Zip Code 06807-1315	Transaction ID : PR372176617251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.94						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nor Vice President	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. Godwin, Jacob, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 5511 Vista Way			07 31 / Y Y Y Y Y 2017						
City Casper	State WY	Zip Code 82601-6908	Transaction ID : PR372186917251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		115.38						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Partner	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 865.35	P/R Deduction (\$57.69 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional))		222.32						
TOTAL This Period (last page this line numb	per only)								

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			Use separate schedule(s)	(0	(check only one)						
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page				11b	11c	12		
	y information copied from such Reports and S for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)		duress of any political comm		Solicit CO		Julions		T COMMINIC		
	New York Life Insurance Comp	any Politi	cal Action Committe	е							
Α.	Full Name of Individual (Last, First, Middle In Koenig, Travis L., , Mr.,	itial) or Full O	Prganization Name		Date o	f Re	eceipt				
	Mailing Address 6870 W Tombstone Way				м м 07	1	D 31	D / Y	ү ү 2017	Y	
	City Tucson	State AZ	Zip Code 85743-1055						37217251 iis Period		
	FEC ID number of contributing federal political committee.	С							58.3	33	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent		М	emo	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 408.31		P/R Ded	lucti	on (\$58	.33 Montł	nly)		
в.	Full Name of Individual (Last, First, Middle In Facey, Dale, , Mr.,	itial) or Full O	organization Name		Date o	f Re	eceipt				
	Mailing Address 3304 Henri Court		Zip Code		07 / D D / Y Y Y Y Y 2017						
	City	State	-	Transaction ID : PR373583517251							
	Plano	TX	75023-5705		Amoun	t of	Each F	Receipt th	is Period		
	FEC ID number of contributing federal political committee.	С		38.48							
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President		М	emo	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60		P/R Ded	ucti	on (\$19	.24 Bi-We	ekly)		
С.	Full Name of Individual (Last, First, Middle In Gallina, Ronald, , Mr.,	itial) or Full O	Organization Name		Date o	f Re	eceipt				
	Mailing Address 64 Elderwood Dr. N				07 31 2017						
	City Saint James	State NY	Zip Code 11780-3434					Receipt th	7251 iis Period		
	FEC ID number of contributing federal political committee.	С					y :	9	41.0	67	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69		P/R Dec	lucti	ion (\$41	.67 Montl	hly)		
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			·· ►			, , , ,	y 	138.4	18	

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)					
			for each category of the Detailed Summary Page	×	11a 13	11		- H-	12 16	17
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson to so	for the	purpos	e of solic	iting co	ontribut	ions
\setminus	NAME OF COMMITTEE (In Full)									
	New York Life Insurance Compa	any Politi	cal Action Committee							
Α.	Full Name of Individual (Last, First, Middle Initi Brown, Wesley C., , Mr.,	al) or Full O	rganization Name		Date of	Recei	pt			
	Mailing Address 828 Ward St. E				м м 07	1	31 /		y y 2017	Y
	City Douglas	State GA	Zip Code 31533-0304	_			ID : PR3 ch Receip			
	FEC ID number of contributing federal political committee.	С			<u> </u>			,	30.0	00
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt		M	emo Ite	em			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	F	P/R Ded	uction	(\$30.00 M	lonthly))	
	Full Name of Individual (Last, First, Middle Initi Ku, Lily, , Ms.,	al) or Full O	rganization Name		Date of	Recei	pt			
	Mailing Address 7021 175th Street		07 31 2017							
	City	State	Zip Code		Trans	action	ID : PR37	752772	17251	_
	Fresh Meadows	NY	11365-3416	_	Amount	of Ea	ch Receip	ot this	Period	
	FEC ID number of contributing federal political committee.	С			<u> </u>			,	38.4	16
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) iior Partner		M	emo Ite	əm			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 519.21	P	P/R Ded	uction ((\$38.46 Bi	-Week	ly)	
	Full Name of Individual (Last, First, Middle Initi Vicent, Carlos, , Mr.,	al) or Full O	rganization Name		Date of	Recei	pt			
	Mailing Address 3324 Peachtree Road Northea Unit 1918				07 / D D / Y Y Y Y 2017					
	City Atlanta	State GA	Zip Code 30326-1480				ID:PR3			
	FEC ID number of contributing federal political committee.				, ,		,	38.4	18	
	Name of Employer (for Individual) New York Life Insurance Company	upation (for Individual) porate Vice President		M	emo Ite	əm				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	F	P/R Ded	uction	(\$19.24 B	i-Week	dy)	
s	UBTOTAL of Receipts This Page (optional)		•••••	- ·				,	106.9	94
т	OTAL This Period (last page this line number o	only)	••••••					7		

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FOR LINE NUMBER:

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Stat for commercial purposes, other than using the na								
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee						
Α.	Full Name of Individual (Last, First, Middle Initial Reeves, Susan K., , Ms., Mailing Address 21482 Montbury Drive			Date of Receipt					
	City Lake Forest	State CA	Zip Code 92630-6551	Transaction ID : PR37617251					
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 60.00					
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item					
	New York Life Insurance Company	Age	ent						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$60.00 Monthly)					
B.	Full Name of Individual (Last, First, Middle Initial Espinoza, Jon, , Mr.,) or Full O	rganization Name	Date of Receipt					
	Mailing Address 1611 Vista De Colinas Drive SE			07 31 2017					
	City Rio Rancho	State NM	Zip Code 87124-3070	Transaction ID : PR377436217251					
			87124-3070	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		38.46					
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initial Dallo, Vincent, , Mr.,) or Full O	organization Name	Date of Receipt					
	Mailing Address 53 Daunton Drive			07 / D D / Y Y Y Y 07 31 2017					
	City	State NY	Zip Code	Transaction ID : PR377441017251					
	Rochester		14624-4231	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	41.67							
	Name of Employer (for Individual) New York Life Insurance Company	Occi Agei	upation (for Individual) nt	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 233.34	P/R Deduction (\$41.67 Monthly)					
s	UBTOTAL of Receipts This Page (optional)		•••••	140.13					
т	OTAL This Period (last page this line number on	ly)	•						

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ITE	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: Markov Mar				
	y information copied from such Reports and Sta for commercial purposes, other than using the n							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compai	ny Politi	cal Action Committee					
Α.	Full Name of Individual (Last, First, Middle Initia Tucker, Charles A., , Mr.,	l) or Full O	rganization Name	Date of Receipt				
	Mailing Address 6113 E Laurel Lane			07 31 Y Y Y Y 07 31 2017				
	City	State	Zip Code	Transaction ID : PR383276317251				
	Scottsdale	AZ	85254-4960	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		150.00				
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item				
	New York Life Insurance Company	Age	nt					
	Receipt For:	Aggregate	Year-to-Date V	D/D Deduction (\$450.00 Monthly)				
	Other (specify) V		1050.00	P/R Deduction (\$150.00 Monthly)				
	Full Name of Individual (Last, First, Middle Initia Wilcox, Michael, , Mr.,	l) or Full O	rganization Name	Date of Receipt				
	Mailing Address 105 Alderwood Hill			07 31 2017				
	City	State	Zip Code	Transaction ID : PR383309217251				
	Sandy Springs	GA	30328-2548	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		40.00				
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		300.00	P/R Deduction (\$20.00 Bi-Weekly)				
	Full Name of Individual (Last, First, Middle Initia Farina, Salvatore, , Mr.,	l) or Full O	rganization Name	Date of Receipt				
	Mailing Address Pobox 770487			M M / D D / Y Y Y Y 07 31 2017				
	City	State	Zip Code	Transaction ID : PR38517251				
	Ocala	FL	34477-0487	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		230.78				
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item				
	New York Life Insurance Company	Seni	ior Vice President					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)				
S	JBTOTAL of Receipts This Page (optional)		▶	420.78				
т	OTAL This Period (last page this line number or	ıly)	•••••					

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ITEMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one)
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) New York Life Insurance Con	npany Politi	cal Action Committee	
Full Name of Individual (Last, First, Middle A. Craig, Brian, , Mr.,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 5825 Autumnwood Drive			07 31 2017
City Billings	State MT	Zip Code 59106-9707	Transaction ID : PR397010117251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		153.84
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 634.71	P/R Deduction (\$38.47 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. Pomerantz, Matthew N., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 240 E 28th Street Apt. 18			07 31 2017
City New York	State NY	Zip Code 10016-8519	Transaction ID : PR397039717251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	supation (for Individual) ent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)
Full Name of Individual (Last, First, Middle Desiderato, Donald, , Mr.,	Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 8 Wyndham Lane			07 31 2017
City Burlington	State CT	Zip Code 06013-1634	Transaction ID : PR397781617251
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 38.48
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Vice President	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional))		233.99
TOTAL This Period (last page this line num	per only)		

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)				
II EIVILED RECEIFIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1				
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	cal Action Committee					
Full Name of Individual (Last, First, Mido A. Hendry, Thomas A., , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 1 Cooks Corner			07 31 2017				
City Plainsboro	State NJ	Zip Code 08536-2557	Transaction ID : PR397841817251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		76.94				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Vice President & Treasurer	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 295.41	P/R Deduction (\$38.47 Bi-Weekly)				
Full Name of Individual (Last, First, Mide B. Silvestri, Piero V., , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 808 Preston Road			07 31 2017				
City East Meadow	State NY	Zip Code 11554-4530	Transaction ID : PR40017251				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer (for Individual) New York Life Insurance Company	Occ	upation (for Individual) ent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)				
Full Name of Individual (Last, First, Mido C. Walsh, Simon, , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 11 North Court			07 / D D / Y Y Y Y 2017				
City Port Washington	State NY	Zip Code 11050-3401	Transaction ID : PR401290117251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		76.94				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 331.41	P/R Deduction (\$18.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (option	al)		253.88				
TOTAL This Period (last page this line nu	mber only)						

Detailed Summary Page Image 111 a 11 b 11 c 12 13 14 15 16 15 16 13 14 15 16 15 16 13 14 15 16 15	SCHEDULE A (FEC Form 3 TEMIZED RECEIPTS	X) Use separate schedu for each category of			
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF CAUNTTEE (in Fust, Middle Initial) or Full Organization Name Fill Name of Individual (Last, First, Middle Initial) or Full Organization Name Fill Name of Individual (Last, First, Middle Initial) or Full Organization Name Fill Name of Individual (Last, First, Middle Initial) or Full Organization Name Fill Name of Individual (Last, First, Middle Initial) or Full Organization Name Fill Name of Individual (Last, First, Middle Initial) or Full Organization Name State of Individual (Last, First, Middle Initial) or Full Organization Name State of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name City Full			Page 11a 11b 11c 12		
New York Life Insurance Company Political Action Committee Full Rame of Individual (Last, First, Middle Initial) or Full Organization Name A Fitzgerald, James, Mr., Maling Address 124 Woodbine Circle City New York Life Insurance Company FEC ID number of contributing tedral political committee. Name of Employer (for Individual) New York Life Insurance Company Maning Address 6237 Overbrook Lane City Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Robinson, Thomas, Mr., Maling Address 6237 Overbrook Lane City Mame of Employer (for Individual) New York Life Insurance Company Aggregate Year-to-Date ▼ Primary Ganeral City State Name of Employer (for Individual) Occupation (for Individual) New York Life Insurance Company Aggregate Year-to-Date ▼ Pimary Ganeral Occupation (for Individual) New York Life Insurance Company Aggregate Year-to-Date ▼ Pimary Ganeral Operation Name Older (specify) ▼ State Zip Code Site <t< th=""><th></th><th></th><th></th></t<>					
A. Fitzgeriald, James, Mr., Date of Receipt Mailing Address 124 Woodbine Circle 07374-1757 City Name of Employer (for Individual) Occupation (for Individual) New York Ute Insurance Company Aggregate Year-to-Date ¥ PR Deduction (\$18.00 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt City State Zip Code Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mis Period City 210 Code 70 ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° °		mpany Political Action Comn	nittee		
City State Zip Code Num O'974-1757 Transaction ID: PR402873617251 FEC ID number of contributing C Amount of Each Receipt this Period State C Amount of Each Receipt this Period Managing Director Aggregate Year-to-Date ▼ P/R Deduction (\$18.00 Bi-Weakly) Full Name of Individual (Last, Erist, Middle Initial) or Full Organization Name Date of Receipt this Period City State Zip Code Houston TX Zip Code Nume of Individual (Last, Erist, Middle Initial) or Full Organization Name Date of Receipt this Period City State Zip Code Houston TX Zip Code TX Zip Code Transaction ID: PR40358617251 Amount of Each Receipt this Period Gr 31 FeC ID number of contributing tederal political committee. C Transaction ID: PR40358617251 Name of Individual (Last, First, Middle Initial) or Full Organization Name P/R Deduction (\$41.67 Monthly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt City General Qif 2017 Bridgewater NJ		lle Initial) or Full Organization Name	Date of Receipt		
New Providence NJ 07974-1757 Amount of Each Receipt this Period FEC ID number of contributing federal policid committee. C 38.00 Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Druber (specify) ▼ C 38.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Aggregate Year-to-Date ▼ P/R Deduction (\$18.00 Bi-Weakly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Robinson, Thomas, , Mr., Mailing Address 6237 Overbrook Lane C Transaction ID : PR03586412251 City State Zip Code Transaction ID : PR03586412251 Name of Employer (for Individual) New York Life Insurance Company Occupation (for Individual) Agent P/R Deduction (\$41.67 Monthly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt 017 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt 0217 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt 017 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt 017 Full Name of Individual (Committee Q		State Zin Code	07 31 2017		
FEC ID number of contributing federal political committee. G 36.00 Name of Employer (for individual) New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$18.00 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Rebinson, Thomas, , Mr., Date of Receipt Mailing Address 6237 Overbrook Lane C City State Z1p Code Name of Employer (for Individual) Aggregate Year-to-Date ▼ Date of Receipt Name of Employer (for Individual) State Z1p Code Name of Employer (for Individual) C Aggregate Year-to-Date ▼ Name of Employer (for Individual) Occupation (for Individual) Memo Item New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Olson, Mark D., , Mr., Mailing Address 34 Stryker Court C Mailing Address 34 Stryker Court C Memo Item Name of Employer (for Individual) Occupation (for Individual) Aggregate Year-to-Date ▼ Name of Employer (for Individual) Occupation (for Individual) Memo	2				
New Yok Life Insurance Company Managing Director Receipt For:	8	C			
Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$18.00 Bi-Weekly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Robinson, Thomas, , Mr., Mailing Address 6237 Overbrook Lane Date of Receipt City State Zip Code Houston Tx 77057-4411 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Primary General Occupation (for Individual) Aggregate Year-to-Date P/R Deduction (\$41.67 Monthly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Other (specify) ▼ State Zip Code Other (specify) ▼ State Zip Code Other (specify) ▼ General Or / 31 / 2017 Transaction ID : PR4035895617251 Amount of Each Receipt this Period FUI Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Olson, Mark D., , Mr., Maggregate			Memo Item		
3. Robinson, Thomas, , Mr., Mailing Address 6237 Overbrook Lane Date of Receipt City State Zip Code Houston TX 77057-4411 FEC ID number of contributing C Memo Item Mailing Address 6237 Overbrook Lane C Manual of Each Receipt His Period Mailing Address 6237 Overbrook Life Insurance Company Occupation (for Individual) Agent Memo Item Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Other (specify) ▼ State Zip Code Mailing Address 34 Stryker Court 08007-1639 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Agent Receipt For: NJ 08007-1639 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Agent Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) P/R Deduction (\$41.67 Monthly) Name of Employer (for Individual) Agent Receipt For: P/R Deduction (\$41.67 Mo	Receipt For:	Aggregate Year-to-Date ▼			
City State Zip Code Houston Tx 77057-4411 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Name of Employer (for Individual) New York Life Insurance Company Occupation (for Individual) Agent Memo Item Receipt For: Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) City State Zip Code Mailing Address 34 Stryker Court State Zip Code City State Zip Code Bridgewater NJ 08807-1639 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Agent Occupation (for Individual) Agent Amount of Each Receipt Mailing Address 34 Stryker Court C Memo Item Mount of Each Receipt Ins Period FEC ID number of contributing federal political committee. C Memo Item 41.67 Name of Employer (tor Individual) New York Life Insurance Company Aggregate Year-to-Date ▼ Primary Memo Item Name of Employer (tor Individual) New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) Subtrottal of Receipts This Page (optional)	B. Robinson, Thomas, , Mr.,	lle Initial) or Full Organization Name	Date of Receipt		
Houston TX 77057-4411 Tainsaturburg receipt inside the receipt insis receipt inside the	Mailing Address 6237 Overbrook Lane				
FEC ID number of contributing federal political committee. C 41.67 Name of Employer (for Individual) New York Life Insurance Company Occupation (for Individual) Agent Memo Item Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt City State Zip Code Bridgewater NJ 08807-1639 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) New York Life Insurance Company Occupation (for Individual) Agent Neme of Employer (for Individual) New York Life Insurance Company Occupation (for Individual) Agent Receipt For: Primary General Other (specify) Occupation (for Individual) Agent SUBTOTAL of Receipts This Page (optional)					
New York Life Insurance Company Agent Agent Agent Primary General Other (specify) Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Olson, Mark D., , Mr., Mailing Address 34 Stryker Court City Bridgewater FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Occupation (for Individual) New York Life Insurance Company Aggregate Year-to-Date ▼ Primary General Other (specify) Aggregate Year-to-Date ▼ Primary General Other (specify) Aggregate Year-to-Date ▼ Primary General Other (specify) Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) 119.34	8	С			
Primary General Other (specify) ▼ 291.69 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Olson, Mark D., , Mr., Mailing Address 34 Stryker Court Date of Receipt City State Zip Code Bridgewater NJ 08807-1639 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) New York Life Insurance Company Aggregate Year-to-Date ▼ Primary General 291.69 Other (specify) Aggregate Year-to-Date ▼ Primary General 291.69 Other (specify) Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) SUBTOTAL of Receipts This Page (optional) 119.34	Name of Employer (for Individual) New York Life Insurance Company		Memo Item		
C. Olson, Mark D., , Mr., Date of Receipt Mailing Address 34 Stryker Court 07 31 2017 City State Zip Code 08807-1639 Transaction ID : PR403589617251 Bridgewater NJ 08807-1639 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 41.67 Name of Employer (for Individual) Occupation (for Individual) Agent New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) SUBTOTAL of Receipts This Page (optional). 119.34	Primary General		P/R Deduction (\$41.67 Monthly)		
City State Zip Code Transaction ID : PR403589617251 Bridgewater NJ 08807-1639 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 41.67 Name of Employer (for Individual) Occupation (for Individual) Memo Item New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) SUBTOTAL of Receipts This Page (optional)		lle Initial) or Full Organization Name	Date of Receipt		
Bridgewater NJ 08807-1639 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 41.67 Name of Employer (for Individual) Occupation (for Individual) Memo Item New York Life Insurance Company Aggregate Year-to-Date ▼ P/R Deduction (\$41.67 Monthly) Primary General 291.69 P/R Deduction (\$41.67 Monthly) SUBTOTAL of Receipts This Page (optional)					
federal political committee. 41.67 Name of Employer (for Individual) Occupation (for Individual) New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 291.69 SUBTOTAL of Receipts This Page (optional)	-				
New York Life Insurance Company Agent Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 291.69 SUBTOTAL of Receipts This Page (optional)		C	41.67		
Primary General Other (specify) 291.69 SUBTOTAL of Receipts This Page (optional)	New York Life Insurance Company		Memo Item		
	Primary General				
		·			

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)				
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee					
Full Name of Individual (Last, First, Middle I A. Gagliano, Cara-Anne, , Ms.,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 27 Inwood Circle			07 31 / Y Y Y Y 07 31 2017				
City Chatham	State NJ	Zip Code 07928-1807	Transaction ID : PR403628217251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.48				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Vice President	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I B. Peterson, Joseph, , Mr.,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 9605 W 149th Street			07 / D D / Y Y Y Y 07 31 2017				
City Overland Park	State KS	Zip Code 66221-8200	Transaction ID : PR403628517251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.48				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)				
Full Name of Individual (Last, First, Middle I Bain, Karen, , Ms. ,	nitial) or Full O	rganization Name	Date of Receipt				
Mailing Address 830 Monroe Street #5E	0		M M / D D / Y Y Y Y 07 31 2017				
City Hoboken	State NJ	Zip Code 07030-6466	Transaction ID : PR404128617251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		36.00				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00	P/R Deduction (\$18.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			112.96				
TOTAL This Period (last page this line number	er only)						

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ★ 11a 11b 13 14 15 16 17
	y information copied from such Reports and State for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) New York Life Insurance Compan	ame and a	address of any political committee	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Covell, Jennifer, , Ms.,	-		Data of Dessist
Α.	Mailing Address 689 Myrtle Avenue			Date of Receipt 07 31 2017
	1F City Brooklyn	State NY	Zip Code 11205-3984	Transaction ID : PR405755917251
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 38.48
	Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Cor	upation (for Individual) porate Vice President	Memo Item
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 215.54	P/R Deduction (\$13.62 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initial Wadsworth, Richard A., , Mr.,) or Full C	Organization Name	Date of Receipt
	Mailing Address 10520 Eastwood Drive	Chata	Zie Oode	07 31 Y Y Y Y Y 07 31 2017
	City Bradenton	State FL	Zip Code 34211-8472	Transaction ID : PR40617251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)
C.	Full Name of Individual (Last, First, Middle Initial Flaum, Alison J., , Ms.,) or Full C	organization Name	Date of Receipt
	Mailing Address PO Box 12108			07 31 2017
	City Austin	State TX	Zip Code 78711-2108	Transaction ID : PR40917251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Age		Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	P/R Deduction (\$50.00 Monthly)
s	UBTOTAL of Receipts This Page (optional)		>	138.48
т	OTAL This Period (last page this line number onl	y)	•	

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee	
A.	Full Name of Individual (Last, First, Middle Initia Donnelly, Kathleen, , Ms.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 47 Southview Circle	1 -		07 / D D / Y Y Y Y 2017
	City Lake Grove	State NY	Zip Code 11755-2244	Transaction ID : PR41017251
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)
B.	Full Name of Individual (Last, First, Middle Initia Wildin, Michellen, , Ms.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 101 17th Avenue North	State	Zip Code	07 / D D / Y Y Y Y Y 2017
	Saint Petersburg	FL	33704-4524	Transaction ID : PR414472217251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.48
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)
C.		l) or Full O	rganization Name	Date of Receipt
	Mailing Address 1700 Cedar Springs Road	State	Zip Code	07 31 2017
	City Dallas	TX	75202-1203	Transaction ID : PR416071617251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.94
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	346.20
т	OTAL This Period (last page this line number on	ly)	••••••	

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
> New York Life Insurance Com	pany Politi	cal Action Committee					
Full Name of Individual (Last, First, Middle Mendelsohn, Michael, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 3316 Fayette Drive			07 31 Y Y Y Y Y 2017				
City Virginia Beach	State VA	Zip Code 23456-7608	Transaction ID : PR416076117251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		38.48				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) Iner	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. Kavanagh, Brion P., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 22 Nottingham Drive			07 31 2017				
City	State NJ	Zip Code	Transaction ID : PR419921217251				
Medford FEC ID number of contributing		08055-8533	Amount of Each Receipt this Period				
federal political committee.	C		41.67				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼					
Other (specify) ▼		, 291.69	P/R Deduction (\$41.67 Monthly)				
Full Name of Individual (Last, First, Middle Delk, Gerald K. , , Mr. ,	Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 10 W Kincaid Drive			M M / D D / Y Y Y Y 07 31 2017				
City West Windsor	State NJ	Zip Code 08550-3020	Transaction ID : PR421353517251				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)				
SUBTOTAL of Receipts This Page (optional).			121.82				
TOTAL This Period (last page this line number							

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)				
ILLIVILLED KEUEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Politi	cal Action Committee					
Full Name of Individual (Last, First, Middle Hermann, Steven A., , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 243 Charleston Drive Uni	t 3A		07 31 2017				
City Lake Ozark	State MO	Zip Code 65049-5561	Transaction ID : PR422056617251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		41.67				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)				
Full Name of Individual (Last, First, Middle B. Harte, Francis, , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 2 Old Post Lane							
City Saint James	State NY	Zip Code 11780-4237	Transaction ID : PR423514517251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		36.00				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Managing Director	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00	P/R Deduction (\$18.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. Nair, Dinesh, , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 9 Winterberry Court	ing Address 9 Winterberry Court						
City Whitehouse Station	State NJ	Zip Code 08889-3375	Transaction ID : PR423524517251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		36.00				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) haging Director	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00	P/R Deduction (\$18.00 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optiona	l)		113.67				
TOTAL This Period (last page this line num	ber only)						

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ITEMIZED RECEIPTS			Use separate schedule(s)	(checl	(check only one)					
	1713		for each category of the Detailed Summary Page	X	H		11b	11c	12	_
Any information copied or for commercial purpo	from such Reports and Sta ses, other than using the r	Itements ma name and ac	y not be sold or used by any p ddress of any political committee	erson for	the p tit cont	ourp	14 lose of utions f	15 soliciting rom suc	d contribu	tions ee.
NAME OF COMMIT		ny Politic	cal Action Committee							
Full Name of Individu A. Reed, Eric, , Mr.,	ual (Last, First, Middle Initia	al) or Full Or	rganization Name	Da	ate of	Red	ceipt			
Mailing Address 961	3 Peach Tree Lane			N	07	/	31	/ Y	ү ү 2017	Y
City Rowlett		State TX	Zip Code 75089-8504						33017251 nis Period	
FEC ID number of c federal political comr	0	С			_		y		125.	00
Name of Employer (in New York Life Insuration	,	Occu Ager	pation (for Individual) nt		Me	mo	Item			
Receipt For: Primary Other (specify)	General ▼	Aggregate	Year-to-Date ▼ 750.00	P/R	Dedu	ictio	on (\$128	5.00 Mor	ithly)	
Full Name of Individu B. Freeman, Lisa,	ual (Last, First, Middle Initia , Ms.,	al) or Full Or	ganization Name	Da	ate of	Red	ceipt			
Mailing Address 185 29th Avenue North						/	31	/ Y	2017	Y
City St. Petersburg		State FL	Zip Code 33704-2940						19717251 his Period	
FEC ID number of c federal political comr	0	C					,		36.	
Name of Employer (New York Life Insurar	ior Individual) nce Company		ipation (for Individual) President	Memo Item						
Receipt For: Primary Other (specify)	General ▼	Aggregate	P/R	Dedu	ctio	n (\$18.	00 Bi-We	eekly)		
c. Millay, Edward		al) or Full Or	ganization Name	Da	ate of	Red	ceipt			
	Mailing Address 700 Grove Street Unit 8M City State Zip Code						31		2017 20317251	
Jersey City		NJ	07310-1272						nis Period	
FEC ID number of c federal political comr	0	C					,	,	38.	48
Name of Employer (1 New York Life Insura	,	Occu Vice		Me	mo	ltem				
Receipt For: Primary Other (specify)	General	Aggregate	P/R	Dedu	uctio	on (\$19.	.24 Bi-W	eekly)		
SUBTOTAL of Receipt	s This Page (optional)		••••••				,	. ,	199.	48
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)				
			for each category of the Detailed Summary Page	× 11a	11b	11c	12	17
Any inform or for com	nation copied from such Reports and Sta imercial purposes, other than using the n	ements ma ame and ac	y not be sold or used by any p ddress of any political committee	erson for the	purpose o	f soliciting	contribut	ions
	OF COMMITTEE (In Full)							
New	York Life Insurance Compar	ny Politio	cal Action Committee					
	me of Individual (Last, First, Middle Initia Irds, Jennifer, , Ms.,) or Full Or	ganization Name	Date o	of Receipt			
	Address 6608 West Grandview Trail			07			2017	Y
City		State	Zip Code	Tran	saction ID	: PR42473	39617251	_
Maran	a	AZ	85658-4439	Amoun	t of Each	Receipt th	is Period	
	o number of contributing political committee.	С			-		36.0)0
Name	of Employer (for Individual)	Occu	pation (for Individual)	N	lemo Item			
	ork Life Insurance Company	Vice	President					
Receip	rimary General	Aggregate `	Year-to-Date 🔻					
	Other (specify) ▼		270.00	P/R Dec	duction (\$18	3.00 Bi-We	ekly)	
Full Na	me of Individual (Last, First, Middle Initia) or Full Or	ganization Name					
	nas, Omari, , Mr.,			Date o	of Receipt			
	Address 1572 Ormond Avenue	07	31		2017	Y		
City Camde	2n	State NJ	Zip Code 08103-2941		saction ID It of Each			
FEC ID) number of contributing political committee.	С					70.0)0
	of Employer (for Individual) ork Life Insurance Company	Occu Part	ipation (for Individual)		lemo Item			
Receip	t For:		Year-to-Date V		—			
	rimary General	Aggregate		P/R Deduction (\$35.00 Bi-Weekly)				
	Other (specify) V		, 525.00					
	me of Individual (Last, First, Middle Initia cy, Timothy, , Mr.,) or Full Or	ganization Name	Date o	of Receipt			
	Address 965 N Third Avenue	1		07	3		2017	Y
City Saint (Charles	State IL	Zip Code 60174-1217		saction ID			
			00174-1217	Amoun	t of Each	Receipt th	is Period	
	o number of contributing political committee.	C				y	76.9	94
	of Employer (for Individual) ork Life Insurance Company	Occu Direc	pation (for Individual) tor	N	lemo Item			
Receip		Aggregate `	Year-to-Date ▼					
	Primary General Other (specify)		327.06	P/R Dec	duction (\$1	∂.24 Bi-W€	eekly)	
SUBTOT	AL of Receipts This Page (optional)						182.9)4
	his Period (last page this line number on							

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		Use separate schedule(s)	(check only one)				
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mathematic mathematical statements and a	I ay not be sold or used by any p Iddress of any political committe	person for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) New York Life Insurance Com	ipany Politi	cal Action Committee					
Full Name of Individual (Last, First, Middle A. O'Donnell, Alison, , Ms.,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 1009 Drive Street Southeas	st		07 31 / Y Y Y Y 2017				
City Washington	State DC	Zip Code 20003	Transaction ID : PR428028417251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		38.48				
Name of Employer (for Individual) New York Life Insurance Company							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. Vatore, George, , Mr.,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 72-16 267th Street	07 31 2017						
City Floral Park	State NY	Zip Code 11004-1022	Transaction ID : PR42817251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	ů l						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Partner	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. Duarte, Deborah, , Ms.,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 1 Wayne Valley Road			07 / D D / Y Y Y Y 2017				
City Armonk	State NY	Zip Code 10504-1233	Transaction ID : PR429553217251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.48				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional).			126.96				
TOTAL This Period (last page this line numb	er only)						

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. Ball, Aaron, , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 6200 Bridgepoint Parkway Suite 400			07 / D D / Y Y Y Y Y 07 31 2017						
City Austin	State TX	Zip Code 78730-5000	Transaction ID : PR430589717251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.48						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. Curtin, Matthew, , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 29 Priscilla Avenue			07 / D D / Y Y Y Y Y 2017						
City Yonkers	State NY	Zip Code 10710-3605	Transaction ID : PR430591817251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.48						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) sociate General Counsel	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)						
Full Name of Individual (Last, First, Middle Williamson, Casey D., , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2610 Emmett Drive Apt. D1			07 / D D / Y Y Y Y Y 31 2017						
City Tifton	State GA	Zip Code 31794-2763	Transaction ID : PR431274117251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		100.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$100.00 Monthly)						
SUBTOTAL of Receipts This Page (optional).			176.96						
TOTAL This Period (last page this line number	er only)								

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FOR LINE NUMBER:

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ITE	MIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17
	information copied from such Reports and Stat r commercial purposes, other than using the n			erson for the purpose of soliciting contributions
\	AME OF COMMITTEE (In Full) Jew York Life Insurance Compar	ny Politie	cal Action Committee	
A	ull Name of Individual (Last, First, Middle Initia Snodgrass, David H., , Mr., ailing Address 2904 S Alamo Road	l) or Full O	rganization Name	Date of Receipt
IVI	annig Address 2904 S Alamo Road			07 31 2017
	ity	State	Zip Code	Transaction ID : PR436098817251
	dinburg	ТХ	78542-4445	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		41.67
N	ame of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item
	ew York Life Insurance Company	Age	nt	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)
	ull Name of Individual (Last, First, Middle Initia DelGreco, Phylliss, , Ms.,	l) or Full O	rganization Name	Date of Receipt
	ailing Address 22 Oak Crest Road	1		07 31 2017
	ity	State	Zip Code	Transaction ID : PR436103217251
	/est Orange	NJ	07052-1212	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		36.00
N	ame of Employer (for Individual) ew York Life Insurance Company		upation (for Individual) & Associate General Counsel	Memo Item
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 270.00	P/R Deduction (\$18.00 Bi-Weekly)
	ull Name of Individual (Last, First, Middle Initia Glynn, James N., , Mr.,	l) or Full O	rganization Name	Date of Receipt
_	ailing Address 9301 S Hoyne Avenue	-		07 / D D / Y Y Y Y 2017
	ity Chicago	State IL	Zip Code 60643-6306	Transaction ID : PR4380317251
	5		00043-0300	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		100.00
	ame of Employer (for Individual)		upation (for Individual)	Memo Item
	ew York Life Insurance Company eceipt For:	Ager		
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)
SU	STOTAL of Receipts This Page (optional)			177.67
тот	TAL This Period (last page this line number on	ly)		

FOR LINE NUMBER:

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ITEMI	ZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)				
				son for the purpose of soliciting contributions to solicit contributions from such committee.				
\	e of committee (in full) w York Life Insurance Compar	y Politio	cal Action Committee					
A. Pati	Name of Individual (Last, First, Middle Initial ience, Robert, , Mr., ng Address 87 Laurel Avenue) or Full O	organization Name	Date of Receipt				
City Rose	eland	State NJ	Zip Code 07068-1424	Transaction ID : PR440408817251 Amount of Each Receipt this Period				
	ID number of contributing al political committee.	С		36.00				
New		Vice	upation (for Individual) e President Year-to-Date ▼	Memo Item				
	Primary General Other (specify) ▼		270.00	P/R Deduction (\$18.00 Bi-Weekly)				
B. Shi	Name of Individual (Last, First, Middle Initial Iton, Lillith, , Ms.,) or Full O	organization Name	Date of Receipt				
City	ng Address 381 Mangels Avenue	State	Zip Code	07 31 2017 Transaction ID : PR440409917251				
San	Francisco	CA	94127-2409	Amount of Each Receipt this Period				
	ID number of contributing al political committee.	С		38.48				
New `	e of Employer (for Individual) York Life Insurance Company		upation (for Individual) sociate General Counsel	Memo Item				
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)				
C. Po	Name of Individual (Last, First, Middle Initial rter, Timothy, , Mr.,) or Full O	rganization Name	Date of Receipt				
	ng Address 33 Windsor Green	1		07 / 07 / 07 / 07 / 07 / 07 / 07 / 07 /				
City Gree	enland	State NH	Zip Code 03840-2419	Transaction ID : PR440810217251 Amount of Each Receipt this Period				
	ID number of contributing al political committee.	С		38.48				
New	e of Employer (for Individual) York Life Insurance Company	Occu Direc	upation (for Individual) ctor	Memo Item				
Rece	ipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)				
SUBTO	OTAL of Receipts This Page (optional)		•	112.96				
TOTAL	This Period (last page this line number on	y)	•					

Use separate schedule(s)

FOR LINE NUMBER:

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IТ	EMIZED RECEIPTS		Use separate schedule(s)	(ch	(check only one)						
11			for each category of the Detailed Summary Page		4 11a 13		11b	11c		2 6 [17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	L ay not be sold or used by any pe ddress of any political committee	erson to s	for the	purp ntrib	oose of	soliciting	conti	ributic	ons
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	cal Action Committee								
A.	Full Name of Individual (Last, First, Middle Init Harrington, Scott, , Mr.,	tial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 15 Oak Place				07	1	D D 31	/ Y	y 201	ΥΥΥ 7	
	City Bernardsville	State NJ	Zip Code 07924-1806	_				PR4408 [°] eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>					50.00)
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ector		М	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.12		P/R Ded	uctio	on (\$19.:	24 Bi-We	eekly)		
D	Full Name of Individual (Last, First, Middle Init Klimmeck, King, , Mr.,	tial) or Full O	rganization Name		Data a	: Do	opint				
D.	Mailing Address 316 N Ashland Avenue				Date of	/	2000 D D D 31	/ Y	2017		
	City	State	Zip Code		Trans	acti	on ID : I	PR44082	236172	251	_
	Park Ridge	IL	60068-3532	_	Amoun	t of	Each R	eceipt th	is Per	riod	
	FEC ID number of contributing federal political committee.	С			<u> </u>		.	- 7		38.48	}
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Director		М	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	F	P/R Ded	uctio	on (\$19.2	24 Bi-We	ekly)		
С.	Full Name of Individual (Last, First, Middle Init Miller, Richard, , Mr.,	tial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 6 Joann Court				07	1	D D D 31	JL	201	7	
	City Randolph	State NJ	Zip Code 07869-2218	-			-	PR44082 eceipt th	-	-	
	FEC ID number of contributing federal political committee.	С						j		36.00)
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Director		М	emc	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00		P/R Ded	ucti	on (\$18.	00 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)		•				y		1	24.48	}
T	OTAL This Period (last page this line number	only)	•				-			- 10	_

FOR LINE NUMBER:

PAGE 173 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Concert only one) Image: The second secon	
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	ny Politi	cal Action Committee		
Α.	Full Name of Individual (Last, First, Middle Initial) Lehneis, Kirk, , Mr.,) or Full O	rganization Name	Date of Receipt	
	Mailing Address 21 Benenson Drive	State	Zin Codo	07 / D D / Y Y Y Y 07 31 2017	
	City Cos Cob	State CT	Zip Code 06807-1401	Transaction ID : PR440831317251 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		38.48	
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Managing Director	Memo Item	
	Receipt For:	Primary General Aggregate Teal-to-Date V			
в.	Full Name of Individual (Last, First, Middle Initial) Hanley, Dale, , Mr.,) or Full O	rganization Name	Date of Receipt	
	Mailing Address 4 Bon Mar Road			07 31 2017	
	City Pelham	State NY	Zip Code 10803-2918	Transaction ID : PR440848217251 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		36.00	
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Director	Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 270.00	P/R Deduction (\$18.00 Bi-Weekly)	
C.	Full Name of Individual (Last, First, Middle Initial Hung, Yie-Hsin, , Ms.,) or Full O	rganization Name	Date of Receipt	
	Mailing Address 55 Central Park W #6D	04-4-	7.0.0.1	07 31 2017	
	City New York	State NY	Zip Code 10023-6076	Transaction ID : PR440849517251 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		36.00	
New York Life Insurance Company			upation (for Individual) 9, CEO - NYLIM	Memo Item	
	Receipt For: // Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00	P/R Deduction (\$18.00 Bi-Weekly)	
s	UBTOTAL of Receipts This Page (optional)		•••••	110.48	
т	OTAL This Period (last page this line number onl	y)	•		

SCHEDULE A (FEC Form	3X)	FOR LINE NUMBER: PAGE 174 OF 352
ITEMIZED RECEIPTS	Use separate for each categ	bry of the
	Detailed Sumr	13 14 15 16 17
Any information copied from such Reports	and Statements may not be sold or	used by any person for the purpose of soliciting contributions
\	ing the name and address of any po	tical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) New York Life Insurance C	ompany Political Action C	ommittee
Full Name of Individual (Last, First, Mid A. Hill, Alison, , Ms.,	dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 261 Ryder Road		07 / D D / Y Y Y Y 2017
City Manhasset	State Zip Code NY 11030-242	Transaction ID : PR440855317251
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 38.48
Name of Employer (for Individual)	Occupation (for Indivi	lual) Memo Item
New York Life Insurance Company Receipt For: Primary General Other (specify) ▼	Managing Director Aggregate Year-to-Date ▼	P/R Deduction (\$19.24 Bi-Weekly)
Full Name of Individual (Last, First, Mid Laskar, David, , Mr.,		Date of Receipt
Mailing Address 1017 Bergen Boulevar		07 / D D / Y Y Y Y 2017
City Fort Lee	State Zip Code NJ 07024-1503	Transaction ID : PR440888217251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	46.20
Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Indivi Director	lual) Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$19.24 Bi-Weekly)
Full Name of Individual (Last, First, Mid C. Meigs, Bradford L., , Mr.,	Idle Initial) or Full Organization Name	Date of Receipt
Mailing Address 3 Harvest Lane		07 / D D / Y Y Y Y 31 2017
City Hingham	StateZip CodeMA02043-4233	Transaction ID : PR4417251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Indivi Agent	lual) Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	P/R Deduction (\$60.00 Monthly)
SUBTOTAL of Receipts This Page (optic	nal)	144.68

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using th	Statements m	ay not be sold or used by any p address of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Comp	oany Politi	cal Action Committee					
Full Name of Individual (Last, First, Middle Ir AHeine, Kevin, , Mr.,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 32 Craig Place			07 31 2017				
City Cranford	State NJ	Zip Code 07016-2307	Transaction ID : PR446314217251				
Craniold	INJ	07016-2307	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		120.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Ser	nior Vice President					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00	P/R Deduction (\$60.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir	nitial) or Full C	Organization Name					
B. Forman, Craig, , Mr.,			Date of Receipt				
Mailing Address 13430 Stonegate Road			07 31 2017				
City	State	Zip Code	Transaction ID : PR4486617251				
Midlothian	VA	23113-3963	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		100.00				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item				
Receipt For:	Aggregate	Year-to-Date V					
Primary General Other (specify) ▼		, 750.00	P/R Deduction (\$50.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle Ir c. Simonetti, Richard, , Mr.,	nitial) or Full C	Organization Name	Date of Receipt				
Mailing Address 24 Red Oak Lane			07 31 2017				
City	State	Zip Code	Transaction ID : PR4486817251				
Cortlandt Manor	NY	10567-6139	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		230.78				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Mar	naging Partner					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional)			450.78				
TOTAL This Period (last page this line number							

FOR LINE NUMBER: PAGE 176 OF 352

T	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)						
	y information copied from such Reports and Stat for commercial purposes, other than using the na									
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ıy Politi	ical Action Committee							
Α.	Full Name of Individual (Last, First, Middle Initial Fass, Darin, , Mr.,) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 20 Latour Manor			07 31 2017						
	City Fairport	State NY	Zip Code 14450-4637	Transaction ID : PR4487317251						
			14430-4037	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		230.78						
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item						
	New York Life Insurance Company	Mai	naging Partner							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1317.33	P/R Deduction (\$80.93 Bi-Weekly)						
	Full Name of Individual (Last, First, Middle Initial) or Full C	Drganization Name							
Β.	Kramer, Steven, , Mr.,			Date of Receipt						
	Mailing Address 7054 Trysail Circle	Zip Code	07 / D D / Y Y Y Y 2017							
	Татра	State FL	33607-5846	Transaction ID : PR4487417251 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С								
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) maging Partner	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼	-						
	Primary General Other (specify) ▼		, 375.00	P/R Deduction (\$25.00 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial Grub, William, , Mr.,) or Full C	Drganization Name	Date of Receipt						
	Mailing Address 20 Preserve Island Circle			07 31 2017						
	City	State	Zip Code	Transaction ID : PR4487517251						
	Ponte Vedra Beach	FL	32082-4653	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		230.78						
Name of Employer (for Individual)Occupation (for Individual)New York Life Insurance CompanyManaging Partner				Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•	511.56						
т	OTAL This Period (last page this line number on	y)	•							

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)					
ITEIWIIZED REGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using th	Statements make and a	I ay not be sold or used by any p Iddress of any political committe	erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) New York Life Insurance Comp	oany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle Ir A. Hodgkiss, Robert, , Mr.,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 15839 Winterfield Way			07 31 2017					
City Alpharetta	State GA	Zip Code 30004-8837	Transaction ID : PR4489117251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		230.78					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e Vice President	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir B. Kay, George, , Mr.,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 300 Ivy Springs Court			07 31 2017					
City Waxhaw	State NC	Zip Code 28173-7455	Transaction ID : PR4489217251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		153.86					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Partner	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.95	P/R Deduction (\$76.93 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Ir C. Madgett, Mark, , Mr.,	nitial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5 Renaissance Square Apt. 12A City	State	Zip Code	07 / 31 / 2017 Transaction ID : PR4489517251					
White Plains	NY	10601-3044	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		230.78					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) & Head of Agency	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			615.42					
TOTAL This Period (last page this line number	r only)							

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)					
ITEIWIIZED REGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	npany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle A. McKinney, Jerry, , Mr.,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 500 Liberty Street Southea Suite 500	ast		07 / D D / Y Y Y Y 2017					
City Salem	State OR	Zip Code 97301-3899	Transaction ID : PR4489617251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		230.78					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. Ghazal, Roland, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 47-422 Lulani Street			07 / D D / Y Y Y Y Y 2017					
City Kaneohe	State HI	Zip Code 96744-4717	Transaction ID : PR4489717251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		153.86					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.95	P/R Deduction (\$76.93 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. Russell, Joyce, , Ms.,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1006 Parcus Road			M M M / D D / Y Y Y Y Y Y 07 31 2017					
City Huntsville	State AL	Zip Code 35803-2348	Transaction ID : PR4489817251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Associate	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)		434.64					
TOTAL This Period (last page this line num	per only)							

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	۹ _	11b 14	11c	12		
Any information copied from such Reports and or for commercial purposes, other than using t	I Statements mathematic	l ay not be sold or used by any p ddress of any political committe	erson for th	ne pu contri	rpose of	15 f soliciting from such	16 contribut	17 ions ee.	
NAME OF COMMITTEE (In Full)									
New York Life Insurance Com	ipany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle Scovel, Michael, , Mr.,	Initial) or Full C	rganization Name	Date	of R	leceipt				
Mailing Address 6397 Shady Oaks Drive			м 0		/ D 31	D / Y	ү ү 2017	Y	
City Frisco	State TX	Zip Code 75034-7236				PR44900 Receipt th			
FEC ID number of contributing federal political committee.	С						230.7	76	
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) haging Partner		Mem	io Item				
Receipt For: Primary General Other (specify) \checkmark	Aggregate	Year-to-Date ▼ 1730.70	P/R D	educt	tion (\$11	5.38 Bi-W	/eekly)		
Full Name of Individual (Last, First, Middle B. Daya, Mehmood, , Mr.,	Initial) or Full C	rganization Name	Date	of R	leceipt				
Mailing Address 22106 Grand Cove Court			0		/ D 31		2017	Y	
City	State TX	Zip Code 77450-8097				PR44905			
Katy FEC ID number of contributing federal political committee.	C	11430-0037	Amo		T Each F	Receipt th	76.9	94	
Name of Employer (for Individual)		upation (for Individual)	- 6	Mem	o Item				
New York Life Insurance Company	Exe	cutive Partner							
Receipt For:	Aggregate	Aggregate Year-to-Date V							
Other (specify) ▼		577.05	P/R D	educt	tion (\$38	.47 Bi-We	ekly)		
Full Name of Individual (Last, First, Middle C. Williamson, Kyle, , Mr.,	Initial) or Full C	rganization Name	Date	of R	eceipt				
Mailing Address 1649 Enclave Cove				7	/ D 31		2017 ^Y	Y	
City Lake Mary	State FL	Zip Code 32746-3800				Receipt th			
FEC ID number of contributing federal political committee.	С			_	y 1		116.9)4	
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Partner		Mem	no Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 761.64		educ	tion (\$58	8.47 Bi-We	eekly)		
SUBTOTAL of Receipts This Page (optional).					, .		424.6	64	
TOTAL This Period (last page this line number	er only)								

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		Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle I A. Breitbord, Terry L., , Ms.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 21849 Town Place Drive			07 31 / Y Y Y Y 07 31 2017						
City Boca Raton	State FL	Zip Code 33433-3712	Transaction ID : PR4517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.83						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 201.81	P/R Deduction (\$28.83 Monthly)						
Full Name of Individual (Last, First, Middle I B. Lee, Moonsoon P., , Ms.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 188 Puritan Avenue			07 / D D / Y Y Y Y 07 31 2017						
City Forest Hills	State NY	Zip Code 11375-6818	Transaction ID : PR45517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)						
Full Name of Individual (Last, First, Middle I	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 7 Liberty Way			07 / D D / Y Y Y Y 31 2017						
City Loudonville	State NY	Zip Code 12211-1954	Transaction ID : PR4553717251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.94						
Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Vice	upation (for Individual) President	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			135.77						
TOTAL This Period (last page this line numbe	r only)	······							

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17				
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	cal Action Committee					
Full Name of Individual (Last, First, Mido A. Gavin, Michael, , Mr.,	dle Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 4935 Seeley Avenue			07 31 2017				
City	State	Zip Code	Transaction ID : PR4554817251				
Downers Grove	IL	60515-3409	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		230.76				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Mai	naging Partner					
Receipt For:	Aggregate	Year-to-Date V					
Other (specify) ▼		1038.42	P/R Deduction (\$57.69 Bi-Weekly)				
Full Name of Individual (Last, First, Mido B. Tate, William, , Mr.,	lle Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 507 Beachcliff Row			07 31 2017				
City	State	Zip Code	Transaction ID : PR4555717251				
Rocky River	OH	44116-1868	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.48				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	7				
Primary General Other (specify) ▼		, 288.60	P/R Deduction (\$19.24 Bi-Weekly)				
Full Name of Individual (Last, First, Mido C. Nuzzi, Domenico V., , Mr.,	dle Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 21 Chambry Court			07 / D D / Y Y Y Y 2017				
City	State NJ	Zip Code	Transaction ID : PR45817251				
Freehold	INJ	07728-9067	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		125.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Age	nt					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 875.00	P/R Deduction (\$125.00 Monthly)				
SUBTOTAL of Receipts This Page (option	al)		394.24				
TOTAL This Period (last page this line nu							

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ITEMIZED RECEIPTS			Use separate schedul		(check only one)						
116			for each category of t Detailed Summary Pa		★ 11a		11b	11c 15	12	Г	17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used b address of any political co	y any pers	on for the	pur ntrib	pose of	soliciting	g contril	butio	ns
\setminus	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	ny Politi	cal Action Comm	ittee							
Α.	Full Name of Individual (Last, First, Middle Initia Pinkos, Richard J., , Mr.,	al) or Full O	Organization Name		Date o	f Re	ceipt				
	Mailing Address 16 Carolyn Terrace	-1			07	/	31) / Y	2017]
	City Chicopee	State MA	Zip Code 01020-3543					PR48172 leceipt th		od	
	FEC ID number of contributing federal political committee.	С]					5	0.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent		M	lemc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350	.00	P/R Dec	luctio	on (\$50.	.00 Montł	nly)		
	Full Name of Individual (Last, First, Middle Initia Leiderman, Jeffrey, , Mr.,	al) or Full O	rganization Name		Date o	f Re	ceipt				
	Mailing Address 8491 Egret Lakes Lane				м м 07	/	31	/ Y	2017	Y]
	City	State	Zip Code					PR50317			
	West Palm Beach	FL	33412-1526	_	Amoun	t of	Each R	leceipt th	is Perio	bd	
	FEC ID number of contributing federal political committee.	С							3	0.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		M	lemc	Item				
	Receipt For:	Aggregate	Year-to-Date ▼		1						
	Primary General Other (specify) ▼		, 210	.00	P/R Ded	luctio	on (\$30.	00 Month	nly)		
C.	Full Name of Individual (Last, First, Middle Initia Di Palermo, John F., , Mr.,	al) or Full O	Organization Name		Date o	f Re	ceipt				
	Mailing Address 3297 Padilla Way				07		31		2017	Y	
	City San Jose	State CA	Zip Code 95148-2746					PR5041		bd	
	FEC ID number of contributing federal political committee.	С]			y :	, ,	9	1.34	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 639	.38	P/R Dec	ducti	on (\$91	.34 Montl	hly)		
S	JBTOTAL of Receipts This Page (optional)			••••••			, .	. ,	17	1.34	
т	OTAL This Period (last page this line number o	nly)		····· >						-	

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{c c} \textbf{X} & 11a & 11b & 11c & 12 \\ \hline 13 & 14 & 15 & 16 & 17 \\ \end{array}$
	y information copied from such Reports and Stat for commercial purposes, other than using the na			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	tical Action Committee	
A.	Full Name of Individual (Last, First, Middle Initial Stribling, Michael, , Mr.,) or Full O	Organization Name	Date of Receipt
	Mailing Address 751 Malvern Boulevard	State	Zip Code	07 / D D / Y Y Y Y 2017
	City Stone Mountain	GA	30087-5425	Transaction ID : PR50817251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		83.34
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	cupation (for Individual) ent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)
в.	Full Name of Individual (Last, First, Middle Initial Tarella, David R., , Mr.,) or Full O	Organization Name	Date of Receipt
	Mailing Address 15 Saratoga Farm Road	State	Zip Code	07 / D D / Y Y Y Y 2017
	Malta	NY	12020-3765	Transaction ID : PR50917251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		83.34
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) gent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)
C.	Full Name of Individual (Last, First, Middle Initial O'Neill, Brian, , Mr.,) or Full O	Organization Name	Date of Receipt
	Mailing Address 45 Saint Michaels Terrace	State	Zin Code	07 31 2017
	City Carmel	NY	Zip Code 10512-2006	Transaction ID : PR51017251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.94
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) e President & Deputy General Coun	s Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			243.62
т	OTAL This Period (last page this line number on	ly)	•	

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
New York Life Insurance Com	pany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle I A. Hallahan, Mary, , Ms.,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 172 Wayne Avenue			07 31 2017						
City	State	Zip Code	Transaction ID : PR51217251						
River Edge	NJ	07661-1106	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		84.94						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
New York Life Insurance Company	Vice	President & Assistant Treasurer							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General			P/R Deduction (\$42.47 Bi-Weekly)						
Other (specify)		637.05	1						
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name							
B. Flamer, Irving, , Mr.,			Date of Receipt						
Mailing Address 3 Linden Lane	State	Zip Code	07 / D D / Y Y Y Y 2017						
Old Westbury	NY	11568-1609	Transaction ID : PR51917251						
		11300 1003	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		83.34						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻	-						
Primary General Other (specify) ▼		583.38	P/R Deduction (\$83.34 Monthly)						
Full Name of Individual (Last, First, Middle I c. Tillman, Ellen, , Ms.,	nitial) or Full O	rganization Name	Date of Receipt						
Mailing Address 10702 Kings Riding Way Ap	ot. 101		07 31 2017						
City	State	Zip Code	Transaction ID : PR52417251						
Rockville	MD	20852-5405	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
New York Life Insurance Company	Age	nt	_						
Receipt For:	Aggregate	Year-to-Date 🔻							
Primary General		250.00	P/R Deduction (\$50.00 Monthly)						
Other (specify)		350.00	1						
SUBTOTAL of Receipts This Page (optional)			218.28						
TOTAL This Period (last page this line numbe	r only)								

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			Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page		11a 13		11b	11c 15		12 16	17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any pe ddress of any political committee	erson e to so	for the	purp ntrib	oose of	soliciting	g cont	tributio	ons
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Init Chan, David, , Mr.,	ial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 6 Nelson Lane				м м 07	1	D D 31	/ Y	۲ 20	17	Ŷ
	City Syosset	State NY	Zip Code 11791-4805	_				PR5279 eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>					38.48	8
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) ociate General Counsel		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	F	P/R Ded	uctio	on (\$19.:	24 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Init Levy, Howard, , Mr.,	ial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 21 Richard Avenue				07	/	D D D 31	/ Y	y 201		ſ
	City	State MA	Zip Code					PR53417			
	Sudbury FEC ID number of contributing federal political committee.	C	01776-2115		Amount	: of	Each R	eceipt th	nis Pe	38.48	8
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	_	M	emo	Item	,			
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 288.60	F	P/R Ded	uctio	on (\$19.2	24 Bi-We	ekly)		
С.	Full Name of Individual (Last, First, Middle Init Petrocelli Jr., Robert H., , Mr.,	ial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 10 Byrd Street				07 ^M	/	D D D 31	JL	201	7	Ŷ
	City Rye	State NY	Zip Code 10580-2407					PR5371 eceipt th		riod	
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	, y		166.67	7
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) nt		M	ema	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1166.69	I F	P/R Ded	uctio	on (\$166	6.67 Mor	nthly)		
⊢	UBTOTAL of Receipts This Page (optional)		•	• -			,	, , ,	2	243.63	3

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17			
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma	ay not be sold or used by any per ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.			
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee				
A.	Full Name of Individual (Last, First, Middle Initial Collins, Timothy J., , Mr., Mailing Address 3404 Sierra Glen Road) or Full O	rganization Name	Date of Receipt			
				07 31 2017			
	City Glendale	State CA	Zip Code 91208-1630	Transaction ID : PR5401317251			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
	Name of Employer (for Individual)	Occu	upation (for Individual)	Memo Item			
	New York Life Insurance Company	Age	nt				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)			
в.	Full Name of Individual (Last, First, Middle Initial Deliso, Jeanmarie A., , Ms.,) or Full O	rganization Name	Date of Receipt			
	Mailing Address 43 Primrose Drive			07 31 2017			
	City	State	Zip Code	Transaction ID : PR5401917251			
	Longmeadow	MA	01106-2531	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		83.00			
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 581.00	P/R Deduction (\$83.00 Monthly)			
с.	Full Name of Individual (Last, First, Middle Initial Dorsinville, Jean M., , Mr.,) or Full O	rganization Name	Date of Receipt			
	Mailing Address 19 Redwall Circle			07 31 2017			
	City Savannah	State GA	Zip Code 31407-9040	Transaction ID : PR5402017251			
		- GA	31407-9040	_ Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		30.00			
	Name of Employer (for Individual)		upation (for Individual)	Memo Item			
	New York Life Insurance Company Receipt For:	Ager		_			
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)			
s	UBTOTAL of Receipts This Page (optional)			163.00			
т	OTAL This Period (last page this line number on	ly)					

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: Markov field Image: Markov field<
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	y Politio	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initial Louie, Jenny S., , Ms.,) or Full Oi	rganization Name	Date of Receipt
	Mailing Address 72-16 267th Street		7.0.1	07 / D D / Y Y Y Y 07 31 2017
	City Glen Oaks	State NY	Zip Code 11004-1022	Transaction ID : PR5403317251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		58.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)
R	Full Name of Individual (Last, First, Middle Initial Williams, Adrian L., , Ms.,) or Full Oi	rganization Name	Date of Receipt
υ.	Mailing Address 20008 Northwest 85th Avenue			07 31 2017
	City Hialeah	State FL	Zip Code 33015-6933	Transaction ID : PR5408017251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		83.33
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.31	P/R Deduction (\$83.33 Monthly)
с.	Full Name of Individual (Last, First, Middle Initial Chee, Anthony M., , Mr.,) or Full Oi	rganization Name	Date of Receipt
	Mailing Address 4978 Kokomo Drive			07 31 Y Y Y Y 2017
	City Sacramento	State CA	Zip Code 95835-1806	Transaction ID : PR5410417251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		60.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) ht	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$60.00 Monthly)
s	UBTOTAL of Receipts This Page (optional)			201.33
т	OTAL This Period (last page this line number onl	y)	·····	

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mathematic the name and a	I ay not be sold or used by any p address of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	npany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. Watters, Jude A., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 6000 E 2nd Street Suite 20	02		M M / D D / Y Y Y Y Y 07 31 2017						
City Casper	State WY	Zip Code 82609-4347	Transaction ID : PR5422317251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		100.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)						
Full Name of Individual (Last, First, Middle B. Hadley, Benjamin, , Mr.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 482 Acorn Lane			07 / D D / Y Y Y Y Y 2017						
City Shelburne	State VT	Zip Code 05482-6393	Transaction ID : PR5422517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
Full Name of Individual (Last, First, Middle C. Dyjak, Lawrence J., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 12 Paso Fino		1	07 / D D / Y Y Y Y Y 2017						
City Lemont	State IL	Zip Code 60439-9748	Transaction ID : PR5423417251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		65.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 455.00	P/R Deduction (\$65.00 Monthly)						
SUBTOTAL of Receipts This Page (optional)			206.67						
TOTAL This Period (last page this line numb	er only)								

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			Use separate schedule(s)		(check only one)						
			for each category of the Detailed Summary Page				11b 14	11c	\square	12 16	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson fo to sol	13 or the icit co	pur htrib	pose of	soliciting	g con	tributi	ons
	NAME OF COMMITTEE (In Full)										
\rangle	New York Life Insurance Compa	ny Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Initia Thomas, Wayne E., , Mr.,	al) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 29 Cycas				м м 07	1	31) / Y		ү 17	Y
	City Kenner	State LA	Zip Code 70065-6188	A				PR5424			
	FEC ID number of contributing federal political committee.	С			_			-		50.0	0
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		M	emo) Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/	R Ded	ucti	on (\$50.	.00 Monti	hly)		
R	Full Name of Individual (Last, First, Middle Initia Hartman, Robert, , Mr.,	al) or Full O	rganization Name	Г	Date of	R	aceint				
υ.	Mailing Address 461 Kingston Plantation Boulev	ard			07	/	31	/ Y	20 ⁻	ү 17	Y
	City	State	Zip Code		Trans	acti	ion ID :	PR54250	6172	51	
	Benton	LA	71006-3404	A	moun	t of	Each R	leceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С								230.7	6
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1730.70	P/	R Ded	ucti	on (\$115	5.38 Bi-W	/eekl	y)	
с.	Full Name of Individual (Last, First, Middle Initia Schechter, Scott, , Mr.,	al) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 1048 Johnson Avenue			07 31 2017						Y	
	City San Diego	State CA	Zip Code 92103-2316	Δ				PR5426			
	FEC ID number of contributing federal political committee.	С			inoun		,	, soon pr u		40.0	0
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		M	emo	b Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00	P/	R Ded	ucti	on (\$40	.00 Mont	hly)		
	UBTOTAL of Receipts This Page (optional)			[-		y		-	320.7	6

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle I A. Janssen, Paul H., , Mr.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 316 Iowa Avenue Northwest	t		07 31 2017						
City Orange City	State IA	Zip Code 51041-1262	Transaction ID : PR5426917251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
Full Name of Individual (Last, First, Middle I B. Porter, Aeramy K., , Ms.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 1124 N Linden Circle			07 31 Y Y Y Y Y 07 31 2017						
City Wichita	State KS	Zip Code 67206-4074	Transaction ID : PR5428217251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)						
Full Name of Individual (Last, First, Middle I Garcia, Arthur, , Mr.,	nitial) or Full C	organization Name	Date of Receipt						
Mailing Address 1326 South Fillmore Street			07 / D D / Y Y Y Y Y 31 2017						
City Denver	State CO	Zip Code 80210-2502	Transaction ID : PR5428717251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		100.00						
Name of Employer (for Individual) New York Life Insurance Company Receipt For:		upation (for Individual) aging Partner	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 657.76	P/R Deduction (\$38.47 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			400.00						
TOTAL This Period (last page this line numbe	er only)								

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. Garcia, Sendalio D., , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 7205 Capitan Avenue North	east		07 31 2017						
City Albuquerque	State NM	Zip Code 87109-6075	Transaction ID : PR5428917251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
Full Name of Individual (Last, First, Middle B. Nash, Yara T., , Ms.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2044 S 6th Avenue			07 31 2017						
City Yuma	State AZ	Zip Code 85364-6413	Transaction ID : PR5429017251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)						
Full Name of Individual (Last, First, Middle C. Waters, Neal L., , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 213 Sawtelle Street			07 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City Henderson	State NV	Zip Code 89074-5391	Transaction ID : PR5429217251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
SUBTOTAL of Receipts This Page (optional).			121.67						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	ipany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. Hulbert, Linda G., , Ms.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 665 Tenth Avenue Unit 106 PO Box 81402			07 31 / Y Y Y Y Y 2017						
City Fairbanks	State AK	Zip Code 99701-4663	Transaction ID : PR54417251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
Full Name of Individual (Last, First, Middle B. Barry, Michael F., , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 3 Evergreen Lane	1-		07 31 / Y Y Y Y Y Y						
City Walpole	State MA	Zip Code 02081-2142	Transaction ID : PR5476217251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)						
Full Name of Individual (Last, First, Middle DeLeon, Tony, , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1101 W Annie Street	State	Zip Code	07 31 2017						
City Austin	TX	78704-4110	Transaction ID : PR5476417251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		91.34						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 639.38	P/R Deduction (\$91.34 Monthly)						
SUBTOTAL of Receipts This Page (optional).			383.01						
TOTAL This Period (last page this line number	er only)								

Lise senarate schedule(s)

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page		e) 11b 11c 14 15	12 16 17	
	y information copied from such Reports and Stat for commercial purposes, other than using the n					g contributions	
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politic	al Action Committee				
Α.	Full Name of Individual (Last, First, Middle Initial Gulbran, Kristen E., , Ms.,) or Full Org	ganization Name	Date of Rec	eipt		
	Mailing Address 3236 Cascadia Avenue S			07 /	D D / Y 31	2017	
	City	State WA	Zip Code	Transactio	on ID : PR5476	717251	
	Seattle	VVA	98144-7024	Amount of E	Each Receipt th	nis Period	
	FEC ID number of contributing federal political committee.	C				100.00	
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo	Item		
	New York Life Insurance Company	Agent	t				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	fear-to-Date ▼ 700.00	P/R Deduction	n (\$100.00 Mor	nthly)	
в.	Full Name of Individual (Last, First, Middle Initial Purich, Todd S., , Mr.,) or Full Org	ganization Name	Date of Rec	eipt		
	Mailing Address 6332 Battleview Drive			07 /	D D / Y 31	2017	
	City	State	Zip Code		on ID : PR5476		
	Raleigh	NC	27613-7148	Amount of E	Each Receipt th	nis Period	
	FEC ID number of contributing federal political committee.	С			p	250.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occup Agen	oation (for Individual) t	Memo	Item		
	Receipt For:	Aggregate Y	′ear-to-Date ▼	_			
	Other (specify)		1750.00	P/R Deduction (\$250.00 Monthly)			
C.	Full Name of Individual (Last, First, Middle Initial Thol, Jeffrey E., , Mr.,) or Full Org	ganization Name	Date of Rec	eipt		
	Mailing Address 736 High Street			M M / / 07	D D / Y 31	2017 Y	
	City Honesdale	State PA	Zip Code		on ID : PR5477		
		FA	18431-1738	Amount of E	Each Receipt th	nis Period	
	FEC ID number of contributing federal political committee.	С				250.00	
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo	Item		
	New York Life Insurance Company	Agent					
	Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 1750.00	P/R Deduction	n (\$250.00 Mor	nthly)	
s	UBTOTAL of Receipts This Page (optional)					600.00	
т	OTAL This Period (last page this line number on	ly)			, , , ,		

Lise senarate schedule(s)

FOR LINE NUMBER:

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ITI	EMIZED RECEIPTS	(check only one)		
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politic	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initia Gaynor, Missy, , Ms., Mailing Address 180 Peace Acre Lane	l) or Full Or	ganization Name	Date of Receipt
		Otata	Zin Code	07 31 2017
	City Stratford	State CT	Zip Code 06614-1306	Transaction ID : PR55717251
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	New York Life Insurance Company			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)
в.	Full Name of Individual (Last, First, Middle Initia Recine, Roberto, , Mr.,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1402 Crestview Drive PO Box 512 City	State	Zip Code	07 / D D / Y Y Y Y 2017
	Gwynedd Valley	PA	19437-0512	Transaction ID : PR56117251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		230.76
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Managing Partner		Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.70	P/R Deduction (\$115.38 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initia Madan, Akshay, , Mr.,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1300 Concord Terrace 5Th. Floor			07 31 2017
	City Sunrise	State FL	Zip Code 33323-2899	Transaction ID : PR56517251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) aging Partner	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		••••••	503.21
т	OTAL This Period (last page this line number on	ly)		

Use separate schedule(s)

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		Use separate schedule(s)		(check only one)					
II EIVILED RECEIFIO		for each category of the Detailed Summary Page	X 11a	11b	11c	12	17		
Any information copied from such Reports a or for commercial purposes, other than usin			person for the	e purpose	of soliciting	g contribut	ions		
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Politi	cal Action Committee							
Full Name of Individual (Last, First, Midd A. Broderick, Michael F., , Mr.,	le Initial) or Full O	rganization Name	Date o	of Receip	t				
Mailing Address 170 Clapboardtree Stree	t		07		31 / Y	2017	Y		
City Westwood	State MA	Zip Code 02090-2906			D : PR5661 h Receipt th		_		
FEC ID number of contributing federal political committee.	C				· · ·	350.0	0		
Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		lemo Iter	n				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2450.00	P/R Dec	duction (\$	350.00 Mon	ithly)			
Full Name of Individual (Last, First, Midd B. Youngblood, Kyle L., , Mr.,	le Initial) or Full O	rganization Name	Date o	of Receip	t				
Mailing Address 78 Corinth Drive					31 [/] Y	ү 2017	Y		
City Tinley Park	State IL	Zip Code 60477-4819			D : PR56622 h Receipt th				
FEC ID number of contributing federal political committee.	С					30.0	0		
Name of Employer (for Individual) New York Life Insurance Company		Occupation (for Individual) Agent			Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Dec	P/R Deduction (\$30.00 Monthly)					
Full Name of Individual (Last, First, Midd C. Salmon, Roy B., , Mr.,	le Initial) or Full O	rganization Name	Date o	of Receip	t				
Mailing Address 4255 Alta Vista Avenue	0.00	7.0.0	07	JL	31	2017	Y		
City Santa Rosa	State CA	Zip Code 95404-1906			D: PR5662 h Receipt th				
FEC ID number of contributing federal political committee.	С			. ,	,	41.6	57		
Name of Employer (for Individual) New York Life Insurance Company	Occu Ager		/lemo Iter	m					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R De	duction (\$	\$41.67 Mont	hly)			
SUBTOTAL of Receipts This Page (optiona	al)					421.6	7		
TOTAL This Period (last page this line nun	nber only)				1 1 3				

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)					
I LIVILLU RECEIFIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and a	l ay not be sold or used by any p ddress of any political committe	13 14 15 16 1 berson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) New York Life Insurance Con	npany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle Smith, James M., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 6414 Hickorycrest Drive			07 31 2017					
City Spring	State TX	Zip Code 77389-5230	Transaction ID : PR5662817251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		83.34					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)					
Full Name of Individual (Last, First, Middle B. Rosenthal, Marc I., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 5493 Pine Loch Lane			07 31 2017					
City Williamsville	State NY	Zip Code 14221-8538	Transaction ID : PR5664817251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)					
Full Name of Individual (Last, First, Middle C. McInerney, Barbara, , Ms.,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 35 Sutton Place Apt. 15A	State	Zin Oode	07 / D D / Y Y Y Y 2017					
City New York	NY	Zip Code 10022-2429	Transaction ID : PR5751317251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		84.94					
Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Svp	upation (for Individual) & Chief Compliance Officer	Memo Item					
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 637.05	P/R Deduction (\$42.47 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional))		418.28					
TOTAL This Period (last page this line numb	per only)	······						

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)						
11			for each category of the Detailed Summary Page		1a 3		11b 14	11c		12 16	17
	y information copied from such Reports and S for commercial purposes, other than using the							soliciting	g cont	tributio	ons
\setminus	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	cal Action Committee								
<u> </u>	Full Name of Individual (Last, First, Middle Init Sklar, Ralph K., , Mr.,	tial) or Full O	rganization Name	Da	ite of	Be	eceipt				
Λ.	Mailing Address 6632 Liggett Drive				07	/	31) / Y	Y 201		
	City	State	Zip Code			act	_	PR5751	1.00	17	
	Oakland	CA	94611-3204					leceipt th		riod	
	FEC ID number of contributing federal political committee.	С								58.00)
	Name of Employer (for Individual)	Осси	upation (for Individual)	- F	Me	emc	Item				
	New York Life Insurance Company	Age	nt								
	Receipt For:	Aggregate Year-to-Date ▼									
	Primary General		406.00	P/R	Ded	ucti	on (\$58.	.00 Mont	hly)		
	Other (specify) v			4							
	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name								
Β.	Jensen, Bradley, , Mr.,			Da	te of	Re	eceipt				
	Mailing Address 4602 S Key Avenue				07 / D D / Y Y Y Y 2017						
	City Sioux Falls	State SD	Zip Code 57106-7519				-	PR5755			
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period 76.92					2	
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual)	- 6	Me	emc) Item				
	Receipt For:		naging Partner		_						
	Primary General	Aggregate	Year-to-Date ▼	P/R	B/B Doduction (\$28.46 Bi Maakhu)						
	Other (specify)	576.90			P/R Deduction (\$38.46 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init Terry III, William, , Mr.,	tial) or Full O	rganization Name	Da	ite of	Re	eceipt				
	Mailing Address 43 Winchester Road			N	07 [™]	/	31) / Y	201		
	City	State	Zip Code	1	rans	act	ion ID :	PR5755	51725	51	
	Arlington	MA	02474-1019	An	nount	of	Each R	leceipt th	nis Pe	riod	
	FEC ID number of contributing federal political committee.	С			_		,	. y	1	153.86	3
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Executive Partner			Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify)		1153.95	P/R	Ded	ucti	on (\$76	.93 Bi-W	eekly)		
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number						5	 	2	288.78	3

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II EIVIIZED RECEIFIJ		for each category of the Detailed Summary Page	X 11a	111		12	17		
Any information copied from such Reports or for commercial purposes, other than us			erson for the	purpos	e of soliciting	g contribut	tions		
NAME OF COMMITTEE (In Full) New York Life Insurance C	Company Politi	cal Action Committee							
Full Name of Individual (Last, First, Mi A. Odom, David, , Mr.,	ddle Initial) or Full O	rganization Name	Date o	of Receip	pt				
Mailing Address 8426 Beeswing Court			м – N 07		31 / Y	2017	Y		
City Dublin	State OH	Zip Code 43017-9724			ID:PR5755 ch Receipt tl		_		
FEC ID number of contributing federal political committee.	C			<u> </u>	1 1 7	230.7	76		
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) haging Partner		lemo Ite	em				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.70	P/R Dec	duction ((\$115.38 Bi-V	Veekly)			
Full Name of Individual (Last, First, Mi B. Boland, Kevin, , Mr.,	ddle Initial) or Full O	rganization Name	Date c	of Receip	pt				
Mailing Address 3993 Howard Hughes #500	1		07		31	2017	Y		
City Las Vegas	State NV	Zip Code 89169-6700			ID : PR5756				
FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	N	P/R Deduction (\$76.93 Bi-Weekly)					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1153.95	P/R Dec						
Full Name of Individual (Last, First, Mi C. Iannitelli, Nicola, , Mr.,	ddle Initial) or Full O	rganization Name	Date c	of Receip	pt				
Mailing Address 1 Brown Terrace			07	M = M / D = D / Y = Y = Y = Y					
City Denville	State NJ	Zip Code 07834-4902			ID: PR5861 ch Receipt th				
FEC ID number of contributing federal political committee.	C			. y		230.7	78		
Name of Employer (for Individual) New York Life Insurance Company		Occupation (for Individual) Managing Partner			em				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.85	P/R Dec	duction ((\$115.39 Bi-\	Veekly)			
SUBTOTAL of Receipts This Page (option	onal)			. ,	,	615.4	10		
TOTAL This Period (last page this line r	number only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 199 OF 35 (check only one)
		Detailed Summary Page	× 11a 11b 11c 12 13 14 15 16 1
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) New York Life Insurance C	ompany Politi	cal Action Committee	
Full Name of Individual (Last, First, Middle Initial) or Full A. Karalius, Robert, , Mr.,		rganization Name	Date of Receipt
Mailing Address 139 Sutcliffe Lane			07 / D D / Y Y Y Y 2017
City Conshohocken	State PA	Zip Code 19428-1457	Transaction ID : PR5861417251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		38.46
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)
Full Name of Individual (Last, First, Mid S. Shah, Arvindkumar N., , Mr.,		rganization Name	Date of Receipt
Mailing Address 212 24th Court Southwe			07 31 2017
City Winter Haven	State FL	Zip Code 33880-2412	Transaction ID : PR58617251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		35.00
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	P/R Deduction (\$35.00 Monthly)
Full Name of Individual (Last, First, Mid Bradstreet, Scot R., , Mr.,		rganization Name	Date of Receipt
Mailing Address 8 Parkman Brook Lane			07 31 2017
City Stratham	State NH	Zip Code 03885-6530	Transaction ID : PR6017251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)
SUBTOTAL of Receipts This Page (option	,		173.46
TOTAL This Period (last page this line nu	mber only)	••••••	

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
Any information copied from such Reports and or for commercial purposes, other than using	d Statements mathe name and a	l ay not be sold or used by any p Iddress of any political committe	13 14 15 16 erson for the purpose of soliciting contributi to solicit contributions from such committee	17 ions ee.				
NAME OF COMMITTEE (In Full)								
> New York Life Insurance Corr	ipany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle A. Zweig, Bernard J., , Mr.,	Initial) or Full C	Prganization Name	Date of Receipt					
Mailing Address 303 W 66th Street Apt. 1Ev	v		M M / D D / Y Y Y	Y				
City	State	Zip Code	07 31 2017 Transaction ID : PR60217251					
New York	NY	10023-6423	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		33.0	0				
Name of Employer (for Individual) New York Life Insurance Company	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$33.00 Monthly)					
Full Name of Individual (Last, First, Middle B. Stromei, Shane, , Mr.,	Initial) or Full C	organization Name	Data of Descript					
Mailing Address 4505 Hampton View Drive			Date of Receipt	Y				
City	State	Zip Code	Transaction ID : PR60500917251					
Owens Cross Roads	AL	35763-5708	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		230.7	8				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		1730.85	P/R Deduction (\$115.39 Bi-Weekly)					
Full Name of Individual (Last, First, Middle Spina, Frederick, , Mr.,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 140 Curtiss Road Extensio			07 / ^D D / ^Y Y Y 31 2017	Y				
City Woodbury	State CT	Zip Code 06798-3824	Transaction ID : PR60503517251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		38.4	8				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional).			302.2	6				
TOTAL This Period (last page this line numb	er only)							

Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)		(check only one)					
			for each category of the Detailed Summary Page	X 11 13		11b 14	11c 15	12	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for t	he pu		soliciting	contrib	utions	
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee							
Α.	Full Name of Individual (Last, First, Middle Initia Sledge, Taylor M., , Mr., Jr.	l) or Full Or	ganization Name	Date	of R	eceipt				
	Mailing Address 4752 E Massena Drive			M 0		/ D D 31	/ Y	ү ү 2017	Y	
	City Jackson	State MS	Zip Code 39211-4930			tion ID : f Each R				
	FEC ID number of contributing federal political committee.	С						83	8.34	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) nt		Mem	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R D	educt	ion (\$83.	34 Montł	ıly)		
в.	Full Name of Individual (Last, First, Middle Initia Paone, Jonathan, , Mr.,	l) or Full Or	ganization Name	Date	e of R	eceipt				
Mailing Address 57 Van Doren Avenue					07 / D D / Y Y Y Y 2017					
	City Chatham	State NJ	Zip Code 07928-2213			tion ID: f Fach B			d	
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Vice President			Amount of Each Receipt this Period					
	Name of Employer (for Individual) New York Life Insurance Company				Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577,05	P/R D	P/R Deduction (\$38.47 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initia Lazzarone, Dale L., , Mr.,	l) or Full Or	rganization Name	Date	of R	eceipt				
	Mailing Address 4165 Caughlin Parkway	Otata			7	31		2017	Y	
	City Reno	State NV	Zip Code 89519-0601			tion ID : f Each R			d	
	FEC ID number of contributing federal political committee.	С				, .		60	0.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent			Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 420.00	P/R [educ	tion (\$60.	.00 Montl	וy)		
s	UBTOTAL of Receipts This Page (optional)					, .	y	220	.28	
т	OTAL This Period (last page this line number or	ıly)								

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17			
	y information copied from such Reports and Stat for commercial purposes, other than using the na						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical Action Committee				
Α.	Full Name of Individual (Last, First, Middle Initial Irvin, John, , Mr.,) or Full C	Organization Name	Date of Receipt			
	Mailing Address 9313 Frenchmans Way			07 31 2017			
	City Dallas	State TX	Zip Code 75220-5039	Transaction ID : PR6063417251 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		76.94			
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) rporate Vice President	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 202.00	P/R Deduction (\$9.62 Bi-Weekly)			
R	Full Name of Individual (Last, First, Middle Initial Mahoney Jr., William E., , Mr.,) or Full C	Organization Name	Date of Receipt			
υ.	Mailing Address 936 Intracoastal Drive Apt. 14F		07 31 2017				
	City Fort Lauderdale	State Zip Code FL 33304-3666		Transaction ID : PR6117251 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		250.00			
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent		Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)			
C.	Full Name of Individual (Last, First, Middle Initial Hamel Jr., John, , Mr.,) or Full C	Organization Name	Date of Receipt			
	Mailing Address 184 Perry Avenue			07 31 2017			
	City Norwalk	State CT	Zip Code 06850-1137	Transaction ID : PR6118917251			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer (for Individual) New York Life Insurance Company			cupation (for Individual) rporate Vice President	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 950.00	P/R Deduction (\$60.00 Bi-Weekly)			
s	UBTOTAL of Receipts This Page (optional)			496.94			
т	OTAL This Period (last page this line number on	ly)					

Use separate schedule(s)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 203 OF 352 (check only one)	
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initia Kho, Johnson O., , Mr.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 110 Westminster Road	State	Zip Code	
	Scarsdale	NY	10583-2425	Transaction ID : PR61217251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) .nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)
В.	Full Name of Individual (Last, First, Middle Initia Cunningham, Richard, , Mr.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 8103 Bell Mountain Drive			07 31 2017
	City Austin	State TX	Zip Code 78730-2822	Transaction ID : PR6129717251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		91.34
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 639.38	P/R Deduction (\$91.34 Monthly)
с.	Full Name of Individual (Last, First, Middle Initia Wolf, Lester, , Mr.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 7309 Fait Avenue	State	Zip Code	07 31 2017
	Baltimore	MD	21224-3130	Transaction ID : PR6129817251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		48.00
	New York Life Insurance Company Par		upation (for Individual) ner	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$24.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			239.34
т	OTAL This Period (last page this line number or	ıly)	•	

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)				
		for each category of the Detailed Summary Page	X 11a 11b 11c 12				
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Com							
Full Name of Individual (Last, First, Middle A. Starling, Sean M., , Mr.,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 1038 Muirfield Avenue			M M / D D / Y Y Y Y Y 07 31 2017				
City Clemmons	State NC	Zip Code 27012-8991	Transaction ID : PR6131417251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		50.00				
Name of Employer (for Individual) New York Life Insurance Company	ew York Life Insurance Company Agent						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)				
Full Name of Individual (Last, First, Middle B. Owen, Ralph P., , Mr.,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 3317 Highway 63			07 / D D / Y Y Y Y 2017				
City Bloomfield	State IA	Zip Code 52537-8063	Transaction ID : PR6132717251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		60.00				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	P/R Deduction (\$60.00 Monthly)				
Full Name of Individual (Last, First, Middle C. Pottebaum, Alan L., , Mr.,	Initial) or Full C	organization Name	Date of Receipt				
Mailing Address 29 Laura Drive			07 31 Y Y Y Y 07 07 07 07 07 07 07 07 07 07 07 07 07 0				
City Le Mars	State IA	Zip Code 51031-2731	Transaction ID : PR6133817251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		40.00				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00	P/R Deduction (\$40.00 Monthly)				
SUBTOTAL of Receipts This Page (optional).			150.00				
TOTAL This Period (last page this line numb	er only)						

Use separate schedule(s)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 205 OF 352				
IT	EMIZED RECEIPTS		for each category of the	(check only one)				
			Detailed Summary Page	13 14 15 16 17				
Ar	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma	ay not be sold or used by any pe	rson for the purpose of soliciting contributions to solicit contributions from such committee				
<u></u>	NAME OF COMMITTEE (In Full)		and the any pointed committee					
\rangle	New York Life Insurance Compar	ny Politi	cal Action Committee					
Α.	Full Name of Individual (Last, First, Middle Initial Narvaez, Jose A., , Mr.,) or Full O	rganization Name	Date of Receipt				
	Mailing Address 3516 34th Street Apt. 6F			07 31 2017				
	City	State	Zip Code	Transaction ID : PR6134717251				
	Long Island City	NY	11106-1929	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		83.34				
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
	New York Life Insurance Company Receipt For:	Age		_				
	Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$83.34 Monthly)				
	Other (specify) ▼		583.38					
B.	Full Name of Individual (Last, First, Middle Initial Botts, Larry E., , Mr.,) or Full O	rganization Name	Date of Receipt				
	Mailing Address 3015 E Leestown Road			07 31 2017				
	City	State	Zip Code	Transaction ID : PR6137717251				
	Midway	KY	40347-9769	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
		Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		1750.00	P/R Deduction (\$250.00 Monthly)				
<u>с.</u>	Full Name of Individual (Last, First, Middle Initial Lippencott, Donald E., , Mr.,) or Full O	rganization Name	Date of Receipt				
	Mailing Address 73 Shore Road							
	City	State	Zip Code	07 31 2017 Transaction ID : PR6138217251				
	East Setauket	NY	11733-3932	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
Name of Employer (for Individual)OccurNew York Life Insurance CompanyAge		upation (for Individual) nt	Memo Item					
	Paggint For:		Year-to-Date ▼	-				
	Other (specify)		1750.00	P/R Deduction (\$250.00 Monthly)				
s	UBTOTAL of Receipts This Page (optional)			583.34				
	OTAL This Period (last page this line number on							
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Use separate schedule(s)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 206 OF 352 (check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma ame and a	ay not be sold or used by any peuddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initial Poulos, Dennis G., , Mr., Mailing Address 14111 N Fenton Road) or Full C	organization Name	Date of Receipt
	City Fenton	State MI	Zip Code 48430-1539	07 31 2017 Transaction ID : PR6139217251
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1400.00	P/R Deduction (\$200.00 Monthly)
в.	Full Name of Individual (Last, First, Middle Initial Leek, Wallene T., , Ms.,) or Full C	organization Name	Date of Receipt
	Mailing Address 817 Cherry Laurel Court			07 31 Y Y Y Y Y 07 31 2017
	City Nashville	State TN	Zip Code 37215-6165	Transaction ID : PR6139917251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.83
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 201.81	P/R Deduction (\$28.83 Monthly)
C.	Full Name of Individual (Last, First, Middle Initial Stolte, Irene, , Ms.,) or Full C	organization Name	Date of Receipt
	Mailing Address 35 Brookhill Avenue	State	Zip Code	07 31 2017 Transaction ID : PR6140917251
	Edison	NJ	08817-3404	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	New York Life Insurance Company Ag			Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)
s	UBTOTAL of Receipts This Page (optional)		•	258.83
т	OTAL This Period (last page this line number on	ly)	•	

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			Use separate schedule(s)		(check only one)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		ŀ		11b 14	11c 15	12	Г	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
	NAME OF COMMITTEE (In Full) New York Life Insurance Compared	ny Politio	cal Action Committee								
A.	Full Name of Individual (Last, First, Middle Initia Riebling, John W., , Mr.,	al) or Full O	rganization Name	Dat	te of	Re	ceipt				
	Mailing Address 23 Gentry Drive				07 [™]	/	D D 31	/ Y	2017	Y Y 7	1
	City Long Valley	State NJ	Zip Code 07853-3605					PR6141 eceipt th			_
	FEC ID number of contributing federal political committee.	C							4	41.67	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt		Me	mo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R	Dedu	ıctic	on (\$41.	67 Mont	hly)		
в.	Full Name of Individual (Last, First, Middle Initia Genovese, Gregory P., , Mr.,	al) or Full O	rganization Name	Dat	te of	Re	ceipt				
	Mailing Address 14 Woodcutters Lane				07	/	31	/ Y	2017]
	City Cold Spring Harbor	State NY	Zip Code 11724-1206					PR6141 eceipt th			
	FEC ID number of contributing federal political committee.	C					-			41.67	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent		Me	mo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R	Dedu	ictio	en (\$41.)	67 Montl	hly)		
c.	Full Name of Individual (Last, First, Middle Initia Ruark Lenz, Sybilla B., , Ms.,	al) or Full O	rganization Name	Dat	te of	Re	ceipt				
	Mailing Address 590 Fox Road	State	Zip Code		07 ^M	/	31		2017]
	Factoryville	PA	18419-7729					PR6141 eceipt th			
	FEC ID number of contributing federal political committee.	C					y	, ,	3	33.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent			Me	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 231.00	P/R	Dedu	uctio	on (\$33.	00 Mont	hly)		
s	UBTOTAL of Receipts This Page (optional)						, .		11	16.34	
т	OTAL This Period (last page this line number or	וy)	•••••				,	-		-	

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		Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma sing the name and a	ay not be sold or used by any p ddress of any political committe	e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	-					
New York Life Insurance C	ompany Politi	cal Action Committee				
Full Name of Individual (Last, First, Mi A. Hart, Randall D., , Mr.,	ddle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 3547 State Route 7			07 31 2017			
City New Waterford	State OH	Zip Code 44445-8719	Transaction ID : PR6142417251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		158.00			
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1106.00	P/R Deduction (\$158.00 Monthly)			
Full Name of Individual (Last, First, Mi B. Patel, Nayana J., , Ms.,	ddle Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 5410 E Westridge Roa	d		07 31 2017			
City	State	Zip Code	Transaction ID : PR6143217251			
Anaheim	CA	92807-3726	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		41.67			
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item			
Receipt For:	Aggregate	Year-to-Date ▼				
Other (specify) ▼		291.69	P/R Deduction (\$41.67 Monthly)			
Full Name of Individual (Last, First, Mi C. Bicker, Russell F., , Mr.,	,	rganization Name	Date of Receipt			
Mailing Address 125 Poplar Forest Driv			07 / D D / Y Y Y Y 31 2017			
City Slippery Rock	State PA	Zip Code 16057-8527	Transaction ID : PR6143517251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		83.33			
Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 583.31	P/R Deduction (\$83.33 Monthly)			
SUBTOTAL of Receipts This Page (option	nal)		283.00			
TOTAL This Period (last page this line n	umber only)	·····]				

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			Use separate schedule(s)		(check only one)					
			for each category of the Detailed Summary Page	×	11a		11b	11c	12	
	y information copied from such Reports and Stat for commercial purposes, other than using the n									
$\overline{)}$	NAME OF COMMITTEE (In Full)									
/	New York Life Insurance Compar	ny Politie	cal Action Committee							
A.	Full Name of Individual (Last, First, Middle Initia Musko, Richard P., , Mr.,) or Full O	rganization Name	C	Date of	Re	ceipt			
	Mailing Address 400 Isle Road			1	м м 07	/	31	/ Y	2017	Y
	City Butler	State PA	Zip Code 16001-8553	A				PR6143	617251 his Period	
	FEC ID number of contributing federal political committee.	С							58.	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	upation (for Individual) nt		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00	P/	R Ded	uctio	on (\$58.	00 Mont	hly)	
R	Full Name of Individual (Last, First, Middle Initial Pereira, John A., , Mr.,) or Full O	rganization Name	Г	Date of	Re	ceint			
υ.	Mailing Address 2815 E 10th Street				07	/	31	/ Y	2017	Y
	City The Dalles	State OR	Zip Code 97058-4020				-	PR6143	717251 his Period	
	FEC ID number of contributing federal political committee.	С			inoun	U			83.	_
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.31	 P/I	R Dedi	uctio	on (\$83.	33 Montł	nly)	
С.	Full Name of Individual (Last, First, Middle Initia Barnett, Alvin R., , Mr.,) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 13515 135th Avenue				^M 07	1	31	/ Y	ү ү 2017	Y
	City South Ozone Park	State NY	Zip Code 11420-3526	A				PR6144	017251 nis Period	
	FEC ID number of contributing federal political committee.	С			_		y .	, ,	11.	54
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		M	emc	tem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 231.43	P/	R Ded	ucti	on (\$11.	.54 Mont	hly)	
s	UBTOTAL of Receipts This Page (optional)						, .	. ,	152.	87
Т	OTAL This Period (last page this line number on	ly)					_			

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FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee		
Α.	Full Name of Individual (Last, First, Middle Initia Blanks, John T., , Mr., Mailing Address 1603 Langhorne Road	l) or Full O	rganization Name	Date of Receipt	
				07 31 2017	
	City	State	Zip Code	Transaction ID : PR6144417251	
	Lynchburg	VA	24503-3117	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		166.67	
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item	
	New York Life Insurance Company	Age	nt		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1166.69	P/R Deduction (\$166.67 Monthly)	
в.	Full Name of Individual (Last, First, Middle Initia Holdinghausen, David R., , Mr.,	l) or Full O	rganization Name	Date of Receipt	
	Mailing Address 601 American Inn Road			07 31 2017	
	City State		Zip Code	Transaction ID : PR6144517251	
	Villa Ridge	MO	63089-2213	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	ů – Elektrik – Elektri			
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)	
с.	Full Name of Individual (Last, First, Middle Initia Ferguson, Rodney S., , Mr.,	l) or Full O	rganization Name	Date of Receipt	
	Mailing Address 466 Blackwolf Run Drive			07 / D D / Y Y Y Y 31 / 2017	
	City	State	Zip Code	Transaction ID : PR6144617251	
	Wildwood	MO	63040-1571	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		166.67	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1166.69	P/R Deduction (\$166.67 Monthly)	
s	UBTOTAL of Receipts This Page (optional)			383.34	
т	OTAL This Period (last page this line number or	ıly)			

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)			
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee				
Full Name of Individual (Last, First, Middle I A. Stockton, Mary, , Ms.,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 3700 10th Avenue Apt. 3A			07 31 Y Y Y Y Y			
City San Diego	State CA	Zip Code 92103-4494	Transaction ID : PR6144917251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		83.34			
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)			
Full Name of Individual (Last, First, Middle I Kanaley Jr., Thomas J., , Mr.,	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 150 Lenox Way			07 / D D / Y Y Y Y 2017			
City San Francisco	State CA	Zip Code 94127-1113	Transaction ID : PR6145217251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		250.00			
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)			
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Date of Receipt			
Mailing Address 1098 Duffers Lane			07 / D D / Y Y Y Y Y Y 2017			
City Louisville	State GA	Zip Code 30434-5263	Transaction ID : PR6146517251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		41.67			
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)			
SUBTOTAL of Receipts This Page (optional)			375.01			
TOTAL This Period (last page this line numbe	r only)					

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		Use separate schedule(s)		(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11		11b 14	11c	12	47
Any information copied from such Reports and or for commercial purposes, other than using t			erson for	the pu	irpose c			
NAME OF COMMITTEE (In Full)								
New York Life Insurance Com	ipany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle Poindexter, Robert J., , Mr.,	Initial) or Full C	rganization Name	Date	e of F	Receipt			
Mailing Address 351 Janie Lane)7	/ D 3 [/]		ү 2017	Y
City Shreveport	State LA	Zip Code 71106-6028				: PR6146 Receipt th		
FEC ID number of contributing federal political committee.	C			_			250.0	00
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) Int		Merr	no Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R I	Deduc	tion (\$2	50.00 Mor	ithly)	
Full Name of Individual (Last, First, Middle B. Haye, Paul J. , , Mr .,	Initial) or Full C	rganization Name	Date	e of F	Receipt			
Mailing Address 6475 Dowling Road)7	/ D 3		y y 2017	Y
City Perrysburg	State OH	Zip Code 43551-9514				: PR6147: Receipt th		
FEC ID number of contributing federal political committee.	C						41.6	67
Name of Employer (for Individual) New York Life Insurance Company					no Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	P/R [)educ ^ı	tion (\$4 ⁻	1.67 Month	nly)		
Full Name of Individual (Last, First, Middle C. Ruh, Brian P., , Mr.,	Initial) or Full C	rganization Name	Date	e of F	Receipt			
Mailing Address 23702 W Steinthal Road					/ D 3		2017	Y
City Kiel	State WI	Zip Code 53042-4994				: PR6148 Receipt th		
FEC ID number of contributing federal political committee.	С			_	9	 	250.0	00
Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent			Men	no Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R I	Deduc	tion (\$2	50.00 Mor	nthly)	
SUBTOTAL of Receipts This Page (optional).					, ,		541.6	67
TOTAL This Period (last page this line number	er only)							

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements ma ame and a	y not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initia Krautschun Jr., Harvey C., , Mr., Mailing Address PO Box 157	l) or Full Oi	rganization Name	Date of Receipt
	<u></u>			07 31 2017
	City Spearfish	State SD	Zip Code 57783-0157	Transaction ID : PR6148617251
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	New York Life Insurance Company	Agei	nt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)
в.	Full Name of Individual (Last, First, Middle Initia Sabella Sr., Kevin, , Mr.,	l) or Full Oi	rganization Name	Date of Receipt
	Mailing Address 107 Wyona Avenue			07 31 2017
	City	State NY	Zip Code	Transaction ID : PR6149217251
			11757-5940	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	28.83	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 201.81	P/R Deduction (\$28.83 Monthly)
с.	Full Name of Individual (Last, First, Middle Initia Moritz, Kathy, , Ms.,	l) or Full Oi	rganization Name	Date of Receipt
	Mailing Address 18547 Clairmont Circle E			07 31 2017
	City	State	Zip Code	Transaction ID : PR6149817251
	Northville	MI	48168-8539	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.48
	Name of Employer (for Individual) New York Life Insurance Company		ıpation (for Individual) aging Partner	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			117.31
т	OTAL This Period (last page this line number on	ly)		

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FOR LINE NUMBER:

PAGE 214 OF

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	cal Action Committee	
Full Name of Individual (Last, First, Midd A. Goudeau Jr., Peter, , Mr.,	lle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 6430 Schiller Street			07 31 Y Y Y Y Y 2017
City	State TX	Zip Code 77055-5325	Transaction ID : PR6151117251
Houston		11055-5325	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
New York Life Insurance Company	Age	ent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)
Full Name of Individual (Last, First, Midd B. Hebron, Robert, , Mr.,	lle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 231 Wyoming Avenue			07 31 2017
City	State	Zip Code	Transaction ID : PR61517251
Maplewood	NJ	07040-2013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		38.47
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Vice President	Memo Item
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼		538.58	P/R Deduction (\$38.47 Bi-Weekly)
Full Name of Individual (Last, First, Midd C. Lai, Connie, , Ms.,	lle Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 4402 Sweet Rose Court			07 / D D / Y Y Y Y 07 31 2017
City	State	Zip Code	Transaction ID : PR6152217251
Sugar Land	TX	77479-4489	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)
SUBTOTAL of Receipts This Page (optional	al)		110.14
TOTAL This Period (last page this line nur	mber only)	······	

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FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politic	al Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initia Phillips, Boyd R., , Mr., Mailing Address 14191 Highway 221	l) or Full Or	ganization Name	Date of Receipt
			I	07 31 2017
	City Marion	State NC	Zip Code 28752-7552	Transaction ID : PR6152617251
	FEC ID number of contributing federal political committee.	C	20132-1332	Amount of Each Receipt this Period
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	New York Life Insurance Company			
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)
в.	Full Name of Individual (Last, First, Middle Initia Nelson, Tom, , Mr.,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 102 Arlington Road			07 31 2017
	City	State NY	Zip Code	Transaction ID : PR6153017251
			13501-6207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	pation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Kolbeck, Christopher, , Mr.,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 11 Mountain Laurel Way			07 31 2017
	City	State	Zip Code	Transaction ID : PR6155917251
	Azusa	CA	91702-6265	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	New York Life Insurance Company Receipt For:	Mana	0	
	Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			119.67
	OTAL This Period (last page this line number on			

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)				
I LIVILLED RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11				
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma the name and a	Ay not be sold or used by any p ddress of any political committe	13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	npany Politi	cal Action Committee					
Full Name of Individual (Last, First, Middle Swaney, Jonathan, , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 1304 Commonwealth Ave	nue		07 31 2017				
City Alexandria	State VA	Zip Code 22301-2022	Transaction ID : PR6156617251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		80.00				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Director	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. Nembhard, Melford E., , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 57 Gainscott Lane	01-1-	7: 0.4	07 31 2017				
City Willingboro	State NJ	Zip Code 08046-3029	Transaction ID : PR61817251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		58.00				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)				
Full Name of Individual (Last, First, Middle C. Scheuer, Lee C., , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 75 Cheyenne Point			07 / D D / Y Y Y Y 07 31 2017				
City Portola Vally	State CA	Zip Code 94028-7623	Transaction ID : PR61917251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		30.00				
Name of Employer (for Individual) New York Life Insurance Company	Occi Agei	upation (for Individual) nt	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)				
SUBTOTAL of Receipts This Page (optional)		168.00				
TOTAL This Period (last page this line num	ber only)						

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s) for each category of the	(check only one)							
ITEMIZED RECEIPTS	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports or for commercial purposes, other than usi	and Statements mang the name and a	I ay not be sold or used by any p uddress of any political committe	person for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	cal Action Committee								
Full Name of Individual (Last, First, Mide A. Marling, Joann, , Ms.,	dle Initial) or Full C	Prganization Name	Date of Receipt							
Mailing Address 218 Niles Street			07 31 2017							
City Bakersfield	State CA	Zip Code 93305-3504	Transaction ID : PR6318617251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		50.00							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)							
Full Name of Individual (Last, First, Mide B. Gould, Diane H., , Ms.,	dle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 1102 Prospect Hill Place			07 / D D / Y Y Y Y 2017							
City Rockville	State MD	Zip Code 20850-2868	Transaction ID : PR63817251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		250.00							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)							
Full Name of Individual (Last, First, Mide C. Muratore, Joseph, , Mr.,	dle Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 96 Highland Avenue			07 / 31 2017							
City Port Washington	State NY	Zip Code 11050-4044	Transaction ID : PR6424817251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		27.24							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ociate General Counsel	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 204.30	P/R Deduction (\$13.62 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		327.24							
TOTAL This Period (last page this line nu	mber only)									

Use separate schedule(s)

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ITEMIZED RECEIPTS	Use separate schedule(s)			(check only one)										
				category of the Summary Page	3	4 11a 13		11b 14	11c		2 16	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements mane and a	ay not be sol address of an	d or used by any p y political committee	erson e to s	for the	pur ntrib	pose of	soliciting	g cont	ributio	ons		
$\left \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	any Politi	cal Actio	n Committee										
/	-	-												
Α.	Full Name of Individual (Last, First, Middle Initi Seter, Arthur, , Mr.,	al) or Full C	rganization r		Date of Receipt									
	Mailing Address 1 Merion Drive					07 31 2017								
	City Purchase	State NY	Zip Cod 10577						PR6426 leceipt th			_		
	FEC ID number of contributing federal political committee.	С						-			153.86	6		
	Name of Employer (for Individual) New York Life Insurance Company		upation (for I nior Managing	,		М	emc	tem						
	Receipt For: Primary General Other (specify) ▼		Year-to-Date		P/R Deduction (\$76.93 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initi Mayer, Carol, , Ms.,	al) or Full C	Organization N	Name		Date o	f Re	eceipt						
	Mailing Address 16 Rolling Ridge Road			07 / ^D ^D / ^Y ^Y ^Y ^Y ^Y ^Y ^Y										
	City U Saddle River	State NJ	Zip Cod 07458-						PR6426					
	FEC ID number of contributing federal political committee.	C					τοτ	Each H	leceipt th	ns Pe	riod 38.50)		
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Vp & Associate General Counsel				Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	288.75	P/R Deduction (\$19.25 Bi-Weekly)									
С.	Full Name of Individual (Last, First, Middle Initi Valdes, Gilberto, , Mr.,	al) or Full C	Organization N	Name		Date o	f Re	eceipt						
	Mailing Address 650 6th Avenue	01-1-	7:000			м м 07		31	JL	201	7			
	City New Hyde Park	State NY	Zip Cod 11040-					-	PR6427 leceipt th		-			
	FEC ID number of contributing federal political committee.	С				<u> </u>		, ,	, ,		40.00)		
	Name of Employer (for Individual) New York Life Insurance Company		upation (for I President	ndividual)		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date	300.00	יוו	P/R Dec	lucti	on (\$20	.00 Bi-W	eekly)				
	UBTOTAL of Receipts This Page (optional)				• -			, ,	9	2	232.36	5		

FOR LINE NUMBER: PAGE 219 OF 352

	EMIZED RECEIPTS		f	Jse separate schedule(s) or each category of the Detailed Summary Page	•	eck onl 11a 13		e) 11b 14	11c 15		_	17	
	y information copied from such Reports and Stat for commercial purposes, other than using the na												
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical	Action Committee									
Α.	Full Name of Individual (Last, First, Middle Initial McCarthy, Elizabeth, , Ms.,) or Full C	Drgar	nization Name		Date o	f Rec	ceipt					
	Mailing Address 124 College Place	1 -			07 31 Y Y Y Y 2017								
	City South Orange	State NJ		Zip Code 07079-2506					PR6427 eceipt th				
	FEC ID number of contributing federal political committee.	С						,			30.78		
	Name of Employer (for Individual) New York Life Insurance Company		•	ion (for Individual) /ice President		М	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1730.85	P	/R Ded	luctio	n (\$115	5.39 Bi-V	Veekly)		
B.	Full Name of Individual (Last, First, Middle Initial Arnheiter, Michael P., , Mr.,) or Full C	Drgar	nization Name		Date o	f Rec	ceipt					
	Mailing Address 1152 Buttonwood Lane	1		м м 07		D D D 31	/ Y	201]			
	City Sanibel	State Zip Code FL 33957-7304							PR6451 eceipt th		riod		
	FEC ID number of contributing federal political committee.	С						,			16.66		
	Name of Employer (for Individual) New York Life Insurance Company		Occupation (for Individual) Agent					Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2916.62	P/R Deduction (\$416.66 Monthly)								
с.	Full Name of Individual (Last, First, Middle Initial Pelz, Douglas W., , Mr.,) or Full C	Drgar	nization Name		Date o	f Rec	ceipt					
	Mailing Address 2404 E Thomas Hill Drive					^M 07	1	D D D 31	/ Y	201		1	
	City Coeur D Alene	State ID		Zip Code 83815-6334				-	PR6454 eceipt th				
	FEC ID number of contributing federal political committee.	number of contributing									50.00		
	Name of Employer (for Individual) New York Life Insurance Company	upat ent	ion (for Individual)		M	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00						ın (\$50.	00 Mont	hly)			
s	UBTOTAL of Receipts This Page (optional)			•				,	,	6	97.44		
т	OTAL This Period (last page this line number on	ly)		•				,			-		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 220 OF 3 (check only one)						
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance Con	npany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle Miller, Lillian, , Ms.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 10 Sander Court	State	Zip Code	07 31 2017 Transaction ID : PR6470917251						
Middle Island	NY	11953-2076	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		28.00						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 210.00	P/R Deduction (\$14.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. Foster, John, , Mr., Mailing Address 5622 Bowmiller Road	Initial) or Full C	Date of Receipt							
	-		07 31 2017						
City Lockport	State NY	Zip Code 14094-9050	Transaction ID : PR6472017251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.94						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. Karmen, Robert, , Mr.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 23 Evergreen Parkway			07 / D D / Y Y Y Y 2017						
City Westport	State CT	Zip Code 06880-2529	Transaction ID : PR6472117251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) & Deputy General Counsel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			154.94						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

FOR LINE NUMBER:

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Stat for commercial purposes, other than using the na			on for the purpose of soliciting contributions					
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical Action Committee						
Α.	Full Name of Individual (Last, First, Middle Initial Mahoney, Tim T., , Mr., Mailing Address 1313 Cherry Tree Lane City Knoxville) or Full O State TN	Organization Name Zip Code 37919-8162	Date of Receipt 07 / 31 / 2017 Transaction ID : PR64917251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee. Name of Employer (for Individual)	C	cupation (for Individual)	41.67 Memo Item					
	New York Life Insurance Company	Age		P/R Deduction (\$41.67 Monthly)					
в.	Full Name of Individual (Last, First, Middle Initial Colleary, Maura, , Ms., Mailing Address 260 Forest Avenue	Date of Receipt 07 31 2017							
	City Glen Ridge	State NJ	Zip Code 07028-1727	Transaction ID : PR65017251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) ce President	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)					
C.	Full Name of Individual (Last, First, Middle Initial Calafati, Michael F., , Mr.,) or Full O	Organization Name	Date of Receipt					
	Mailing Address 230 Cutleaf Circle			07 / D D / Y Y Y Y 2017					
	City Harleysville	State PA	Zip Code 19438-2443	Transaction ID : PR6520117251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		83.34					
	Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify)	Age	cupation (for Individual) ent e Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)					
s	UBTOTAL of Receipts This Page (optional)			175.01					
т	OTAL This Period (last page this line number on	ly)	•••••	· · · · · · · · · · · · · · · · · · ·					

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	any Politic	al Action Committee								
Α.	Full Name of Individual (Last, First, Middle Init Pasyanos, Nicholas, , Mr.,	ial) or Full Or	ganization Name	Date of Receipt							
	Mailing Address 58 Watergate Drive			07 31 2017							
	City Amawalk	State NY	Zip Code 10501-1108	Transaction ID : PR6521117251 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		40.00							
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item							
	New York Life Insurance Company	Vice	President & Actuary								
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)							
В.	Full Name of Individual (Last, First, Middle Init Seth, Puneet, , Mr.,	ial) or Full Or	ganization Name	Date of Receipt							
	Mailing Address 860 Old Plank Square			07 31 2017							
	City	State GA	Zip Code	Transaction ID : PR6543417251							
	Johns Creek	GA	30097-1924	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		76.94							
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) aging Partner	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)							
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Curry, John, , Mr.,	ial) or Full Or	ganization Name	Date of Receipt							
	Mailing Address 27 Flax Pond Woods Road			07 / D D / Y Y Y Y 2017							
	City Setauket	State NY	Zip Code 11733-1623	Transaction ID : PR6543517251							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) Iging Partner	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)							
F	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			347.72							

FOR LINE NUMBER: PAGE 223 OF 352

	EMIZED RECEIPTS		fo	se separate schedule(s) r each category of the etailed Summary Page	`	eck only 11a 13	y on	e) 11b 14		11c 15	12		17
	y information copied from such Reports and Stat for commercial purposes, other than using the na												
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ıy Politi	ical	Action Committee									
A.	Full Name of Individual (Last, First, Middle Initial Nanna, Brett, , Mr.,) or Full C	Organi	zation Name	Date of Receipt								
	Mailing Address 15022 Corral Court					м м 07	/	31		/ Y	201		
	City Carmel	State IN		Zip Code 46032-1084				on ID					
	FEC ID number of contributing federal political committee.	C			_	Amount	: of I	ach i	Hece	eipt thi		38.48	
	Name of Employer (for Individual) New York Life Insurance Company		•	on (for Individual) g Partner		M	emo	Item					
	Poppint For:			-to-Date ▼ 288.60	F	P/R Ded	uctio	n (\$19	9.24	Bi-We	ekly)		
B	Full Name of Individual (Last, First, Middle Initial Bui, Mike, , Mr.,) or Full C	Drgani	zation Name		Date of	Ber	ceint					
	Mailing Address 1911 Empire Circle			07	/	31		/ Y	y 2017				
	City Arlington	State TX		Zip Code 76002-6605		Trans Amount							
	FEC ID number of contributing federal political committee.	C							nece	, pr tin	-	00.00)
	Name of Employer (for Individual) New York Life Insurance Company	Occ Ser	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year	-to-Date ▼ 750.00	P/R Deduction (\$50.00 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initial Lescinskas, Brian, , Mr.,) or Full C	Organi	zation Name		Date of	Red	ceipt					
	Mailing Address 21 Conley Court					м м 07	/	31		/ Y	2017		1
	City Bidgefield	State CT		Zip Code 06877-3202				on ID					
	FEC ID number of contributing federal political committee.	EC ID number of contributing					of I	Each I	Rece	eipt thi	-	iod 30.76	;
	Name of Employer (for Individual) New York Life Insurance Company	•	on (for Individual) e President	_	M	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	F	P/R Ded	uctic	on (\$11	15.38	3 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)										3	69.24	
	DTAL This Period (last page this line number onl			`				, .	Ì	,		-	

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ITEMIZED RECEIPTS		Ose separate schedule(s) for each category of the Detailed Summary Page	(check only one)							
Any information copied from such Reports and or for commercial purposes, other than using the			e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middle I AScialabba, Angelo, , Mr.,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 47 Lake Shore Drive			07 / D D / Y Y Y Y Y 07 31 2017							
City Eastchester	State NY	Zip Code 10709-5216	Transaction ID : PR6545317251							
		10709-5210	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.47							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
New York Life Insurance Company	Vic	e President								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 594.58	P/R Deduction (\$42.47 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I	nitial) or Full C	Organization Name								
B. Curry, Kevin, , Mr.,			Date of Receipt							
Mailing Address 75 Upland Road	State	Zip Code	07 / D D / Y Y Y Y 2017							
New Milford	CT	06776-2102	Transaction ID : PR6546517251							
	01	001102102	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		154.00							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Associate	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		, 1155.00	P/R Deduction (\$77.00 Bi-Weekly)							
Full Name of Individual (Last, First, Middle I Hubbard, Roman, , Mr.,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 111 Cobble Court			07 31 2017							
City	State	Zip Code	Transaction ID : PR65681117251							
Windsor	СО	80550-6137	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		84.94							
Name of Employer (for Individual)	ame of Employer (for Individual) Occupation (for Individual)									
New York Life Insurance Company	Mar	naging Partner								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 637.05	P/R Deduction (\$42.47 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			281.41							
TOTAL This Period (last page this line number										

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FOR LINE NUMBER:

PAGE 225 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: Mark 11 a mark 11 a mark								
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma ame and ac	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions								
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politic	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Initia Lafferty, Craig A., , Mr., Mailing Address 26 Laurelwood Court	l) or Full Or	ganization Name	Date of Receipt								
				07 31 2017								
	City Medford	State NJ	Zip Code 08055-8364	Transaction ID : PR65717251								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item								
	New York Life Insurance Company	Ager	nt									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)								
B.	Full Name of Individual (Last, First, Middle Initia Malloy, Anthony, , Mr.,	l) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 329 Beechwood Road			07 31 2017								
	City	State	Zip Code	Transaction ID : PR65817251								
	Ridgewood	NJ	07450-2306	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		19.24								
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) & Chief Investment Officer	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1413.54	P/R Deduction (\$115.39 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initia Davidson, Sheila, , Ms.,	l) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 45 East Ninth Street Apt. 6/7			07 / D D / Y Y Y Y 07 31 2017								
	City New York	State NY	Zip Code 10003-6307	Transaction ID : PR65917251								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) CLO & General Counsel	Memo Item								
	Receipt For: Primary General Other (specify)	Primary General General										
s	UBTOTAL of Receipts This Page (optional)		•	300.02								
т	OTAL This Period (last page this line number on	ly)										

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	I ay not be sold or used by any p address of any political committe	13 14 15 16 17 verson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
> New York Life Insurance Com	ipany Politi	cal Action Committee									
Full Name of Individual (Last, First, Middle Brakke, Verne, , Mr.,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 624 N Jackson Avenue			07 31 2017								
City Pierre	State SD	Zip Code 57501-2314	Transaction ID : PR6597917251								
FEC ID number of contributing			Amount of Each Receipt this Period								
federal political committee.	C		41.67								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item								
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)								
Full Name of Individual (Last, First, Middle B. Morris, Charles W., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 789 Rock Springs Road			07 31 2017								
City	State	Zip Code	Transaction ID : PR6598717251								
Kingsport	TN	37664-5265	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		100.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ	upation (for Individual)	Memo Item								
Receipt For:		Year-to-Date ▼	1								
Other (specify)		, 700.00	P/R Deduction (\$100.00 Monthly)								
Full Name of Individual (Last, First, Middle C. Vilaret, Victoria, , Ms.,	Initial) or Full C	Organization Name	Date of Receipt								
Mailing Address 526 18th Avenue Northeas	t		07 31 2017								
City Saint Petersburg	State FL	Zip Code 33704-4604	Transaction ID : PR6602117251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$25.00 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			166.67								
TOTAL This Period (last page this line numb	er only)	······									

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IT.			Use separate schedule(s)	(che	ck only	y or	ne)					
11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pendotrease of any policitical committee	erson fo	or the	purp ntrib	oose of	soliciting	g cont	tributio	ons	
	NAME OF COMMITTEE (In Full)											
$\langle \rangle$	New York Life Insurance Compa	any Politi	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Initi Mackesy, Leonard, , Mr.,	ial) or Full O	rganization Name		Date of Receipt							
	Mailing Address 8 Hillside Avenue				07 31 2017							
	City Kearny	State NJ	Zip Code 07032-1633					PR6602				
			0.002	_ A	moun	OT	Each H	leceipt th	iis Pe	rioa	_	
	FEC ID number of contributing federal political committee.	С		14			-	-		50.00	0	
	Name of Employer (for Individual)	Оссі	upation (for Individual)		M	emo	Item					
	New York Life Insurance Company	Corp	porate Vice President									
	Receipt For: Primary General	Aggregate	Year-to-Date V									
	Other (specify) V		375.00	P/I	R Ded	uctio	on (\$25.	.00 Bi-W	eekly)			
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name									
В.	Mysliwiec, Rychard, , Mr.,				ate of	Re	ceipt	_				
	Mailing Address 1693 Northgate Drive				м м 07	/	31		201	7	ŕ	
	City	State PA	Zip Code					PR6697				
	Pittsburgh		15241-3221	A	mount	t of	Each H	leceipt th	nis Pe	riod		
	FEC ID number of contributing federal political committee.	C				76.94						
	Name of Employer (for Individual) New York Life Insurance Company	Occi Mar	Memo Item									
	Receipt For:	Aggregate	Year-to-Date V		1							
	Other (specify) ▼		577.05	P/R Deduction (\$38.47 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initi Wilcox, Lyle, , Mr.,	ial) or Full O	rganization Name	D	ate of	Re	ceipt					
	Mailing Address 44 Secluded Pond Drive				^M 07	/	31) / Y	201	7	Y	
	City	State	Zip Code		Trans	act	ion ID :	PR6698	71725	51		
	Frisco	ТХ	75034-4333	A	mount	t of	Each R	Receipt th	nis Pe	riod		
	FEC ID number of contributing federal political committee.	С			_		,	9		38.48	8	
	Name of Employer (for Individual)	Осси	upation (for Individual)	1	Μ	emc	Item					
	New York Life Insurance Company	Corp	porate Vice President									
	Receipt For:	Aggregate	Year-to-Date ▼			4	a.a. (@4.0					
	Other (specify)		288.60	P/R Deduction (\$19.24 Bi-Weekly)								
⊢	UBTOTAL of Receipts This Page (optional)		· · · · · · · · · · · · · · · · · · ·		-		y .	· · ·	1	165.42	2	

FOR LINE NUMBER: PAGE 228 OF 352

T	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)					
	y information copied from such Reports and Stat for commercial purposes, other than using the na								
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ıy Politi	tical Action Committee						
Α.	Full Name of Individual (Last, First, Middle Initial Hensley, Allen, , Mr.,) or Full C	Organization Name	Date of Receipt					
	Mailing Address 594 Larium Lane			07 / D D / Y Y Y Y Y 07 31 2017					
	City Crystal Lake	State IL	Zip Code 60012-3376	Transaction ID : PR6699917251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		30.00					
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) nior Associate	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initial Landaas, Marci, , Ms.,) or Full C	Organization Name	Date of Receipt					
D.	Mailing Address 11932 Middlebury Drive								
	City Tampa	State FL	Zip Code 33626-2520	Transaction ID : PR6700717251					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) ce President	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initial Barton, Jacqueline, , Ms.,) or Full C	Organization Name	Date of Receipt					
	Mailing Address 36 Windemere Drive			07 / D D / Y Y Y Y 07 31 2017					
	City Yonkers	State NY	Zip Code 10710-2416	Transaction ID : PR6704817251					
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 47.00					
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) e President	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 352.50	P/R Deduction (\$23.50 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		•	115.48					
т	OTAL This Period (last page this line number on	y)	▶						

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		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middle A. Elinon, Carlomagno, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 812 Winchester Avenue			07 31 / Y Y Y Y Y							
City Hillside	State NJ	Zip Code 07205-3123	Transaction ID : PR6704917251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.48							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. Scollan, Kathleen, , Ms.,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 306 Longvue Terrace			07 31 / Y Y Y Y							
City Yonkers	State NY	Zip Code 10710-2113	Transaction ID : PR6705617251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.48							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)							
Full Name of Individual (Last, First, Middle c. Freundlich, Linda, , Ms. ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 60 Baraud Road South			07 / D D / Y Y Y Y Y 2017							
City Scarsdale	State NY	Zip Code 10583-6805	Transaction ID : PR6707117251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		38.48							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional).			115.44							
TOTAL This Period (last page this line number	er only)									

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116			for each catego Detailed Summa		×	11a 13		11b 14	11c 15		12 16	17
Any or fo	information copied from such Reports and Sta or commercial purposes, other than using the r	atements maname and a	ay not be sold or us ddress of any politi	sed by any per cal committee	rson to so	for the	purp ntrib	ose of	soliciting	g cont	tributio	ons
	IAME OF COMMITTEE (In Full)											
	New York Life Insurance Compa	ny Politi	cal Action Co	mmittee								
	ull Name of Individual (Last, First, Middle Initia Van Blaricom, Frederick, , Mr.,	al) or Full O	rganization Name	Date of Receipt								
_	Iailing Address 7 Hortons Road				07 / D D / Y Y Y Y 2017							
	City Maattawa	State NY	Zip Code						PR6709			
_	Nesttown		10998-3605		- 1	Amount	t of	Each R	eceipt th	nis Pe	riod	
	EC ID number of contributing ederal political committee.	С						,	- 45-		27.24	1
N	lame of Employer (for Individual)	Occ	upation (for Individu	al)		M	emo	Item				
_	lew York Life Insurance Company	Cor	porate Vice Presider	nt								
F	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General Other (specify) ▼			204.30	P	/R Ded	uctio	on (\$13.	62 Bi-We	eekly)		
			AF 1 AF 1	204.00								
	ull Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name									
_	Virendra, Sonali, , Ms.,					Date of	f Re	ceipt				
_	Iailing Address 32 Spruce Avenue	State Zin Code					/	D D D 31	/ Y	201	ΥΥΥ 7	
	Sity	State NJ	Zip Code						PR6709			
_	Emerson	NJ 07630-1573						Each R	eceipt th	nis Pe	riod	
	EC ID number of contributing ederal political committee.	С				Ľ.		,			76.94	1
	lame of Employer (for Individual) lew York Life Insurance Company		upation (for Individu nior Vice President	ial)		M	emo	Item				
F	Receipt For:	Aggregate	Year-to-Date V		7							
	Primary General			577.05	P	/R Ded	uctic	on (\$38	47 Bi-We	eekly)		
	Other (specify) v	L										
	ull Name of Individual (Last, First, Middle Initia Quartararo, Paul, , Mr.,	al) or Full O	rganization Name			Date of	f Re	ceipt				
_	Aailing Address 30 Westcott Road					07 ^M	/	D D D 31	/ Y	201		
	Dity Constant	State	Zip Code			Trans	acti	on ID :	PR6710	01725	j1	
_	Stamford	СТ	06902-8128		- :	Amount	t of	Each R	eceipt th	nis Pe	riod	
	EC ID number of contributing ederal political committee.	С				<u> </u>		9	,		50.00)
N	lame of Employer (for Individual)	Occi	upation (for Individu	al)		M	emo	Item				
١	lew York Life Insurance Company	Vice	President	,								
F	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General			375.00	F	P/R Ded	luctio	on (\$25.	00 Bi-W	eekly)		
	Other (specify)	575.00										
su	BTOTAL of Receipts This Page (optional)			>				, , , ,		1	154.18	3
то	TAL This Period (last page this line number of	nly)						,				_

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
II LIVIIZED KEGEIF 13		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	npany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle Crossman, Kim R., , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 30 Capt Lathrop Drive PO Box 62			M M / D D / Y Y Y Y 07 31 2017						
City South Deerfield	State MA	Zip Code 01373-1105	Transaction ID : PR6717251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
Full Name of Individual (Last, First, Middle B. Talgo, Mark, , Mr.,	e Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 5 Stony Hill Road	Mailing Address 5 Stony Hill Road City State Zip Code								
City West Harrison	State	2ip Code 10604-1504	Transaction ID : PR6721317251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.48						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Managing Director	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. Pepe, Theresa, , Ms.,	Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 875 Route 312			07 31 / Y Y Y Y Y 2017						
City Brewster	State NY	Zip Code 10509-3726	Transaction ID : PR6724617251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		29.96						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 224.70	P/R Deduction (\$14.98 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		118.44						
TOTAL This Period (last page this line num	per only)								

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			for each category of the Detailed Summary Page		K 11a 13		11b 14	11c 15		2	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p address of any political committee	erson e to s	for the	pur ntrit	pose of	soliciting	g conti	ributio	ons
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	ical Action Committee								
A.	Full Name of Individual (Last, First, Middle Initi Grossman, Eric, , Mr.,	al) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 8310 35 Avenue Apt. 40				07 31 Y Y Y Y Y 2017						
	City Jackson Heights	State NY	Zip Code 11372-5317					PR67250 eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>					76.94	4
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President		М	emo	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.05	1	P/R Ded	lucti	on (\$38.	47 Bi-We	eekly)		
_	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Drganization Name								
в.	Caruso, Donna J., , Ms., Mailing Address 5510 Southwest 4th Place Apt.	308	Date of Receipt								
	City	State	Zip Code		Trans	act	ion ID :	PR67817	7251		
	Cape Coral	FL	33914-7220		Amoun	t of	Each R	eceipt th	is Per	riod	
	FEC ID number of contributing federal political committee.	С			<u> </u>					41.67	7
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent		М	emo	o Item				
	Receipt For:	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)							
С.	Full Name of Individual (Last, First, Middle Initi Viveiros, Christopher, , Mr.,	al) or Full O	Drganization Name		Date of	f Re	eceipt				
	Mailing Address 3518 Colmar Quarter				07	J.	31		201 [°]	7	ſ
	City Norfolk	State VA	Zip Code 23509-1247					PR6918			
	FEC ID number of contributing federal political committee.	С					J			230.78	3
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) naging Partner		М	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.85	1	P/R Ded	lucti	ion (\$11	5.39 Bi-V	Veekly	')	
s	UBTOTAL of Receipts This Page (optional)		•	► _	Ľ.		7	5	3	349.39)
T	OTAL This Period (last page this line number of	only)		•			-				_

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ITEMIZED RECEIPTS for each	-	Use separate schedule(s)	(check only one)								
	for each category of the Detailed Summary Page	X 11a 13	11b	11c 15	12 16	17					
Any information copied from such Reports or for commercial purposes, other than usi			erson for the p	ourpose of so	liciting	contribut	ions				
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	cal Action Committee									
Full Name of Individual (Last, First, Mid A. Key, Olen, , Mr.,	dle Initial) or Full O	rganization Name	Date of	Date of Receipt							
Mailing Address 1438 Crenshaw Place S	South		M M 07								
City Montgomery	State AL	Zip Code 36106-2138		action ID : PF of Each Rec							
FEC ID number of contributing federal political committee.	С					60.0	0				
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ociate	Me	mo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00	P/R Dedu	uction (\$30.00	Bi-Wee	kly)					
Full Name of Individual (Last, First, Mid B. Ianniello, Susan, , Ms.,	dle Initial) or Full O	rganization Name	Date of	Receipt							
Mailing Address 19 Rivendell Drive							Ŷ				
City Shelton	State CT	Zip Code 06484-4332		of Each Rec							
FEC ID number of contributing federal political committee.	C					41.6	57				
Name of Employer (for Individual) New York Life Insurance Company	Occ	upation (for Individual) nt	P/R Deduction (\$41.67 Monthly)								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69									
Full Name of Individual (Last, First, Mid C. Asher, Izhak, , Mr.,	dle Initial) or Full O	rganization Name	Date of	Receipt							
Mailing Address 29 Center Drive	State	Zip Code	07 T	/ D D D 31		2017	Y				
City Roslyn	NY	Zip Code 11576-1445		action ID : PF of Each Rec							
FEC ID number of contributing federal political committee.	C			,	y	250.0	0				
Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	upation (for Individual) nt	Me	mo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)								
SUBTOTAL of Receipts This Page (option	nal)			,	,	351.6	7				
TOTAL This Period (last page this line nu	mber only)					1.40					

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)				
	y information copied from such Reports and Stat for commercial purposes, other than using the n			rson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee					
Α.	Full Name of Individual (Last, First, Middle Initial Pomerantz, Lloyd, , Mr.,) or Full O	rganization Name	Date of Receipt				
	Mailing Address 1675 York Avenue Aprtment 10L			M M / D D / Y Y Y Y 07 31 2017				
	City	State	Zip Code	Transaction ID : PR6945917251				
	New York	NY	10128-6752	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		91.34				
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item				
	New York Life Insurance Company	Age	nt					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 639.38	P/R Deduction (\$91.34 Monthly)				
в.	Full Name of Individual (Last, First, Middle Initial Kagan, Harris E., , Mr.,) or Full O	rganization Name	Date of Receipt				
	Mailing Address 1608 Pandora Avenue	07 31 2017						
	City	State	Zip Code	Transaction ID : PR6946217251				
	Los Angeles	CA	90024-6114	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		83.33				
	Name of Employer (for Individual) New York Life Insurance Company	Occı Age	upation (for Individual) nt	Memo Item				
		Aggregate	Year-to-Date 🔻					
	Primary General Other (specify) ▼		583.31	P/R Deduction (\$83.33 Monthly)				
с.	Full Name of Individual (Last, First, Middle Initial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 22920 Coventry Woods Lane			07 31 2017				
	City	State MI	Zip Code	Transaction ID : PR6946317251				
	Southfield	IVII	48034-2108	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer (for Individual)		upation (for Individual)	Memo Item				
New York Life Insurance Company Ag Receipt For: Aggregat Primary General Other (specify) Image: Company				_				
			Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)				
s	UBTOTAL of Receipts This Page (optional)			424.67				
т	OTAL This Period (last page this line number on	ly)						

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	eck only	/ one	e)				
11		for each category of the Detailed Summary Page	×	11a 13		11b	11c		ſ	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	I ay not be sold or used by any pe address of any political committee	erson to so	for the	purp	ose of	soliciting	contr	ributio	ons
\setminus	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Init Silva-Hayes, Valeria, , Ms.,	ial) or Full O	Organization Name	Date of Receipt							
	Mailing Address 113 Woodmere Drive				07 31 / Y Y Y Y 07 31 2017						
	City Parlin	State NJ	Zip Code 08859-2160	_				PR69469 eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y			30.00)
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	F	P/R Ded	uctio	n (\$30.0	00 Month	nly)		
R	Full Name of Individual (Last, First, Middle Init Isaacs, Leonard H., , Mr.,	ial) or Full O	Organization Name		Date of	Bec	ceint				
0.	Mailing Address 27 Barker Avenue Apt. 415				07	/	D D D 31	/ Y	2017		7
	City	State	Zip Code		Trans	actio	on ID : F	PR69471	17251	1	
	White Plains	NY	10601-1559	_	Amount	of E	Each Re	eceipt th	is Per	iod	
	FEC ID number of contributing federal political committee.	С					y	- - -	1	00.00)
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	cupation (for Individual) ent		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)							
C.	Full Name of Individual (Last, First, Middle Init Scott Jr., Kenneth P., , Mr.,	ial) or Full O	Organization Name		Date of	Rec	ceipt				
	Mailing Address 9841 Cherokee Road				^M 07	/	D D D 31	L	2017	7	
	City Richmond	State VA	Zip Code 23235-1209					PR6948			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	9		41.67	,
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		M	emo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	F	P/R Ded	uctio	on (\$41.0	67 Montl	nly)		
s	UBTOTAL of Receipts This Page (optional)		•				,	,	1	71.67	
Т	OTAL This Period (last page this line number of	only)									

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17					
	ny information copied from such Reports and SI for commercial purposes, other than using the			person for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	any Politi	cal Action Committee						
Α.	Full Name of Individual (Last, First, Middle Init Allison, Harvey, , Mr.,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 6228 Wild Heron Way			07 31 / Y Y Y Y 2017					
	City College Grove	State TN	Zip Code 37046-1406	Transaction ID : PR6948317251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.			116.00					
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Partner	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 870.00	P/R Deduction (\$58.00 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Init Moore, Timothy, , Mr.,	rganization Name	Date of Receipt						
Mailing Address 1539 High Bluff Drive				07 31 2017					
	City Diamond Bar	State CA	Zip Code 91765-2631	Transaction ID : PR6949617251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)					
С.	Full Name of Individual (Last, First, Middle Init Middleton, Todd L., , Mr.,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 1203 15th Avenue N			07 / D D / Y Y Y Y Y 31 2017					
	City Jacksonville Beach	State FL	Zip Code 32250-3635	Transaction ID : PR6949917251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		41.67					
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)					
\vdash	UBTOTAL of Receipts This Page (optional)			207.67					
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and s or for commercial purposes, other than using th			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) New York Life Insurance Comp	any Polit	ical Action Committee	
Full Name of Individual (Last, First, Middle In Parr, James E., , Mr., Mailing Address 43603 Inglenook Court	itial) or Full C	Drganization Name	Date of Receipt 07 / 31 / 2017 Transaction ID : PR6950017251
Sterling Heights	MI	48314-1922	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		33.00
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
New York Life Insurance Company	Age	ent	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$33.00 Monthly)
Full Name of Individual (Last, First, Middle In Cobb III, Henry H., , Mr.,	iitial) or Full C	Drganization Name	Date of Receipt
Mailing Address 8218 Longneedle Drive	07 31 / Y Y Y Y		
City	State	Zip Code	Transaction ID : PR6950817251
Montgomery	AL	36117-5125	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		83.33
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.31	P/R Deduction (\$83.33 Monthly)
Full Name of Individual (Last, First, Middle In C. Franks, Chad, , Mr.,	iitial) or Full C	Drganization Name	Date of Receipt
Mailing Address 126 Honours Drive			07 31 / Y Y Y Y 2017
City Madison	State MS	Zip Code 39110-6512	Transaction ID : PR6951017251
		39110-0312	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		153.84
Name of Employer (for Individual) New York Life Insurance Company		supation (for Individual) naging Partner	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.80	P/R Deduction (\$76.92 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		·····	270.17
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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a 13		1b 4	11c 15	12	Г	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committee	erson e to se	for the	purpo	se of	soliciting	, contri	ibutio	ns
	NAME OF COMMITTEE (In Full)										
	New York Life Insurance Compa	any Politi	cal Action Committee								
А.	Full Name of Individual (Last, First, Middle Init Bombet II, Charles N., , Mr.,	ial) or Full O	rganization Name		Date of	Rece	eipt				
	Mailing Address 1370 Ashland Drive				м м 07] ' [D D 31	/ Y	2017		
	City	State LA	Zip Code					PR69512			
	Baton Rouge		70806-7836		Amount	of Ea	ach Re	eceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С			<u> </u>			-	Ę	50.00	
	Name of Employer (for Individual)	Осси	upation (for Individual)		M	emo l	tem				
	New York Life Insurance Company	Age	nt								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General		350.00	1 F	P/R Ded	uction	(\$50.0	00 Month	ıly)		
	Other (specify) v		550.00	4							
	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name								
В.	Reeves, Cameron M., , Mr.,		Date of	Rece	eipt						
	Mailing Address 1101 Harvest Hill Drive					1	D D 31	/ Y	2017		
	City	State	Zip Code					PR69519			
	Prosper	TX	75078-9150		Amount	of Ea	ach Re	eceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С						-	(60.00	
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		M	emo l	tem				
	Receipt For:	Aggregate	Year-to-Date V		-						
	Primary General	, iggi eguie		1 F	P/R Ded	uction	(\$60.0	0 Month	ıly)		
	Other (specify) v		, 420.00	P/R Deduction (\$60.00 Monthly)							
C.	Full Name of Individual (Last, First, Middle Initi Fitzpatrick, Jeffrey, , Mr.,	ial) or Full O	rganization Name		Date of	Rece	eipt				
	Mailing Address 103 Prospect Avenue				07 ^M] ' [D D 31	/ Y	2017		
	City	State	Zip Code		Trans	actio	n ID : I	PR69529	917251	1	
	Waterloo	IA	50703-4241	_	Amount	of Ea	ach Re	eceipt th	is Peri	od	
	FEC ID number of contributing federal political committee.	С				,		,	Ę	83.34	
	Name of Employer (for Individual)	Осси	upation (for Individual)		Μ	emo l	tem				
	New York Life Insurance Company	Ager	nt		_						
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General		583.38	1 1	P/R Ded	uction	ı (\$83.:	34 Montl	nly)		
	Other (specify)		303.30								
⊢	UBTOTAL of Receipts This Page (optional)			I		· · ·	-		19	93.34	_
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An or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politie	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initial Garry, Kevin G., , Mr.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 7005 S Edinburg Place	State	Zip Code	07 31 2017
	Sioux Falls	SD	57108-9402	Transaction ID : PR6954117251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		60.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item
	Poppint For:		Year-to-Date ▼ 420.00	P/R Deduction (\$60.00 Monthly)
в.	Full Name of Individual (Last, First, Middle Initial Myers, Gary, , Mr.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 10825 Southwest 83rd Terrace	M M / D D / Y Y Y Y 07 31 2017		
	City Augusta	State KS	Zip Code 67010-8025	Transaction ID : PR6954317251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)
с.	Full Name of Individual (Last, First, Middle Initial Paulseen, Brandon R., , Mr.,	l) or Full O	rganization Name	Date of Receipt
	Mailing Address 3411 N Webb Road			07 / D D / Y Y Y Y 07 31 2017
	City Wichita	State KS	Zip Code 67226-8125	Transaction ID : PR6954417251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify)	P/R Deduction (\$100.00 Monthly)		
s	UBTOTAL of Receipts This Page (optional)			410.00
т	OTAL This Period (last page this line number on	ly)	·····	

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
ightarrow New York Life Insurance Com	npany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. De La Rambelje, Peter, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 9841 N Western Fork Trail			07 31 2017						
City Tucson	State AZ	Zip Code 85742-8712	Transaction ID : PR6955817251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		200.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) Int	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1400.00	P/R Deduction (\$200.00 Monthly)						
Full Name of Individual (Last, First, Middle B. Borrevik Jr., Berge, , Mr.,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 10727 N Elma Drive			07 / 10 0 / Y Y Y Y 2017						
City Spokane	State WA	Zip Code 99218-2432	Transaction ID : PR6955917251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$50.00 Monthly)						
Other (specify) ▼		350.00							
Full Name of Individual (Last, First, Middle Hanson, Matthew J., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 645 G Street Suite 100-77	9		07 31 Y Y Y Y Y 07 31 2017						
City Anchorage	State AK	Zip Code 99501-3443	Transaction ID : PR6957317251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date 291.69	P/R Deduction (\$41.67 Monthly)						
SUBTOTAL of Receipts This Page (optional)			291.67						
TOTAL This Period (last page this line numb	per only)								

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and a	Ay not be sold or used by any p ddress of any political committe	13 14 15 16 1 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) New York Life Insurance Con	npany Politi	cal Action Committee									
Full Name of Individual (Last, First, Middle A. Medina, Juan M., , Mr.,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9419 Seabrook Drive Nort	heast		07 31 2017								
City Albuquerque	State NM	Zip Code 87111-7407	Transaction ID : PR6957417251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		33.00								
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 231.00	P/R Deduction (\$33.00 Monthly)								
Full Name of Individual (Last, First, Middle B. Abadilla, Milo A., , Mr.,	Date of Receipt										
Mailing Address 3308 Moncucco Court			07 / D D / Y Y Y Y 2017								
City San Jose	State CA	Zip Code 95148-4348	Transaction ID : PR6958317251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)								
Full Name of Individual (Last, First, Middle Dominguez , Anna, , Ms.,	Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 32-20 41 Street			07 / D D / Y Y Y Y 07 31 2017								
City Astoria	State NY	Zip Code 11103-3522	Transaction ID : PR6965317251 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		38.46								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)			321.46								
TOTAL This Period (last page this line numb	per only)										

Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)							
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		2 6	17	
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson f to sol	or the	pur ntrib	pose of	soliciting	g cont	ributio	ons	
\setminus	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Compa	any Politi	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Init Tozzi, Phyllis, , Ms.,	tial) or Full O	rganization Name	Date of Receipt								
Mailing Address 166 E Main Street					м м 07	/	31) / Y	y 201	7 7	ŕ	
	City Bergenfield	State NJ	Zip Code 07621-2248					PR6965				
	FEC ID number of contributing federal political committee.	С						- 47-		27.24	4	
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President		M	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 204.30	P/	′R Ded	ucti	on (\$13.	.62 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Init Verastegui, Victor, , Mr.,	rganization Name		Date o	f Re	eceipt						
	Mailing Address 4612 Avenue Longchamps			м м 07	/	31	/ Y	201 [°]				
	City	State	Zip Code					PR69667				
	Lutz	FL	33558-2823		Amoun	t of	Each R	leceipt th	nis Per	riod		
	FEC ID number of contributing federal political committee.	C			38.46							
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Vice President				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$19.23 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Init Tsang, Bik Y., , Ms.,	tial) or Full O	rganization Name		Date o	f Re	eceipt					
	Mailing Address 80 Elizabeth Street Apt. 3P				07 31 2017							
	City New York	State NY	Zip Code 10013-5596					PR7001		riod		
	FEC ID number of contributing federal political committee.	С			anoun		,	, incompt th		250.00)	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	upation (for Individual) nt		Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P	/R Dec	lucti	on (\$25)	0.00 Mor	nthly)			
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of					_	y	- J	3	15.70)	

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politic	al Action Committee							
Α.	Full Name of Individual (Last, First, Middle Initia Santos, Daniel B., , Mr., Sr. Mailing Address 1000 Alta Vista Road	l) or Full Org	ganization Name	Date of Receipt						
	City	State	Zip Code	Transaction ID : PR7017251						
	Louisville	KY	40205-1728	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		30.00						
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item						
	New York Life Insurance Company	Agen	t							
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)						
в.	Full Name of Individual (Last, First, Middle Initia Hsiao, Chu Ling, , Ms.,	Date of Receipt								
	Mailing Address 19701 Northampton Drive			07 31 2017						
	City	State CA	Zip Code 95070-3333	Transaction ID : PR7067517251						
	Saratoga		95070-5555	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		91.34						
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agen	pation (for Individual) ht	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 639.38	P/R Deduction (\$91.34 Monthly)						
с.	Full Name of Individual (Last, First, Middle Initia Di Bella, Joseph L., , Mr.,	l) or Full Org	ganization Name	Date of Receipt						
	Mailing Address 19 Brookhaven Lane			07 31 / Y Y Y Y 07 31 2017						
	City East Greenbush	State NY	Zip Code	Transaction ID : PR7068717251						
			12061-4230	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		41.67						
	Name of Employer (for Individual)		pation (for Individual)	Memo Item						
	New York Life Insurance Company Receipt For:	Agent								
	Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
s	UBTOTAL of Receipts This Page (optional)			163.01						
	OTAL This Period (last page this line number on									

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			Use separate schedule(s)	(che	(check only one)								
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page				11b 14	11c	12	17			
An or	y information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	erson to so	13 for the p licit con	ourp trib	ose of	soliciting	g contribu	tions			
	NAME OF COMMITTEE (In Full)												
\rangle	New York Life Insurance Compar	ny Politio	cal Action Committee										
Δ	Full Name of Individual (Last, First, Middle Initial Bruderman, III, John M., , Mr.,) or Full Oi	rganization Name		Date of	Re	ceint						
Mailing Address 8506 Little Neck Parkway				Date of Receipt									
	City	State	Zip Code	_	07 31 2017 Transaction ID : PR7069417251								
	Floral Park	NY	11001-1014					Receipt th					
FEC ID number of contributing federal political committee.							, .	-	50.	00			
	Name of Employer (for Individual)	Occu	upation (for Individual)	-	Me	mo	Item						
	New York Life Insurance Company	Agei	nt										
		Aggregate	Year-to-Date 🔻										
	Primary General Other (specify) ▼		350.00	P	/R Dedu	ictio	on (\$50	.00 Montl	hly)				
_	Full Name of Individual (Last, First, Middle Initial) or Full O	rganization Name			_							
В.	Steele, Joel I., , Mr.,		-	Date of	Re	•	_						
	Mailing Address 22 Belmont Circle				07	/	31		2017	Y			
	City	State Zip Code				acti	on ID :	PR70700	017251				
	Columbus	NJ 08022-9714						Receipt th					
	FEC ID number of contributing federal political committee.	С			250.00								
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent				Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General			P/R Deduction (\$250.00 Monthly)									
	Other (specify) v		1750.00										
с.	Full Name of Individual (Last, First, Middle Initial Christopher, John A., , Mr.,) or Full Oi	rganization Name		Date of	Re	ceipt						
	Mailing Address 112 N Myrtle Aveue				M M	/	D I I		Y Y	Y			
	City	State	Zip Code		07	acti	31 on ID :	: PR7070	2017 817251				
	Elmhurst	IL	60126-0000					Receipt th					
	FEC ID number of contributing												
	federal political committee.	C			<u> </u>	-	y	. y	41.	67			
	Name of Employer (for Individual)	Occu	upation (for Individual)		Me	emo	Item						
	New York Life Insurance Company	Ager	nt										
	Receipt For:	Aggregate	Year-to-Date ▼			4 : .	(0.44		L L J				
	Other (specify)		291.69		7R Deal	JCIIC	50 (54)	.67 Mont	niy)				
S	UBTOTAL of Receipts This Page (optional)		····· ►				y	, j	341.	67			
т	OTAL This Period (last page this line number on	ly)	••••••				,						

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) New York Life Insurance (Company Politi	cal Action Committee						
Full Name of Individual (Last, First, M Williams, Jeffrey C., , Mr.,	,	Organization Name	Date of Receipt					
Mailing Address 317 Sharondale Drive			07 31 Y Y Y Y Y 2017					
City	State	Zip Code	Transaction ID : PR7071117251					
El Paso	ТХ	79912-4257	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		100.00					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
New York Life Insurance Company	Age	ent						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General		700.00	P/R Deduction (\$100.00 Monthly)					
Other (specify) ▼		700.00						
Full Name of Individual (Last, First, M B. Jagodzinske, Glenn R., , Mr.,	iddle Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 6623 Southwest Gisbo	ourne Court		07 31 2017					
City	State	Zip Code	Transaction ID : PR7071317251					
Topeka	KS	66614-4455	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		41.67					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		, 291.69	P/R Deduction (\$41.67 Monthly)					
Full Name of Individual (Last, First, M C. Kattke, Timothy J., , Mr.,	iddle Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 603 Main Street PO Box 149			07 31 Y Y Y Y 07 31 2017					
City	State	Zip Code	Transaction ID : PR7071417251					
Redfield	SD	57469-1209	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		50.00					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
New York Life Insurance Company	Age	nt						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)					
SUBTOTAL of Receipts This Page (opti-	,		191.67					
TOTAL This Period (last page this line r	number only)							

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11									
Any information copied from such Reports and or for commercial purposes, other than using t			13 14 15 16 1 rerson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)		, see e, pontour committee										
New York Life Insurance Com	npany Politi	cal Action Committee										
Full Name of Individual (Last, First, Middle Lau, Joe K., , Mr.,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 11278 E Del Golfo			07 31 Y Y Y Y Y 2017									
City Yuma	State AZ	Zip Code 85367-8959	Transaction ID : PR7071617251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		50.00									
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)									
Full Name of Individual (Last, First, Middle B. Dixon, Michael D., , Mr.,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5055 Pathfinder Avenue			07 31 2017									
City Oak Park	State CA	Zip Code 91377-4704	Transaction ID : PR7071817251									
FEC ID number of contributing federal political committee.	С	313/7-4/04	Amount of Each Receipt this Period									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)									
Full Name of Individual (Last, First, Middle Larsen, Jan, , Mr.,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2008 123rd Avenue Northe	State	Zip Code										
Lake Stevens	WA	98258-9503	Transaction ID : PR7126317251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		58.00									
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)									
SUBTOTAL of Receipts This Page (optional).			158.00									
TOTAL This Period (last page this line number	er only)											

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	npany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle Homler, Robert E., , Mr.,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 209 Orchard Drive			07 31 2017					
City Mahwah	State NJ	Zip Code 07430-1445	Transaction ID : PR71417251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		70.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) Int	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 490.00	P/R Deduction (\$70.00 Monthly)					
Full Name of Individual (Last, First, Middle B. Van Winkle, William, , Mr.,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 41 Breezy Point Road			07 / 10 0 / 10 0 V V V V V V V V V V V V V V V V V					
City Little Silver	State NJ	Zip Code 07739-1703	Transaction ID : PR71717251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)					
Full Name of Individual (Last, First, Middle C. Gisonda, Michael, , Mr.,	e Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 4565 Northwest 24th Way			07 / D D / Y Y Y Y 07 31 2017					
City Boca Raton	State FL	Zip Code 33431-8435	Transaction ID : PR7175417251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		166.67					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1166.69	P/R Deduction (\$166.67 Monthly)					
SUBTOTAL of Receipts This Page (optional)		486.67					
TOTAL This Period (last page this line num	ber only)							

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)								
			for each category of the Detailed Summary Page		× 11a 13		11b	11c 15		2	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements mand a	I ay not be sold or used by any p address of any political committe	erson e to s	for the	pur ntrib	pose of	soliciting	conti	ributio	ons		
	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	any Politi	ical Action Committee										
Α.	Full Name of Individual (Last, First, Middle Initi Shock, Michael C., , Mr.,	al) or Full O	Organization Name		Date of Receipt								
Mailing Address 21 Rebecca Lane					07 31 2017								
	City Conway	State AR	Zip Code 72034-4961					PR7176					
	FEC ID number of contributing federal political committee.	С			<u> </u>					50.00	0		
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	supation (for Individual) ent		М	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00]	P/R Ded	ucti	on (\$50.	00 Montł	nly)				
_	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Drganization Name			. –							
в.	Civello, Alisa, , Ms., Mailing Address 1257 Balboa Avenue			Date of Receipt 07 31 2017									
	City	State	Zip Code		Trans	acti	ion ID : I	PR71784	1725	1			
	Burlingame	CA	94010-4834		Amoun	t of	Each R	eceipt th	is Per	riod			
	FEC ID number of contributing federal political committee.	C			38.48								
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) e President		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.60				P/R Deduction (\$19.24 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initi Shadie, George R., , Mr.,	al) or Full O	Drganization Name		Date of	f Re	eceipt						
	Mailing Address 57 Teaberry Drive Sand Springs	State	Zin Oodo		07 / D D / Y Y Y Y 2017								
	City Drums	PA	Zip Code 18222-2051					PR7241		riod			
	FEC ID number of contributing federal political committee.	С					,	J		250.00	0		
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00]	P/R Ded	lucti	on (\$25(0.00 Mon	ithly)				
s	UBTOTAL of Receipts This Page (optional)			▶ -	<u> </u>	-	,		3	338.48	3		
Т	OTAL This Period (last page this line number of	only)		•						-10			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$				
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee					
Full Name of Individual (Last, First, Middle Varsa, Jeffrey, , Mr.,	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 300 2nd Avenue Unit 3132			07 31 2017				
City	State	Zip Code	Transaction ID : PR7251817251				
Needham	MA	02494-2942	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		250.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Age	ent	-				
Receipt For:	Aggregate	Year-to-Date V					
Primary General Other (specify) ▼		1750.00	P/R Deduction (\$250.00 Monthly)				
Full Name of Individual (Last, First, Middle B. Stoll, Daniel, , Mr.,	Date of Receipt						
Mailing Address 16 Kingston Circle			07 31 2017				
City	State	Zip Code	Transaction ID : PR7251917251				
Lockport	NY	14094-5606	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		100.00				
Name of Employer (for Individual) New York Life Insurance Company	Occ	upation (for Individual) ent	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼					
Primary General Other (specify) ▼		, 700.00	P/R Deduction (\$100.00 Monthly)				
Full Name of Individual (Last, First, Middle Ferris, Matthew S., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 100 Countryside Road Nort			07 / D D / Y Y Y Y 2017				
City New Philadelphia	State OH	Zip Code 44663-1327	Transaction ID : PR7252617251				
		44003-1327	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		100.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Age	nt					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)				
SUBTOTAL of Receipts This Page (optional).			450.00				
TOTAL This Period (last page this line number	er only)						

Use separate schedule(s)

FOR LINE NUMBER:

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Concerc only one) Image: The second secon				
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma ame and ad	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee					
Α.	Full Name of Individual (Last, First, Middle Initial Salib, Raouf S., , Mr.,) or Full Or	rganization Name	Date of Receipt				
	Mailing Address 1221 Mill Creek Road			07 / D D / Y Y Y Y 07 31 2017				
	City Flint	State MI	Zip Code 48532-2348	Transaction ID : PR7252917251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С						
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	pation (for Individual) ht	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1222.69	P/R Deduction (\$174.67 Monthly)				
в.	Full Name of Individual (Last, First, Middle Initial Fulkerson, Joseph, , Mr.,) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 905 Seneca Road			07 31 2017				
	City Great Falls	State VA	Zip Code 22066-1318	Transaction ID : PR7253117251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		50.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	ipation (for Individual) nt	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 350.00	P/R Deduction (\$50.00 Monthly)				
C.	Full Name of Individual (Last, First, Middle Initial Lucchino, Joseph W., , Mr.,) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 1100 Cambridge Street	1		07 / D D / Y Y Y Y 07 31 2017				
	City Natrona Heights	State PA	Zip Code 15065-1010	Transaction ID : PR72717251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		50.00				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	pation (for Individual) It	Memo Item				
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)					
s	UBTOTAL of Receipts This Page (optional)		•	274.67				
т	OTAL This Period (last page this line number on	ly)	•					

Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)								
			for each category of the Detailed Summary Page	×	11a 13		11b	11c		Г	17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	L ay not be sold or used by any pe ddress of any political committee	erson to so	for the	purp ntrib	oose of	soliciting	contr	ibutic	ns		
\setminus	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	any Politi	cal Action Committee										
Α.	Full Name of Individual (Last, First, Middle Init Lenz, Scott, , Mr.,	ial) or Full O	rganization Name		Date of Receipt								
	Mailing Address 41 Bellevue Avenue												
	City Summit	State NJ	Zip Code 07901-2007	_				PR72959 eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>		-	 		76.94			
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) , Deputy Gc & Chief Tax Counsel		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.05	F	P/R Ded	uctio	on (\$38.4	47 Bi-We	ekly)				
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name		Data at								
в.	Hayes, John, , Mr., Mailing Address 7 Sun Valley Way				Date of	r Re	Ceipt	/ Y	2017		1		
	City	State	Zip Code		Trans	acti	on ID : I	PR72960	17251				
	Long Valley	NJ	07853-3038	_	Amount	t of	Each R	eceipt th	is Per	iod			
	FEC ID number of contributing federal political committee.	С			66.00								
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 495.00	P/R Deduction (\$33.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Init Betz, Donna, , Ms.,	ial) or Full O	rganization Name		Date of	^r Re	ceipt						
	Mailing Address 1407 73rd Circle Northeast				07 31 2017								
	City St. Petersburg	State FL	Zip Code 33702-4615					PR7345					
	FEC ID number of contributing federal political committee.	С								38.48			
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President		M	emc	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	F	P/R Ded	ucti	on (\$19.	24 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)		•	-			,	, , , , , , , , , , , , , , , , , , ,	18	81.42			
Т	OTAL This Period (last page this line number of	only)	····· •										

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: Mark 11 a mark 11 a mark						
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements ma ame and a	ay not be sold or used by any pe address of any political committee	prson for the purpose of soliciting contributions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee							
A.	Full Name of Individual (Last, First, Middle Initia Fitzgerald, Edward, , Mr.,	l) or Full C	organization Name	Date of Receipt						
	Mailing Address 181 Whitehall Boulevard			07 / D D / Y Y Y Y 07 31 2017						
	City Garden City	State NY	Zip Code 11530-1337	Transaction ID : PR7345517251						
	Gaiden City		11550-1557	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		88.00						
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
	New York Life Insurance Company	Mar	naging Director							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		660.00	P/R Deduction (\$44.00 Bi-Weekly)						
B.	Full Name of Individual (Last, First, Middle Initial Baumberger, Kevin, , Mr.,	organization Name	Date of Receipt							
	Mailing Address 11715 N 178th Circle			07 31 Y Y Y Y 2017						
	City	State	Zip Code	Transaction ID : PR7347017251						
	Bennington	NE	68007-5742	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		153.86						
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		, 1153,95	P/R Deduction (\$76.93 Bi-Weekly)						
C.	Full Name of Individual (Last, First, Middle Initia Berlin, Scott, , Mr.,	l) or Full C	organization Name	Date of Receipt						
	Mailing Address 22 Jerome Road			07 / D D / Y Y Y Y 07 31 2017						
	City	State NY	Zip Code	Transaction ID : PR7347117251						
	Syosset		11791-3207	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		230.78						
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
	New York Life Insurance Company	Sen	ior Vice President							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify)		1730.85	P/R Deduction (\$115.39 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			472.64						
т	OTAL This Period (last page this line number on	ly)	•							

Use separate schedule(s)

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)						
11			for each category of the Detailed Summary Page		× 11a 13		11b 14	11c 15	12	Г	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any address of any political committ	person ee to s	for the solicit co	purp ntrib	oose of utions f	soliciting	, contri	ibutio	ns
\setminus	NAME OF COMMITTEE (In Full)										
$ \rangle$	New York Life Insurance Compa	any Politi	cal Action Committee	•							
<u> </u>	Full Name of Individual (Last, First, Middle Initi Heller, Thomas, , Mr.,	al) or Full O	Organization Name		Date o	f Re	ceint				
	Mailing Address 230 Mahwah Road				M M		D D	/ Y	Y		7
	City	State	Zip Code		07 Trong		31	PR7348	2017 517251	1.0	
	Mahwah	NJ	07430-1440					eceipt th			
	FEC ID number of contributing federal political committee.	С					-			46.48	5
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President		М	emo	Item				
	Receipt For:										
	Primary General	.99.094.0	Year-to-Date ▼	-1	P/R Ded	uctio	on (\$23.	24 Bi-We	ekly)		
	Other (specify)		348.60	-							
B	Full Name of Individual (Last, First, Middle Initi DelGreco, Anthony, , Mr.,	al) or Full O	Organization Name		Date o	f Ro	coint				
Ь.	Mailing Address 103 Bocage Circle					/		/ Y	Y	Y Y	-
			1		07		31	Ľ	2017		
	City	State LA	Zip Code					PR73493			
		LA 70503-4354				t of	Each R	eceipt th	is Peri	iod	
	FEC ID number of contributing federal political committee.	C			38.48						
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Associate		М	emo	Item				
	Receipt For:	Aggregate	Year-to-Date V		1						
	Primary General Other (specify) ▼			P/R Deduction (\$19.24 Bi-Weekly)							
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Silber, Irwin, , Mr.,	al) or Full O	Organization Name		Date o	f Re	ceipt				
	Mailing Address 16 Green Hill Lane				07		D D D 31		2017	,]
	City New Hempstead	State NY	Zip Code 10977-1607					PR7349			
	i		10017-1007		Amoun	t of	Each R	eceipt th	is Peri	lod	_
	FEC ID number of contributing federal political committee.	С			Ļ.		y	y	}	82.00	
	Name of Employer (for Individual)		upation (for Individual)		M	emo	Item				
	New York Life Insurance Company Receipt For:		President & Actuary Year-to-Date ▼								
	Primary General Other (specify)	Aggregate	615.00		P/R Dec	luctio	on (\$41.	00 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)			►	<u> </u>				1€	66.96	
Т	OTAL This Period (last page this line number of	only)		•			, ,	,	_	-	

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	mpany Politi	cal Action Committee						
Full Name of Individual (Last, First, Middle A. Barbari, Patricia, , Ms.,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 200 East 36th Street Apt. 4D			07 31 2017					
City	State NY	Zip Code	Transaction ID : PR7349617251					
New York		10016-3644	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		30.00					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) & General Auditor	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle B. Larkin, Colleen, , Ms.,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 540 East 20th Street 7-B			07 31 2017					
City	State	Zip Code	Transaction ID : PR7350017251					
New York	NY	10009-1330	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		38.48					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Director	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼		233.48	P/R Deduction (\$15.00 Bi-Weekly)					
Full Name of Individual (Last, First, Middle C. Walsh, Richard, , Mr.,	e Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 32 Hilltop Road			07 31 2017					
City Waccabuc	State NY	Zip Code 10597-1003	Transaction ID : PR7350317251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Director	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optiona)		118.48					
TOTAL This Period (last page this line num	ber only)							

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			Use separate schedule(s)			(check only one)					
11			for each category of the Detailed Summary Page	X 11a	۱ _	11b 14	11c		2 6	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any po ddress of any political committee	erson for the to solicit of	ne pu contri	rpose of butions f	soliciting	g cont	ributio	ons	
	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	any Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Initi Karant, Bryan, , Mr.,	ial) or Full O	rganization Name	Date	of R	eceipt					
	Mailing Address 106 Beech Street			07		31 ²) / Y	y 201	7 7		
	City Cranford	State NJ	Zip Code 07016-1718				PR7350				
	FEC ID number of contributing federal political committee.	С		Ē		т. i			38.48	3	
	Name of Employer (for Individual) Occupation (for Individual) New York Life Insurance Company Corporate Vice President					o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R D	educt	ion (\$19.	.24 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initi Leber, Richard, , Mr.,	ial) or Full O	rganization Name	Date	of R	eceipt					
	Mailing Address 115 E 87th Street Apt. 20F	Ctoto	Zin Code	07		31) / Y	201	7 7		
	City New York	State NY	Zip Code 10128-1139				PR7351(Receipt th				
	FEC ID number of contributing federal political committee.	C			38.48					3	
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) Deputy Gc & Assistant Secretary		Mem	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi Mosquera, Jaime, , Mr.,	ial) or Full O	rganization Name	Date	of R	eceipt					
	Mailing Address 4 Rawding Court	01-1-	7. 0.4	0	07 / D D / Y Y Y Y 07 31 2017						
	City Verona	State NJ	Zip Code 07044-3202				PR7351				
	FEC ID number of contributing federal political committee.	С			31.00						
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Director & Actuary		Mem	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 209.94	P/R D	educt	tion (\$13	.62 Bi-We	eekly)			
	UBTOTAL of Receipts This Page (optional)		r	F	-	<u>,</u>		1	07.96	;	

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		Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	npany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. Nguyen, Binh, , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1575 Laurelwood Crossing	Place		07 31 / Y Y Y Y 2017						
City San Jose	State CA	Zip Code 95138-2753	Transaction ID : PR7352317251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		230.78						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. Wright, David, , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 50 Arcadia Road			07 31 / Y Y Y Y 07 31 2017						
City Allendale	State NJ	Zip Code 07401-2002	Transaction ID : PR7352917251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	FEC ID number of contributing								
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Director	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)						
Full Name of Individual (Last, First, Middle C. Jackson, Eric, , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 6761 Daniel Springs Way	State	Zip Code							
Austell	GA	30168-6358	Transaction ID : PR7416817251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 225.00	P/R Deduction (\$15.00 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			290.78						
TOTAL This Period (last page this line numb	per only)								

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Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and a	l ay not be sold or used by any ddress of any political committe	13 14 15 16 17 person for the purpose of soliciting contributions per to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	mpany Politi	cal Action Committee				
Full Name of Individual (Last, First, Middle Durbin-Bailey, Jamilyn, , Ms.,	e Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 5911 Audubon Manor Bou	ulevard		07 31 2017			
City Lithia	State FL	Zip Code 33547-5008	Transaction ID : PR7416917251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		38.00			
Name of Employer (for Individual) New York Life Insurance Company	ew York Life Insurance Company Corporate Vice President					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	P/R Deduction (\$19.00 Bi-Weekly)			
Full Name of Individual (Last, First, Middle B. McAvinn, Peter, , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 49 Fiske Road			07 31 2017			
City Wellesley	State MA	Zip Code 02481-3423	Transaction ID : PR7417251 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	° (
Name of Employer (for Individual) New York Life Insurance Company	Occ Mar	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)			
Full Name of Individual (Last, First, Middle C. Jackson, John, , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt			
Mailing Address 1603 Johnny Miller Trail City	State	Zip Code	07 / D D / Y Y Y Y 31 2017 Transaction ID : PR7417617251			
Austin	TX	78746-6125	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		38.48			
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ager	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.88	P/R Deduction (\$19.24 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optional)		307.26			
TOTAL This Period (last page this line num	ber only)					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)				
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) New York Life Insurance Compa	any Politi	cal Action Committee					
Full Name of Individual (Last, First, Middle Init A. Mostransky, Kyle, , Mr.,	tial) or Full C	organization Name	Date of Receipt				
Mailing Address 25 Sunnywoods Drive			07 31 2017				
City	State NY	Zip Code	Transaction ID : PR7418817251				
Huntington Station		11746-4732	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		91.34				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Age	ent					
Receipt For:	Aggregate	Year-to-Date V					
Primary General Other (specify) ▼		639.38	P/R Deduction (\$91.34 Monthly)				
Full Name of Individual (Last, First, Middle Init B. Oxenberg, Larry K., , Mr.,	tial) or Full C	organization Name	Date of Receipt				
Mailing Address 8302 Old York Road Apt. A23		07 31 2017					
City	State	Zip Code	Transaction ID : PR74517251				
Elkins Park	PA	19027-1531	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		54.00				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼	-				
Other (specify) ▼		378.00	P/R Deduction (\$54.00 Monthly)				
Full Name of Individual (Last, First, Middle Init C. Carter, Lawrence, , Mr.,	tial) or Full C	organization Name	Date of Receipt				
Mailing Address 1176 Monte De Luz Way			07 31 2017				
City	State	Zip Code	Transaction ID : PR7452417251				
Henderson	NV	89012-5730	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		76.94				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
New York Life Insurance Company	Mar	aging Partner					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)				
SURTOTAL of Reseints This Page (antional)			222.28				
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number							

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)			
	y information copied from such Reports and Stat for commercial purposes, other than using the n			rson for the purpose of soliciting contributions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical Action Committee				
A.	Full Name of Individual (Last, First, Middle Initial Fisher, Stephen, , Mr.,) or Full C	Organization Name	Date of Receipt			
	Mailing Address 601 Fairmont Avenue			07 31 2017			
	City	State	Zip Code	Transaction ID : PR7452817251			
	Westfield	NJ	07090-1360	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		76.94			
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	New York Life Insurance Company	SM	D & President - NYLIM				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		500.11	P/R Deduction (\$38.47 Bi-Weekly)			
в.	Full Name of Individual (Last, First, Middle Initial Conk, Richard, , Mr.,) or Full C	Organization Name	Date of Receipt			
	Mailing Address 503 Albert Street			07 31 2017			
	City	State	Zip Code	Transaction ID : PR7453417251			
	East Meadow	NY	11554-4946	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		27.24			
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) rporate Vice President	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 204.30	P/R Deduction (\$13.62 Bi-Weekly)			
с.	Full Name of Individual (Last, First, Middle Initial Feakes, William, , Mr.,) or Full C	Organization Name	Date of Receipt			
	Mailing Address 9445 Nicklaus Lane			07 31 2017			
	City	State	Zip Code	Transaction ID : PR7454217251			
	Crystal Lake	IL	60014-3340	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		40.00			
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item			
	New York Life Insurance Company	Sen	ior Associate				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	P/R Deduction (\$20.00 Bi-Weekly)			
s	UBTOTAL of Receipts This Page (optional)			144.18			
	OTAL This Period (last page this line number on		r				

FOR LINE NUMBER:

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ITEMIZED RE	CEIPTS		for each category of the Detailed Summary Page	(check o 11a 13		11c 15	12 16 17		
			ay not be sold or used by any address of any political committ	person for th		soliciting	contributions		
NAME OF COMM		any Politi	cal Action Committee	!					
Full Name of Indi A. Cumby, Bruce	ividual (Last, First, Middle Ini J., , Mr.,	tial) or Full O	Prganization Name	Date	of Receipt				
Mailing Address 816 Ellis Avenue				M 07		/ Y	2017		
City		State	Zip Code	Tra	nsaction ID : I	PR74717	251		
Newtown Sq		PA	19073-3906	Amou	unt of Each Re	eceipt th	is Period		
FEC ID number of federal political co	0	С					41.67		
Name of Employe	er (for Individual)	Occ	upation (for Individual)		Memo Item				
New York Life Ins	urance Company	Age	ent						
Receipt For:		Aggregate	Year-to-Date V						
Primary Other (spec	General cify) ▼		291.69	P/R D	eduction (\$41.6	67 Month	ıly)		
Full Name of Indi B. Cereghino , N	ividual (Last, First, Middle Ini Iark P., , Mr.,	tial) or Full O	organization Name	Date	of Receipt				
Mailing Address	34 Algonquin Wood Place			07		/ Y	2017		
City		State	Zip Code	Tra	nsaction ID : F	PR74719	17251		
Saint Louis		MO 63122-2013			unt of Each Re	eceipt th	is Period		
FEC ID number of federal political co	0	С			58.33				
Name of Employe New York Life Inst		Occ Age	upation (for Individual) ent		Memo Item				
Receipt For:		Aggregate	Year-to-Date V		-				
Other (spec	General cify) ▼		432.98	P/R De	eduction (\$58.3	33 Month	ly)		
Full Name of Indi c. Angiulli, Joh	ividual (Last, First, Middle Ini n M., , Mr.,	tial) or Full O	organization Name	Date	of Receipt				
	1059 Old Orchard Drive			07		/ Y	2017		
City		State PA	Zip Code		nsaction ID : I				
Gibsonia		FA	15044-6081	Amou	unt of Each Re	eceipt th	is Period		
FEC ID number of federal political co	0	С			. , .	, ,	135.00		
Name of Employe	er (for Individual)	Occi	upation (for Individual)		Memo Item				
New York Life Ins	urance Company	Age	nt						
Receipt For: Primary Other (spec	General cify)	Aggregate	Year-to-Date ▼ 945.00	P/R D	eduction (\$135	5.00 Mon	thly)		
SUBTOTAL of Rec	eipts This Page (optional)						235.00		
	(last page this line number					,			

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)	
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) New York Life Insurance Compa				
Α.		al) or Full O	rganization Name	Date of Receipt	
	Mailing Address 507 Pleasant Street			07 / D D / Y Y Y Y 2017	
	City Framingham	State MA	Zip Code 01701-2806	Transaction ID : PR7617251 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		38.48	
	Name of Employer (for Individual)		upation (for Individual)	Memo Item	
	New York Life Insurance Company Receipt For: Primary General Other (specify) ▼		ior Partner Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)	
B	Full Name of Individual (Last, First, Middle Initi Steele, Tema L., , Ms.,	al) or Full O	rganization Name	Date of Receipt	
0.	Mailing Address 4 Paige Court			07 31 2017	
	City Cherry Hill	State NJ	Zip Code 08002-2817	Transaction ID : PR76417251 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		416.66	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2916.62	P/R Deduction (\$416.66 Monthly)	
с.	Full Name of Individual (Last, First, Middle Initi Piotrowicz, Michael T., , Mr.,	al) or Full O	rganization Name	Date of Receipt	
	Mailing Address 347 Stenton Avenue	State	Zip Code	07 / ^D D / ^Y Y Y Y 31 2017	
	City Plymouth Meeting	PA	19462-1221	Transaction ID : PR77717251 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		250.00	
	New York Life Insurance Company Ag		upation (for Individual) ht	Memo Item	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)	
\vdash	UBTOTAL of Receipts This Page (optional)			705.14	

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ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)							
11			for each category of the Detailed Summary Page	X 11	-	11b 14	11c		12 16	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	। ay not be sold or used by any p uddress of any political committe	erson for	the p	urpose of	soliciting	g cont	tributio	ons		
	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Compa	any Politi	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Init Brough, Patrick G., , Mr.,	ial) or Full O	rganization Name	Date	e of I	Receipt						
	Mailing Address 315 Oxford Road)7	/ D 31	D / Y	20 ²	۲ 17	Y		
	City Havertown	State PA	Zip Code 19083-5514			ction ID :						
			19003-3314	Amo	ount o	of Each F	Receipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	С							30.00	0		
	Name of Employer (for Individual)	Осси	upation (for Individual)		Mer	no Item						
	New York Life Insurance Company											
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		210.00	P/R [Deduo	ction (\$30	.00 Montl	hly)				
				- I	1							
	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	organization Name									
Β.	Ingel, Tessa, , Ms.,			Date	e of I	Receipt						
	Mailing Address 817 22nd Street					07 / D D / Y Y Y Y 2017						
	City	State CA	Zip Code			ction ID :						
	Santa Monica	CA 90403-2008				Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	^g			100.00							
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		Mer	no Item						
	Receipt For:	Aggregate	Year-to-Date ▼		P/R Deduction (\$100.00 Monthly)							
	Primary General		700.00	P/R [
	Other (specify)	L										
C.	Full Name of Individual (Last, First, Middle Initi Morrison, Jeffrey A., , Mr.,	ial) or Full O	organization Name	Date	e of I	Receipt						
	Mailing Address 1451 Radbill Circle	1)7 [™]	/ D 31		201	7	Y		
	City	State PA	Zip Code			ction ID :						
	Berwyn	FA	19312-2502	Amo	ount o	of Each F	Receipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	С				y 1			83.34	4		
	Name of Employer (for Individual)	Осси	upation (for Individual)		Mer	no Item						
	New York Life Insurance Company	Ager	nt									
	Receipt For:	Aggregate	Year-to-Date V									
	Other (specify)		583.38	P/R I	Dedu	ction (\$83	3.34 Mont	hly)				
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of					5		2	213.34	4		

Use separate schedule(s)

FOR LINE NUMBER:

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	\checkmark 11a 11b 11c 12 13 14 15 16 17			
	y information copied from such Reports and Stat for commercial purposes, other than using the n			rson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee				
Α.	Full Name of Individual (Last, First, Middle Initial Auteri, Joseph A., , Mr., Mailing Address 1833 Montgomery Avenue	I) or Full O	Zip Code	Date of Receipt			
	Villanova	PA	19085-1816	Amount of Each Receipt this Period			
	EC ID number of contributing ederal political committee.						
	Name of Employer (for Individual) New York Life Insurance Company	ew York Life Insurance Company Agent					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)			
В.	Full Name of Individual (Last, First, Middle Initial Rocco, John, , Mr.,	l) or Full O	rganization Name	Date of Receipt			
	Mailing Address 16 Midland Road	07 / <u>31</u> / <u>2017</u>					
	City Lynnfield	State MA	Zip Code 01940-1265	Transaction ID : PR8017251 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		250.00			
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)			
с.	Full Name of Individual (Last, First, Middle Initial Wolf, Terrence L., , Mr.,	l) or Full O	rganization Name	Date of Receipt			
	Mailing Address 119 Great Circle Road			07 / 07 / 2017			
	City Landenberg	State PA	Zip Code 19350-9110	Transaction ID : PR81717251			
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period				
	Name of Employer (for Individual) New York Life Insurance Company	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1225.00	P/R Deduction (\$175.00 Monthly)			
s	UBTOTAL of Receipts This Page (optional)		•	675.00			
т	OTAL This Period (last page this line number on	ly)	•				

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)		_								
> New York Life Insuran	ce Company Politio	cal Action Committee								
Full Name of Individual (Last, Fi A. Fontanilla, Mariano C., , Mr.		rganization Name	Date of Receipt							
Mailing Address 8615 Elmhurst A	Avenue Apt. 6L		07 31 / Y Y Y Y 07 31 2017							
City Elmhurst	State NY	Zip Code 11373-2596	Transaction ID : PR82917251							
		11373-2390	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		35.00							
Name of Employer (for Individua	l) Occu	pation (for Individual)	Memo Item							
New York Life Insurance Compan	iy Agei	nt								
Receipt For:	Aggregate	Year-to-Date V								
Other (specify) V		245.00	P/R Deduction (\$35.00 Monthly)							
		<u> </u>	-							
Full Name of Individual (Last, Fine B. Hoffman, Gail L., , Ms.,	rst, Middle Initial) or Full Or	rganization Name	Data of Respiret							
Mailing Address 6419 Clearview	Street		Date of Receipt							
	Sileet		07 31 2017							
City	State	Zip Code	Transaction ID : PR83617251							
Philadelphia	PA	19119-2041	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		30.00							
Name of Employer (for Individua New York Life Insurance Compan		upation (for Individual) nt	Memo Item							
Receipt For:	Aggregate	Year-to-Date 🔻	1							
Primary General Other (specify) ▼		210.00	P/R Deduction (\$30.00 Monthly)							
		<u> </u>	-							
Full Name of Individual (Last, Fi C. Jones, Ronald D., , Mr.,		rganization Name	Date of Receipt							
Mailing Address 1261 Lake Vue	Drive		07 31 2017							
City	State	Zip Code	Transaction ID : PR83817251							
Butler	PA	16002-7625	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		83.00							
Name of Employer (for Individua New York Life Insurance Compar		upation (for Individual)	Memo Item							
Receipt For:	<u>, </u>	Year-to-Date ▼								
Primary General	Aggregate		P/R Deduction (\$83.00 Monthly)							
Other (specify)		581.00	1							
SUBTOTAL of Receipts This Page	e (optional)		148.00							
TOTAL This Period (last page this	line number only)									

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)						
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee							
A.	Full Name of Individual (Last, First, Middle Initia Catlos, Larry, , Mr.,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 2718 Rebecca Street	1		07 31 Y Y Y Y Y 2017						
	City Indiana	State PA	Zip Code 15701-2337	Transaction ID : PR83917251						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 83.34						
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)						
B.	Full Name of Individual (Last, First, Middle Initia Weatherford, Larry, , Mr.,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 106 S Norfolk Way	Address 106 S Norfolk Way State Zip Code								
	City Goose Creek	State	29445-7103	Transaction ID : PR8421417251 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		75.00						
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	P/R Deduction (\$75.00 Monthly)						
C.	Full Name of Individual (Last, First, Middle Initia Barilotti, Christy L., , Ms.,	l) or Full O	rganization Name	Date of Receipt						
	Mailing Address 50 S 16th Street Unit 5007			07 31 2017						
	City Philadelphia	State PA	Zip Code 19102-2535	Transaction ID : PR8421517251 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		49.67						
	Name of Employer (for Individual) New York Life Insurance Company	Occi Agei	upation (for Individual) nt	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 347.69	P/R Deduction (\$49.67 Monthly)						
s	UBTOTAL of Receipts This Page (optional)		•	208.01						
т	OTAL This Period (last page this line number on	ly)	•							

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IT.			Use separate schedule(s)	(cheo	ck onl	у о	ne)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15		Г	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any puddress of any political committee	erson fo to soli	or the	pur ntrit	pose of	soliciting	g contr	ributic	ons	
	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Compa	any Politi	cal Action Committee									
А.	Full Name of Individual (Last, First, Middle Initi Friedman, Lawrence, , Mr.,	ial) or Full O	rganization Name	D	ate o	f Re	eceipt					
	Mailing Address 317 Edgemont Lane				07 31 2017							
	City Park Ridge	State IL	Zip Code 60068-2613					PR84218 eceipt th				
	FEC ID number of contributing federal political committee.	С								38.48	3	
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner		М	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/I	R Ded	lucti	on (\$19.	24 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi Barnes, Larry M., , Mr.,	ial) or Full O	organization Name	D	ate o	f Re	eceipt					
	Mailing Address 429 Maxton Bass Road PO Box 1693					07 / 07 / 07 / 000						
	City Clinton	State NC	Zip Code 28329-1693									
	FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period						
	Name of Employer (for Individual) New York Life Insurance Company	f Employer (for Individual) Occupation (for Individual)					Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 294.00	P/F	P/R Deduction (\$42.00 Monthly)							
С.	Full Name of Individual (Last, First, Middle Initi Ducato, Robert P., , Mr.,	ial) or Full O	Organization Name	D	ate o	f Re	eceipt					
	Mailing Address 10 Franklin Street				^M 07		31		2017			
	City Westfield	State NY	Zip Code 14787-1009					PR8431 eceipt th		riod		
	FEC ID number of contributing federal political committee.	С		ļ			, .	, y	1	00.00)	
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent					Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	P/I	R Dec	lucti	on (\$100).00 Mor	ıthly)			
	UBTOTAL of Receipts This Page (optional)				-		5 I	5	1	80.48	}	
Г	OTAL This Period (last page this line number of	only)	••••••	· [-	a de la compañía de l			

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	\checkmark 11a 11b 11c 12 13 14 15 16 17			
	y information copied from such Reports and Stat for commercial purposes, other than using the n			person for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	ical Action Committee				
Α.	Full Name of Individual (Last, First, Middle Initial Williams, Eric C., , Mr., Mailing Address 6324 Camino Fuente Drive) or Full O	Organization Name	Date of Receipt			
		1 -		07 31 2017			
	City El Paso	State TX	Zip Code 79912-2628	Transaction ID : PR8491017251 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С					
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	supation (for Individual) ent	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 222.00	P/R Deduction (\$32.00 Monthly)			
В.	Full Name of Individual (Last, First, Middle Initial Zaleski, Bernard F., , Mr.,) or Full O	Drganization Name	Date of Receipt			
	Mailing Address 9461 E Cross Creek Circle	07 / <u>31</u> / <u>2017</u>					
	Wichita	State KS	Zip Code 67206-4063	Transaction ID : PR8491817251 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	100.00					
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	cupation (for Individual) ent	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 700.00	P/R Deduction (\$100.00 Monthly)			
C.	Full Name of Individual (Last, First, Middle Initial Feola, Frank J., , Mr.,) or Full Oi	Drganization Name	Date of Receipt			
	Mailing Address 6039 Walden Court	State	Zip Code	07 / 31 / 2017 Transaction ID : PR8492617251			
	Mentor	OH	44060-2221	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		50.00			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	cupation (for Individual) ent	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)			
s	UBTOTAL of Receipts This Page (optional)			182.00			
т	OTAL This Period (last page this line number on	ly)					

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ITEMIZED RECEIPTS	Use separate schedule(s)	(check c	(check only one)								
II EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	× 11a		11b 14	11c	12	17			
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements mang the name and a	L ay not be sold or used by any p ddress of any political committe	erson for th	ie pu contri	rpose of	soliciting	g contribu	tions			
NAME OF COMMITTEE (In Full)											
New York Life Insurance Co	ompany Politi	cal Action Committee									
Full Name of Individual (Last, First, Mide A. Anderson, Michael S., , Mr.,	lle Initial) or Full O	rganization Name	Date	of R	eceipt						
Mailing Address 29002 Acanthus Court			07		D 1) / Y	2017	Y			
City Agoura	State CA	Zip Code 91301-1629				PR8492 Receipt th	717251 nis Period				
FEC ID number of contributing federal political committee.	С				-y 1		75.	00			
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt		Mem	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	P/R D	educt	ion (\$75	.00 Montl	nly)				
Full Name of Individual (Last, First, Mido B. Mittelman, Hershey, , Mr.,	lle Initial) or Full O	rganization Name	Date	of R	eceipt						
Mailing Address 1256 56th Street				07 / D D / Y Y Y Y Y 2017							
City	State	Zip Code	Tra	nsaci	tion ID :	PR84930	017251				
Brooklyn	NY	NY 11219-4505				Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent		Mem	o Item						
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		700.00	P/R De	educt	ion (\$100	0.00 Mon	thly)				
Full Name of Individual (Last, First, Mide C. Leisman Dessert, Jennifer, , N	/Is.,	rganization Name	Date	of R	eceipt						
Mailing Address 19 Holyoke Street Apt. 2	1		07	07 / D D / Y Y Y Y 07 31 2017							
City Boston	State MA	Zip Code 02116-5855				PR8495	517251 nis Period				
FEC ID number of contributing federal political committee.	C				, ,		41.	67			
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt		Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R D	educt	ion (\$41	.67 Mont	hly)				
SUBTOTAL of Receipts This Page (option	al)				, .	. ,	216.	67			
TOTAL This Period (last page this line nu	mber only)				-	-					

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Report or for commercial purposes, other than u	s and Statements maining the name and a	ay not be sold or used by any p address of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) New York Life Insurance (Company Politi	cal Action Committee						
Full Name of Individual (Last, First, M A. Vahl, Matthew, , Mr.,	iddle Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 1419 Pine Cove Cour	t		07 31 2017					
City	State	Zip Code	Transaction ID : PR8497617251					
Darien	IL	60561-4999	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		230.78					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
New York Life Insurance Company		porate Vice President						
Receipt For:	Aggregate	Year-to-Date ▼						
Primary General Other (specify) ▼	, iggi ogalo	1730.85	P/R Deduction (\$115.39 Bi-Weekly)					
		-gp	·					
Full Name of Individual (Last, First, M B. Ritchie, Edward S., , Mr.,	iddle Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 1775 Beacon Street	Mailing Address 1775 Beacon Street							
City	State	Zip Code	Transaction ID : PR8531617251					
Waban	MA	02468-1402	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		50.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item					
Receipt For:	Aggregate	Year-to-Date V						
Primary General Other (specify) ▼		, 350.00	P/R Deduction (\$50.00 Monthly)					
Full Name of Individual (Last, First, M C. Mikell III, Jenkins, , Mr.,	iddle Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 8 Lord Nelson Court			07 / D D / Y Y Y Y 07 31 2017					
City	State	Zip Code	Transaction ID : PR8531817251					
Columbia	SC	29209-1910	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		83.34					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
New York Life Insurance Company	Age	nt						
Receipt For:	Aggregate	Year-to-Date V						
Primary General	55 - 5		P/R Deduction (\$83.34 Monthly)					
Other (specify)		583.38						
SUBTOTAL of Receipts This Page (opti	onal)		364.12					
TOTAL This Period (last page this line i	number only)	······						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 270 OF

ITEMIZED RECEIPTS	Use separate schedule(s)	(check only one)							
ILEIVILLED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using t			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle A. Towry, Sr., David L., , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 1927 Spicetree Lane South	east		07 31 2017						
City Salem	State OR	Zip Code 97306-1466	Transaction ID : PR8532217251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
Full Name of Individual (Last, First, Middle B. Sinawi, Gabriel H., , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 31220 Shorecrest Drive Apt	. 26024		07 ^D						
City Novi	State MI	Zip Code 48377-1191	Transaction ID : PR8532417251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
Full Name of Individual (Last, First, Middle C. Whitehead, Phillip R., , Mr.,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 145 Woodland Greens Driv		Zin Code							
City Brandon	State MS	Zip Code 39047-8773	Transaction ID : PR8532517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		75.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 525.00	P/R Deduction (\$75.00 Monthly)						
SUBTOTAL of Receipts This Page (optional).			166.67						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 271 OF

ITEMIZED RECEIPTS	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 11c 13 14 15	12						
Any information copied from such Re or for commercial purposes, other that	ports and Statements ma an using the name and a	ay not be sold or used by any p ddress of any political committe	erson for the purpose of solicitin	g contributions						
NAME OF COMMITTEE (In Full) New York Life Insuranc	e Company Politi	cal Action Committee								
Full Name of Individual (Last, Firs Richards, John T., , Mr.,	t, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 9910 Osuna Road	d Northeast		07 31	M M / D D / Y Y Y Y Y						
City Albuquerque	State NM	Zip Code 87111-2200	Transaction ID : PR8532 Amount of Each Receipt t							
FEC ID number of contributing federal political committee.	C			83.34						
Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Mon	:hly)						
Full Name of Individual (Last, Firs B. Winter, Brian J., , Mr.,	t, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1513 Oxford Road			07 / D D / Y Y Y Y 2017							
City Wantagh	State NY	Zip Code 11793-2445	Transaction ID : PR8532 Amount of Each Receipt t							
FEC ID number of contributing federal political committee.	C		150.00							
Name of Employer (for Individual) New York Life Insurance Company	Occu	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	P/R Deduction (\$150.00 Monthly)							
Full Name of Individual (Last, Firs c. Olewine, Scott W., , Mr.,	t, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 71 Mill Street			07 31 2017							
City Youngsville	State PA	Zip Code 16371-1803	Transaction ID : PR8532 Amount of Each Receipt t							
FEC ID number of contributing federal political committee.	C			41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) ht	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Mon	thly)						
SUBTOTAL of Receipts This Page	optional)			275.01						
TOTAL This Period (last page this I	ne number only)									

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □						
			person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
New York Life Insurance Co	ompany Politi	cal Action Committee							
Full Name of Individual (Last, First, Mide A. Lynch, David E., , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3901 Custis Road			07 31 Y Y Y Y 2017						
City Richmond	State VA	Zip Code 23225-1105	Transaction ID : PR8532917251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
Full Name of Individual (Last, First, Mide B. Patricio, Lydia O., , Ms.,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2627 Alemany Boulevar	d		07 / D D / Y Y Y Y 2017						
City	State	Zip Code	Transaction ID : PR8533017251						
San Francisco	CA	94112-4101	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify) V		350.00	P/R Deduction (\$50.00 Monthly)						
Full Name of Individual (Last, First, Mide C. Pendleton, Dan M., , Mr.,		rganization Name	Date of Receipt						
Mailing Address 11783 S Stone Ridge C	•		07 / D D / Y Y Y Y 31 2017						
City Riverton	State UT	Zip Code 84065-7481	Transaction ID : PR8533417251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		35.00						
Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 245.00	P/R Deduction (\$35.00 Monthly)						
SUBTOTAL of Receipts This Page (option	nal)		126.67						
TOTAL This Period (last page this line nu	mber only)								

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177	EMIZED RECEIPTS		Use separate schedule(s)	(ch	eck only	y or	ne)			-		
11			for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c		12 16	17	
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committe	erson e to s	for the olicit cor	purp ntrib	oose of utions fi	soliciting	g cont	tributio	ons	
\setminus	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Compa	any Politi	cal Action Committee									
<u>/</u>	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name									
Α.	Lazzarone, Romeo J., , Mr.,	,		Date of Receipt								
	Mailing Address 920 Nixon Avenue				07 31 2017							
	City	State				acti	on ID :	PR8534	01725	51		
	Reno	NV	89509-1913		Amount	t of	Each R	eceipt th	is Pe	riod		
	FEC ID number of contributing federal political committee.	С							_	50.00		
	Name of Employer (for Individual)	Осси	upation (for Individual)	_	M	emo	Item					
	New York Life Insurance Company	Age										
	Receipt For:		Year-to-Date ▼									
	Primary General	33 - 3		I F	P/R Ded	uctio	on (\$50.	00 Mont	nly)			
	Other (specify) v		350.00	4								
	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name									
Β.	Lackey, Michael, , Mr.,				Date of	Re	ceipt					
	Mailing Address 25 Zaitz Farm Road					07 / D D / Y Y Y Y 2017						
	City	State	Zip Code 08550-3314					PR8535(
	Princeton Junction	NJ		Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		124.00						0		
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President		M	emo	Item					
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General	00 0		1 F	P/R Ded	uctio	on (\$62.0	00 Bi-We	ekly)			
	Other (specify)	930.00										
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Steinberg, Joel, , Mr.,	tial) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 44 Spruce Street				M M		D D	/ Y	Y	Y	Y	
					07	Ľ	31		201			
	City	State	Zip Code		Trans	act	ion ID :	PR8551	7251			
	Princeton Junction	NJ	08550-2019		Amount	t of	Each R	eceipt th	is Pe	riod		
	FEC ID number of contributing federal political committee.	С					,	,	2	230.78	8	
	Name of Employer (for Individual)	Оссі	upation (for Individual)		Μ	emc	Item					
	New York Life Insurance Company		Chief Risk Officer & Chief Actua	r								
	Receipt For:	Aggregate	Year-to-Date V									
	Other (specify)		1730.85] '	P/R Ded	ucti	on (\$115	5.39 Bi-V	Veekly	y)		
Г						_						
s	UBTOTAL of Receipts This Page (optional))	•	<u> </u>	-	,	9		404.78	3	
Т	OTAL This Period (last page this line number	only)		•			7			_		

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports or for commercial purposes, other than usi	and Statements ma ng the name and a	ay not be sold or used by any didress of any political committee	person for the purpose of soliciting contributions be to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	cal Action Committee							
Full Name of Individual (Last, First, Mid A. Bryson, Neil A., , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5613 Lionel Drive			07 31 2017						
City Fort Wayne	State IN	Zip Code 46815-5235	Transaction ID : PR8566617251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		45.00						
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 315.00	P/R Deduction (\$45.00 Monthly)						
Full Name of Individual (Last, First, Mid B. Soper, Shauna L., , Ms.,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 11855 Villa Creek Aven			07 / D D / Y Y Y Y Y 2017						
City Baton Rouge	State LA	Zip Code 70810-7341	Transaction ID : PR8566717251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)						
Full Name of Individual (Last, First, Mid Walsh, David R., , Mr.,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 150 Vista Grande	State	Zin Oode	07 / D D / Y Y Y Y Y 2017						
City Greenbrae	CA	Zip Code 94904-1135	Transaction ID : PR8617251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		250.00						
Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)						
SUBTOTAL of Receipts This Page (option	' nal)		336.67						
TOTAL This Period (last page this line nu	mber only)								

Use separate schedule(s)

FOR LINE NUMBER:

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IT.				e schedule(s)	(check or	nly o	ne)					
11	EMIZED RECEIPTS		for each cate Detailed Sun	X 11a		11b 14	11c 15	12	Γ	17		
Ar or	ny information copied from such Reports and St. for commercial purposes, other than using the	atements mame and a	ay not be sold c address of any p	or used by any persolitical committee t	son for the	e pur ontrit	pose of	soliciting	contrib	outior	าร	
	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Compa	iny Politi	cal Action (Committee								
Α.	Full Name of Individual (Last, First, Middle Initi English, Thomas, , Mr.,	al) or Full C	organization Nan	ne	Date	of Re	eceipt					
	Mailing Address 27 Hedge Brook Lane				07 31 2017							
	City Stamford	State CT	Zip Code 06903-20	029				PR86317 eceipt th		od		
	FEC ID number of contributing federal political committee.								10	0.00		
	Name of Employer (for Individual) New York Life Insurance Company											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V	P/R De	ducti	ion (\$50.	00 Bi-We	eekly)				
В.	Full Name of Individual (Last, First, Middle Initi Della Penna, Scott, , Mr., Mailing Address 9541 Purcell Drive	al) or Full C	Organization Nan	ne	Date							
							07 31 2017 Transaction ID : PR86717251					
	City Potomac	MD	20854-45	00								
	FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period						
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Indi naging Partner	vidual)	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	1730.85	P/R Deduction (\$115.39 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initi Ogara, John, , Mr.,	al) or Full C	Organization Nan	ne	Date	of Re	eceipt					
	Mailing Address 8 Rock Ridge Court	State	Zin Codo		M 07		31	JL	2017	Y]	
	City New Fairfield	CT	Zip Code 06812-330	00				PR8709 eceipt th		bd		
	FEC ID number of contributing federal political committee.	С					y	, <u>,</u>	23	0.78		
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Indi ior Vice Presider	,	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date V	1730.85	P/R De	educti	ion (\$11	5.39 Bi-V	/eekly)			
⊢	UBTOTAL of Receipts This Page (optional)			F	[. [.	-	, . , .	· ·	56 [,]	1.56		

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports or for commercial purposes, other than usin	and Statements mang the name and a	I ay not be sold or used by any p address of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance Co	ompany Politi	cal Action Committee							
Full Name of Individual (Last, First, Mide A. Dubrow, Michael, , Mr.,	lle Initial) or Full C	Organization Name	Date of Receipt						
Mailing Address 1000 the Parkway			07 / D D / Y Y Y Y 2017						
City Mamaroneck	State NY	Zip Code 10543-4233	Transaction ID : PR8710917251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		65.40						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 490.50	P/R Deduction (\$32.70 Bi-Weekly)						
Full Name of Individual (Last, First, Mide B. Berry, Dale, , Mr.,	lle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2008 Falls Forest Drive	07 / 07 / 2017								
City Raleigh	State NC	Zip Code 27615-1258	Transaction ID : PR8712017251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.94						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)						
Full Name of Individual (Last, First, Mide C. Jahng, Kyle, , Mr.,	lle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 190 Kyles Way	01-14	7. 0.4	07 / D D / Y Y Y Y 07 2017						
City Shelton	State CT	Zip Code 06484-6619	Transaction ID : PR8712417251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		153.88						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) aging Partner	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1154.10	P/R Deduction (\$76.94 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)		296.22						
TOTAL This Period (last page this line nu	mber only)								

Use separate schedule(s)

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ıт.			Use separate schedule(s)	(check	only o	one)	L						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11: 13	a	11b 14	11c 15	12	Г	17			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pendotreas of any political committee	erson for t to solicit	he pu contr	irpose of ibutions f	soliciting	contri	ibutio	ns			
\setminus	NAME OF COMMITTEE (In Full)												
$ \rangle$	New York Life Insurance Compa	any Politi	cal Action Committee										
<u> </u>	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name										
Α.	Hoban, Bernadette, , Ms.,			Date of Receipt									
	Mailing Address 6821 Bliss Terrace			0	7 ^M	/ D D D 31) / Y	y 2017					
	City	State NY	Zip Code			tion ID :							
	Brooklyn		11220-5010	Amo	unt c	f Each R	leceipt th	is Peri	od				
	FEC ID number of contributing federal political committee.	С		19.24									
	Name of Employer (for Individual)	Occi	upation (for Individual)		Men	no Item							
	New York Life Insurance Company	Cor	porate Vice President										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General		269.36	P/R D	educ	tion (\$19	.24 Bi-We	ekly)					
	Other (specify)												
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name										
В.	Wagner, Robin, , Ms.,			Date	e of F	Receipt							
	Mailing Address 850 East Main Street Apt. 330					/ D D 31	/ Y	2017					
	City	State CT	Zip Code			tion ID :							
	Stamford		06902-3952	Amo	unt c	f Each F	leceipt th	iis Peri	od	_			
	FEC ID number of contributing federal political committee.	C						2	27.24				
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item									
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General			P/R D	educ	tion (\$13.	62 Bi-We	ekly)					
	Other (specify) ▼		, 204.30										
C.	Full Name of Individual (Last, First, Middle Initi Topelsohn, Bryan, , Mr.,	al) or Full O	organization Name	Date	e of F	leceipt							
	Mailing Address 3204 Hill Dale	1		0	7 ^M	/ D D 31	JL	2017					
	City Highland Village	State TX	Zip Code 75077-6460			tion ID :							
			73077-0400	Amo	unt c	f Each F	leceipt th	is Peri	od	_			
	FEC ID number of contributing federal political committee.	С							76.94				
	Name of Employer (for Individual)	Occu	upation (for Individual)	- 11	Men	no Item							
	New York Life Insurance Company	Seni	ior Associate										
	Receipt For:	Aggregate	Year-to-Date V										
	Other (specify)		508.14	P/R Deduction (\$38.47 Bi-Weekly)									
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number c					3 I		12	23.42				

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17	EMIZED RECEIPTS		Use separate schedule(s)	(check	only	y or	ne)							
11	IEMIZED RECEIPTS		for each category of the Detailed Summary Page		1a 3		11b 14	11c		12 16	17			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements mane and a	ay not be sold or used by any p address of any political committe	erson for	the	pur ntrib	pose of	soliciting	g con	tributio	ons			
	NAME OF COMMITTEE (In Full)													
	New York Life Insurance Compa	any Politi	ical Action Committee											
Α.	Full Name of Individual (Last, First, Middle Initi Wright, Bradley, , Mr.,	ial) or Full C	Drganization Name	Da	Date of Receipt									
	Mailing Address 5919 Elderwood Drive			N	07 [™]	1	31	D / Y	ү 20	ү 17	Ŷ			
	City		Zip Code	Т	Transaction ID : PR8754817251									
	Dallas	ТХ	75230-3453	An	nount	of	Each F	Receipt th	nis Pe	eriod				
	FEC ID number of contributing federal political committee.	С			38.48									
	Name of Employer (for Individual)	Occ	cupation (for Individual)	-	Memo Item									
	New York Life Insurance Company	Ser	nior Partner		-									
	Receipt For:	Aggregate	Year-to-Date V		1									
	Primary General		000.00	P/R	Ded	ucti	on (\$19	.24 Bi-W	eekly))				
	Other (specify)		288.60											
_	Full Name of Individual (Last, First, Middle Initi	ial) or Full C	Organization Name											
в.	Micucci, Alison, , Ms.,			_		- Ke	eceipt							
	Mailing Address 16 Munsey Road	State Zip Code					07 31 2017 Transaction ID : PR8755917251							
	City Emerson	NJ	07630-1512											
		_	07030-1312	An	iouni	. 01	Each F	Receipt th	IIS PE	FIOD	_			
	FEC ID number of contributing federal political committee.	C					-	-		210.0	0			
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) nior Vice President		M	emc	ltem							
	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify) ▼		1575.00	P/R Deduction (\$105.00 Bi-Weekly)										
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Stagias, Helen, , Ms.,	ial) or Full C	Organization Name	Da	te of	Re	eceipt							
	Mailing Address 3079 48th Street			IV	07	/	D 31		201	17 [°]	Y			
	City	State	Zip Code	Т	rans	act	ion ID :	PR8757	3172	51				
	Astoria	NY	11103-1524	An	nount	of	Each F	Receipt th	nis Pe	eriod				
	FEC ID number of contributing federal political committee.	С					,	,		38.4	8			
	Name of Employer (for Individual)	Occ	upation (for Individual)	-	М	emo	tem							
	New York Life Insurance Company		porate Vice President											
	Receipt For:	Aggregate	Year-to-Date V											
	Other (specify)		288.60	P/R Deduction (\$19.24 Bi-Weekly)										
	UBTOTAL of Receipts This Page (optional)						, .			286.90	6			

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)					
			person for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) New York Life Insurance Com	npany Polit	ical Action Committee						
Full Name of Individual (Last, First, Middle Dial, Robert, , Mr.,	Initial) or Full C	Drganization Name	Date of Receipt					
Mailing Address 61 Carlton Avenue			07 31 Y Y Y Y 2017					
City	State	Zip Code	Transaction ID : PR8757717251					
Ho Ho Kus	NJ	07423-1428	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		38.48					
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item					
New York Life Insurance Company	Ma	naging Director						
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$19.24 Bi-Weekly)					
Other (specify)		288.60						
Full Name of Individual (Last, First, Middle B. Apolenis, Jason M., , Mr.,	Initial) or Full C	Drganization Name	Date of Receipt					
Mailing Address 9125 Kittery Lane			07 31 2017					
City	State	Zip Code	Transaction ID : PR8806317251					
Bethesda	MD	20817-2152	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) ent	Memo Item					
Receipt For:	Aggregate	Year-to-Date V						
Primary General Other (specify) ▼		, 1750.00	P/R Deduction (\$250.00 Monthly)					
Full Name of Individual (Last, First, Middle C. Schwartz, Richard, , Mr.,	Initial) or Full C	Drganization Name	Date of Receipt					
Mailing Address 109 Dune Road			07 / D D / Y Y Y Y 31 2017					
City	State	Zip Code	Transaction ID : PR8806517251					
Westhampton Beach	NY	11978-3004	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		153.86					
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) nior Managing Director	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1153.95	P/R Deduction (\$76.93 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			442.34					
TOTAL This Period (last page this line numb	er only)							

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	l ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
> New York Life Insurance Corr	npany Politi	cal Action Committee										
Full Name of Individual (Last, First, Middle A. Stokes, Christopher B., , Mr.,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 700 Americana Drive Apt.	A2		Mon M / D / Y									
City Annapolis	State MD	Zip Code 21403-3344										
FEC ID number of contributing	_		Amount of Each Receipt this Period									
federal political committee.	C		41.67									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)									
Full Name of Individual (Last, First, Middle B. Abadilla, Margarita, , Ms.,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 3308 Moncucco Court			07 31 / Y Y Y Y 2017									
City San Jose	State CA	Zip Code 95148-4348	Transaction ID : PR8894717251									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Partner	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1442.25	P/R Deduction (\$96.15 Bi-Weekly)									
Full Name of Individual (Last, First, Middle C. Decaire, Xavier J., , Mr.,	Initial) or Full C	organization Name	Date of Descipt									
Mailing Address 8 Pacer Court			Date of Receipt									
City Newark	State DE	Zip Code 19711-2414	Transaction ID : PR89017251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)									
SUBTOTAL of Receipts This Page (optional)			283.97									
TOTAL This Period (last page this line numb	er only)											

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) New York Life Insurance Comp	oany Polit	ical Action Committee								
Full Name of Individual (Last, First, Middle Ir AAgee, David B., , Mr.,	nitial) or Full C	Drganization Name	Date of Receipt							
Mailing Address 580 Twinwood Loop			07 / D D / Y Y Y Y Y 2017							
City	State CA	Zip Code	Transaction ID : PR8903617251							
Roseville	CA	95678-5978	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.67							
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item							
New York Life Insurance Company	Age	ent								
Receipt For: Primary General Other (appeit)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)							
Other (specify) ▼										
Full Name of Individual (Last, First, Middle Ir B. Albahary, Suellen, , Ms.,	nitial) or Full C	Organization Name	Date of Receipt							
Mailing Address 8 N Hinterlands Drive	07 31 2017									
City	State	Zip Code	Transaction ID : PR8909817251							
Rhinebeck	NY	12572-2308	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		38.48							
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) rporate Vice President	Memo Item							
Receipt For:	Aggregate	Year-to-Date V								
Primary General Other (specify) ▼		, 288.60	P/R Deduction (\$19.24 Bi-Weekly)							
Full Name of Individual (Last, First, Middle Ir C. Angulo, Barjes R., , Mr.,	hitial) or Full C	Drganization Name	Date of Receipt							
Mailing Address 219 Edgecombe Avenue Apt			07 / D D / Y Y Y Y Y 2017							
City New York	State NY	Zip Code	Transaction ID : PR8931517251							
New York		10030-1107	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		30.00							
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item							
New York Life Insurance Company	Age	ent								
Receipt For: Primary General Other (specify)	Aggregate	2 Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)							
SUBTOTAL of Receipts This Page (optional)			110.15							
TOTAL This Period (last page this line number	only)									

Use separate schedule(s)

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11			for each category of the Detailed Summary Page	X 11a		11b	11c		Г	17			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the to solicit c	e pur ontrit	pose of outions fi	soliciting	contr	ributio	ns			
	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Compa	any Politi	cal Action Committee										
Α.	Full Name of Individual (Last, First, Middle Initi Antonsen, Michael P., , Mr.,	ial) or Full O	rganization Name	Date of Receipt									
	Mailing Address 626 E Saginaw Way	State		07	M /	D D D 31	/ Y	Y 201]			
	City		Zip Code		Transaction ID : PR8933817251								
	Fresno	CA	93704-4161	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		28.83									
	Name of Employer (for Individual)	Оссі	upation (for Individual)		Nemo	b Item							
	New York Life Insurance Company	Age	nt										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General		201.81	P/R De	ducti	on (\$28.	83 Month	nly)					
	Other (specify)		201.01										
	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name										
Β.	Aw, Esther M., , Ms.,			Date	of Re	eceipt							
	Mailing Address 7713 River Village Drive		07	M /	D D D 31	/ Y	2017]				
	City	State	Zip Code				PR89502						
	Sacramento	CA	95831-4124	Amou	nt of	Each R	eceipt th	is Per	iod	_			
	FEC ID number of contributing federal political committee.	С			_		-		41.67	,			
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent		Memo	o Item							
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General	33 - 3		P/R De	ducti	on (\$41.6	67 Month	ıly)					
	Other (specify) v	L	, 291.69										
с.	Full Name of Individual (Last, First, Middle Initi Azzati, David, , Mr.,	ial) or Full O	rganization Name	Date	of Re	eceipt							
	Mailing Address 38 Hillside Avenue			M 07		D D D 31	/ Y	2017		1			
	City	State	Zip Code	Trar	isact	ion ID :	PR8952	61725 [,]	1				
	Caldwell	NJ	07006-5206	Amou	nt of	Each R	eceipt th	is Per	iod				
	FEC ID number of contributing federal political committee.	С				y	9		76.94				
	Name of Employer (for Individual)	Осси	upation (for Individual)	- I	Vemo	o Item							
	New York Life Insurance Company	Direc	ctor										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)		323.94	P/R Deduction (\$19.00 Bi-Weekly)									
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number c					9 1 7 1	· ·	14	47.44				

Use separate schedule(s)

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TEMIZED RECEIPTS			for each category of the Detailed Summary Page	×	11a 13		11b	11c	12	17						
			not be sold or used by any p dress of any political committee		or the p	purp	ose of	soliciting	contribu	utions						
		y Politic	al Action Committee													
Full Name of Individual A. Battersby, Christoph	(Last, First, Middle Initial) er C., , Mr.,	or Full Org	anization Name		Date of	Rec	ceipt									
Mailing Address 51 Mito	hell Road		_		07 31 2017											
City State Holliston MA			Zip Code 01746-2469	A				PR89766 eceipt th	6 17251 is Perioc	ł						
	FEC ID number of contributing federal political committee.						7	-	166	.67						
Name of Employer (for Individual)OcdNew York Life Insurance CompanyAg			pation (for Individual)		Me	emo	ltem									
Receipt For: Primary Other (specify) ▼	General	Aggregate Y	ear-to-Date ▼ 1166.69	P/	'R Dedu	uctio	n (\$166	5.67 Mon	thly)							
Full Name of Individual B. Berardi, Michael A	(Last, First, Middle Initial)	or Full Org	anization Name		Date of	Rec	eipt									
Mailing Address 240 Ba	rnsley Avenue						07 / D D / Y Y Y Y 07 31 2017									
City Huntingdon Valley		State PA	Zip Code 19006-6504					PR89936	517251 is Period	ł						
FEC ID number of cont federal political committe	°	Occupation (for Individual) Agent			125.00											
Name of Employer (for New York Life Insurance					Memo Item											
Receipt For: Primary Other (specify) ▼	General	Aggregate Y	ear-to-Date ▼ 875.00	P/R Deduction (\$125.00 Monthly)												
Full Name of Individual c. Birkel, Stuart J. ,	(Last, First, Middle Initial)	or Full Org	anization Name		Date of	Rec	eipt									
Mailing Address 611 Ra	lleigh Avenue				м м 07	/	D D D 31		y y 2017	Y						
City Norfolk		State VA	Zip Code 23507-2014	A				PR90054 eceipt th	417251 is Perioc	ł						
FEC ID number of cont federal political committe	0	С			_		7		41	.67						
Name of Employer (for New York Life Insurance		Occup Agent	pation (for Individual)		Me	emo	ltem									
Receipt For: Aggreg Primary General Other (specify)			ear-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)												
SUBTOTAL of Receipts T	his Page (optional)		•				,		333	.34						
TOTAL This Period (last)	bage this line number only	y)		[,									

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)				
	ny information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	ıny Politi	cal Action Committee					
Α.	· · · ·	al) or Full C	Organization Name	Date of Receipt				
	Mailing Address 8776 Boulder Rise	Otata	7.0.0.1	07 31 2017				
	City Eden Prairie	State MN	Zip Code 55347-2419	Transaction ID : PR9006517251 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		230.76				
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.70	P/R Deduction (\$115.38 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Initia Blanton, Clayton, , Mr., Jr.	al) or Full C	Organization Name	Date of Receipt				
	Mailing Address 3775 Prescott Avenue			07 31 Y Y Y Y 2017				
	City Clovis	State CA	Zip Code 93619-2030	Transaction ID : PR9012117251				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1050.00	P/R Deduction (\$150.00 Monthly)				
С.	Full Name of Individual (Last, First, Middle Initia Bobbitt, Edward H., , Mr.,	al) or Full C	Organization Name	Date of Receipt				
	Mailing Address 2432 Southwest 33rd Circle	State	Zip Code	07 / 07 / 2017 Transaction ID : PR9016117251				
	Okeechobee	FL	34974-5724	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		83.34				
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)				
s	UBTOTAL of Receipts This Page (optional)			464.10				
ר	OTAL This Period (last page this line number o	nly)	••••••					

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements mag the name and a	l ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
> New York Life Insurance Co	mpany Politi	cal Action Committee											
Full Name of Individual (Last, First, Midd Ostberg, Robert K., , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 48 Greenleaf Drive			07 31 2017										
City Northampton	State MA	Zip Code 01062-9768	Transaction ID : PR9017251 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		250.00										
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)										
Full Name of Individual (Last, First, Midd B. Bond, Jesse, , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 20122 Richmond Beach	Dr. NW		07 31 / Y Y Y Y Y 07 31 2017										
City Shoreline	State WA	Zip Code 98177-2436	Transaction ID : PR9021817251 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		250.00										
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		1750.00	P/R Deduction (\$250.00 Monthly)										
Full Name of Individual (Last, First, Midd C. Bondar, Andrew J., , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 9079 Great Dome Court			07 31 / Y Y Y Y 2017										
City Fair Oaks	State CA	Zip Code 95628-4184	Transaction ID : PR9021917251 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		41.67										
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)										
SUBTOTAL of Receipts This Page (optiona	al)		541.67										
TOTAL This Period (last page this line nur	nber only)												

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)					
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical Action Committee						
Α.	Full Name of Individual (Last, First, Middle Initia Boussayoud, Abdelaziz, , Mr.,	l) or Full O	Organization Name	Date of Receipt					
	Mailing Address 702 Ocean Parkway Unit 6B	1-		07 / D D / Y Y Y Y Y 07 31 2017					
	City Brooklyn	State NY	Zip Code 11230-1133	Transaction ID : PR9029817251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		38.46					
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) nior Partner	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initia Bradford Jr., James C., , Mr.,	l) or Full O	Organization Name	Date of Receipt					
	Mailing Address 206 Harris Drive		07 / D D / Y Y Y Y 2017						
	City Norfolk	State NE	Zip Code 68701-3508	Transaction ID : PR9036217251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		68.00					
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 476.00	P/R Deduction (\$68.00 Monthly)					
<u> </u>	Full Name of Individual (Last, First, Middle Initia Brakke, Matthew, , Mr.,	l) or Full O	Organization Name	Date of Receipt					
	Mailing Address 500 N Grand Avenue	1		07 / D D / Y Y Y Y 31 2017					
	City Pierre	State SD	Zip Code 57501-2116	Transaction ID : PR9038717251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	cupation (for Individual) ent	Memo Item					
	Receipt For: Primary General Other (specify)	P/R Deduction (\$50.00 Monthly)							
s	UBTOTAL of Receipts This Page (optional)		•	156.46					
Т	OTAL This Period (last page this line number or	nly)	•	· · · · · · · · · · · · · · · · · · ·					

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	eck onl	y or	ne)	L		-						
11			for each category of the Detailed Summary Page		′ 11a 13		11b	11c 15		2 6 [17					
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any pe ddress of any political committee	erson to so	for the	pur pur	pose of	soliciting	conti	ributic	ons					
	NAME OF COMMITTEE (In Full)															
	New York Life Insurance Compa	any Politi	cal Action Committee													
Α.	Full Name of Individual (Last, First, Middle Init Brandenburg, Dennis, , Mr.,	tial) or Full O	rganization Name		Date of Receipt											
	Mailing Address 134 Dorothy Lane				07 31 Y Y Y Y 2017											
	City Wappingers Falls	State NY	Zip Code 12590-5819		Transaction ID : PR9039517251 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.					<u> </u>			- 7-		38.48	3					
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President		М	emc	ltem									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 288.60					24 Bi-We	eekly)							
в.	Full Name of Individual (Last, First, Middle Init Brockman, Mac, , Mr.,	tial) or Full O	rganization Name		Date of	f Re	eceipt									
	Mailing Address 5722 Village Green Drive							07 31 / Y Y Y Y Y Y 2017								
	City	State	Zip Code		Trans	acti	on ID :	PR90482	21725	1						
	Katy	TX	77493-1247		Amoun	t of	Each R	eceipt th	is Per	riod						
	FEC ID number of contributing federal political committee.	C			38.48											
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Associate		Μ	emc	tem									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 288.60	P/R Deduction (\$19.24 Bi-Weekly)												
с.	Full Name of Individual (Last, First, Middle Init Broome II, Paul A., , Mr.,	tial) or Full O	rganization Name		Date of	Re	eceipt									
	Mailing Address 2552 Benjamin Road		- 1		м м 07	1	D D D 31	L	201	7						
	City Jacksonville	State FL	Zip Code 32223-1614					PR90512 eceipt th								
	FEC ID number of contributing federal political committee.	С			<u> </u>		y :	. y		41.67	7					
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) ht		М	emo	ttem									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	F	P/R Ded	ucti	on (\$41.	67 Montl	nly)							
s	UBTOTAL of Receipts This Page (optional)		•••••				,	5	1	18.63	3					
т	OTAL This Period (last page this line number of	only)	••••••		L											

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IT	EMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Coneck only one) Image: X 11a 11b 11c 12 13 14 15 16 17							
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma ame and ac	y not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee							
A.	Full Name of Individual (Last, First, Middle Initial Weimer, William M., , Mr.,) or Full Or	rganization Name	Date of Receipt						
	Mailing Address 7234 Hanover Grove Lane			07 31 Y Y Y Y 2017						
	City	State	Zip Code	Transaction ID : PR90617251						
	Mechanicsville	VA	23111-5633	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	Name of Employer (for Individual)	Occu	upation (for Individual)	Memo Item						
	New York Life Insurance Company	Ager	nt							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General Other (specify) ▼		350.00	P/R Deduction (\$50.00 Monthly)						
в.	Full Name of Individual (Last, First, Middle Initial Burke, Tamara J., , Ms.,) or Full Or	rganization Name	Date of Receipt						
	Mailing Address 19625 Lookout Mountain Road PO Box 81			07 31 2017						
	City	State	Zip Code	Transaction ID : PR9070917251						
	Spearfish	SD	57783-0081	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		41.67						
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item						
		Aggregate	Year-to-Date 🔻							
	Primary General Other (specify) ▼		291.69	P/R Deduction (\$41.67 Monthly)						
C.	Full Name of Individual (Last, First, Middle Initial Burtrum, Chad, , Mr.,) or Full Or	rganization Name	Date of Receipt						
	Mailing Address 10267 Wake Robin Drive			07 31 2017						
	City	State	Zip Code	Transaction ID : PR9073917251						
	Grand Blanc	MI	48439-9354	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		41.67						
	Name of Employer (for Individual)	Occu	upation (for Individual)	Memo Item						
	New York Life Insurance Company	Ager	nt							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify)		291.69	P/R Deduction (\$41.67 Monthly)						
s	UBTOTAL of Receipts This Page (optional)			133.34						
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ITE	EMIZED RECEIPTS		f	or each category of the Detailed Summary Page	`	11a	y one) 11 14	- H	11c 15	12 16	17		
	/ information copied from such Reports and State for commercial purposes, other than using the national states of the states of								soliciting	contrib	utions		
	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	y Politio	cal	Action Committee									
A .	Full Name of Individual (Last, First, Middle Initial) Caggiano, Scott, , Mr., Mailing Address 7332 Waldman Avenue) or Full Or	rgar	nization Name	Date of Receipt								
		0		Zia Ocale		07 31 2017							
	City Sparrows Point	State MD		Zip Code 21219-2031		Transaction ID : PR9081717251 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C					· ·		- 45-		.24		
	Name of Employer (for Individual) New York Life Insurance Company		•	ion (for Individual) ng Partner		M	emo Ite	em					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 204.30	F	P/R Deduction (\$13.62 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Initial) Campellone, Mark, , Mr.,) or Full Or	rgar	nization Name		Date of	Recei	ipt					
	Mailing Address 61 Reed Dr. S	01-1-			07 31 2017 Transaction ID : PR9089217251								
	City Princeton Junction	State NJ		Zip Code 08550-2014						217251 is Period	d		
	FEC ID number of contributing federal political committee.	С	C								.00		
	Name of Employer (for Individual) New York Life Insurance Company		•	ion (for Individual) ng Director	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 375.00	P/R Deduction (\$25.00 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initial)) or Full Or	rgar	nization Name		Date of	Recei	ipt					
	Mailing Address 666 Shore Road Apartment 1B	01-1-		7:- 0- 4-		07	J L	31	L	2017 Y	Y		
-	City Long Beach	State NY		Zip Code 11561-4615					PR9093	is Period	d		
	FEC ID number of contributing federal political committee.	С				<u> </u>	. ,		,	38	.48		
	New York Life Insurance Company Co			ion (for Individual) te Vice President		M	emo Ite	em					
Receipt For: Aggregate Primary General Other (specify) Image: Constraint of the second se				r-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)								
รเ	JBTOTAL of Receipts This Page (optional)						,		,	115	.72		
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Polit	ical Action Committee								
Full Name of Individual (Last, First, Middle In Carr, Roderick, , Mr.,	nitial) or Full (Organization Name	Date of Receipt							
Mailing Address 1283 S Gosling Way			07 31 Y Y Y Y Y							
City	State ID	Zip Code	Transaction ID : PR9101017251							
Eagle		83616-6326	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		50.00							
Name of Employer (for Individual)	Oco	cupation (for Individual)	Memo Item							
New York Life Insurance Company	Age	ent								
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)							
Full Name of Individual (Last, First, Middle In	nitial) or Full (Organization Name								
B. Carson Jr., Carroll D., , Mr.,			Date of Receipt							
Mailing Address 689 Forrest Haven Court	State	Zip Code	07 / D D / Y Y Y Y 2017							
Greenville	State	29609-6522	Transaction ID : PR9103117251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C									
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 833.36	P/R Deduction (\$20.84 Monthly)							
Full Name of Individual (Last, First, Middle In C. Carter, Timothy C., , Mr.,	nitial) or Full (Organization Name	Date of Receipt							
Mailing Address 4945 Stonehaven Drive			07 31 / Y Y Y Y 2017							
City Verbal inde	State	Zip Code	Transaction ID : PR9105317251							
Yorba Linda	CA	92887-2635	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.67							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)							
SUBTOTAL of Receipts This Page (optional)			112.51							
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11			for each category of the Detailed Summary Page		K 11a 13		11b	11c 15	12	г	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any pe ddress of any political committee	erson to s	for the	pur ntrib	pose of	soliciting	contri	butio	ns	
	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Compa	any Politio	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Init Casanova, Ramon, , Mr.,	ial) or Full O	rganization Name		Date of Receipt							
	Mailing Address 98 Hilltop Road				07 / D D / Y Y Y Y 2017							
	City Ardsley	State NY	Zip Code 10502-1610		Transaction ID : PR9106917251 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			<u> </u>			-	3	38.48		
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President & Actuary		М	emo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Ded	lucti	on (\$19.)	24 Bi-We	ekly)				
R	Full Name of Individual (Last, First, Middle Init Chu, Felix S., , Mr.,	ial) or Full O	rganization Name		Date of	f Re	ceint					
υ.	Mailing Address 11 Mercury Court				07	/	31	/ Y	2017		1	
	City	State	Zip Code		Trans	acti	ion ID : I	PR91442	217251			
	Pleasant Hill	CA	94523-2167	_	Amoun	t of	Each R	eceipt th	is Peri	od		
	FEC ID number of contributing federal political committee.	С	83.34									
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583,38	P/R Deduction (\$83.34 Monthly)								
С.	Full Name of Individual (Last, First, Middle Init Cirrincione, Deborah, , Ms.,	ial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 17-5 Steven Drive Unit 5	01-1-	7		07		31	L	2017			
	Ossining	State NY	Zip Code 10562-1976					PR91494 eceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>		,		3	38.48		
	Name of Employer (for Individual) New York Life Insurance Company		ipation (for Individual) orate Vice President		М	emo	ttem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 215.54	P/R Deduction (\$13.62 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•	_			,	,	16	60.30	-	
Т	OTAL This Period (last page this line number of	only)	••••••				_			-		

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11			for each category of the Detailed Summary Page	X	11a 13		11b	11c 15		ſ	17	
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson e to so	for the	purpo	ose of s	soliciting	contr	ributio	ons	
\setminus	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Compa	any Politi	cal Action Committee									
Α.	Full Name of Individual (Last, First, Middle Init Combs III, Gerald, , Mr.,	tial) or Full O	rganization Name		Date of Receipt							
	Mailing Address 468 Lission Court				07 / D D / Y Y Y Y 2017							
	City Severna Park	State MD	Zip Code 21146-1640		Transaction ID : PR9167717251 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			<u> </u>					38.48	3	
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nager		M	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	F	P/R Deduction (\$19.24 Bi-Weekly)							
B	Full Name of Individual (Last, First, Middle Init Gentile, Rosanne S., , Ms.,	tial) or Full O	rganization Name		Date of	Boo	oint					
D.	Mailing Address 6631 Wakefield Drive Apt. 217				07	/	21 31	/ Y	2017		1	
	City	State	Zip Code		Trans	actio	n ID : P	R91717	251			
	Alexandria	VA	22307-6844		Amount	of E	ach Re	ceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	С	108.00)		
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) ent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 756.00	P/R Deduction (\$108.00 Monthly)								
с.	Full Name of Individual (Last, First, Middle Init Conrady, Sherry G., , Ms.,	tial) or Full O	rganization Name		Date of	Rec	eipt					
	Mailing Address 1903 Parkview Drive				07 ^M	/	D D D 31	/ Y	201			
	City Okmulgee	State OK	Zip Code 74447-6932	-				PR91722				
	FEC ID number of contributing federal political committee.	С						,		50.00)	
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)								
s	UBTOTAL of Receipts This Page (optional)		•			,		9	1	96.48	}	
т	OTAL This Period (last page this line number of	only)	••••••	-			_			-		

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
ILEIVIIZED RECEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements ma g the name and a	L ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middl A. Cornette, Clint G., , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1505 Country Club Road			07 31 2017							
City Wilmington	State NC	Zip Code 28403-4818	Transaction ID : PR9179717251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.67							
Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)							
Full Name of Individual (Last, First, Middl B. Parker Jr., Gordon E., , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 422 Discovery Road			07 31 2017							
City Virginia Beach	State VA	Zip Code 23451-2157	Transaction ID : PR91817251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		166.67							
Name of Employer (for Individual) New York Life Insurance Company	Occ	upation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1166.69	P/R Deduction (\$166.67 Monthly)							
Full Name of Individual (Last, First, Middl C. Cote, David K., , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 20 Driscoll Road			07 31 2017							
City Selah	State WA	Zip Code 98942-9316	Transaction ID : PR9182917251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.67							
Name of Employer (for Individual) New York Life Insurance Company	Occi Agei	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date 291.69	P/R Deduction (\$41.67 Monthly)							
SUBTOTAL of Receipts This Page (optiona	al)		250.01							
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)						
Any information copied from such Reports and or for commercial purposes, other than using th									
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Polit	ical Action Committee							
Full Name of Individual (Last, First, Middle In Courtois, Chad C., , Mr.,	nitial) or Full (Drganization Name	Date of Receipt						
Mailing Address 1409 Bonnet Street			07 / D D / Y Y Y Y 2017						
City New Iberia	State LA	Zip Code 70563-0627	Transaction ID : PR9185217251						
		10303-0021	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		58.00						
Name of Employer (for Individual)	Oco	cupation (for Individual)	Memo Item						
New York Life Insurance Company	Age	ent							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)						
Full Name of Individual (Last, First, Middle In B. Cristallo, James, , Mr.,	nitial) or Full (Drganization Name	Date of Receipt						
Mailing Address 310 Split Rock Road			07 31 2017						
City	State	Zip Code	Transaction ID : PR9193717251						
Syosset	NY	11791-1507	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.48						
Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) e President & Actuary	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In C. Cruz, David, , Mr.,	nitial) or Full (Drganization Name	Date of Receipt						
Mailing Address 98 Thackeray Road			07 / D D / Y Y Y Y 07 31 2017						
City	State	Zip Code	Transaction ID : PR9197817251						
Oakland	NJ	07436-3319	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.94						
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item						
New York Life Insurance Company	Ser	nior Vice President							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 403.98	P/R Deduction (\$19.24 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			173.42						
TOTAL This Period (last page this line numbe	r only)	······							

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements ma g the name and a	ay not be sold or used by any p ddress of any political committe	e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Politi	cal Action Committee								
Full Name of Individual (Last, First, Midd A. Curcio, Anthony, , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 10 Debra Drive			07 31 2017							
City Essex Junction	State VT	Zip Code 05452-3414	Transaction ID : PR9202917251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		80.00							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item							
Receipt For: Primary General Other (specify) \checkmark	Aggregate	Year-to-Date ▼ 600.00	P/R Deduction (\$40.00 Bi-Weekly)							
Full Name of Individual (Last, First, Midd B. Curran, Debra, , Ms.,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8 Alison Court			07 / D D / Y FY FY 2017							
City Marlboro	State NJ	Zip Code 07746-1642	Transaction ID : PR9203217251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.94							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) e President	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. Damon, Michael T., , Mr.,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3 Newton Lane			07 / D D / Y Y Y Y 07 31 2017							
City Medway	State MA	Zip Code 02053-6161	Transaction ID : PR9211417251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		250.00							
Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)							
SUBTOTAL of Receipts This Page (optional	al)		406.94							
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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Stal for commercial purposes, other than using the n									
$\Big\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical Action Committee							
A.	Full Name of Individual (Last, First, Middle Initial McGuire, Scott K., , Mr., Mailing Address 1983 Woodlake Drive City Benton FEC ID number of contributing federal political committee.	I) or Full C State LA	Zip Code 71006-9305	Date of Receipt M M / D D / Y Y Y Y 07 31 / 2017 Transaction ID : PR92117251 Amount of Each Receipt this Period 100.00						
	Primary General Other (specify) ▼	Age Aggregate	e Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)						
В.	Full Name of Individual (Last, First, Middle Initial Day, Laura M., , Ms., Mailing Address 5030 W Brigantine Court	I) or Full C	Drganization Name	Date of Receipt 07 31 2017						
	City Wilmington FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State DE C	Zip Code 19808-1819 cupation (for Individual)	Transaction ID : PR9223317251 Amount of Each Receipt this Period 50.00 Memo Item						
	New York Life Insurance Company	Age	1 ()	P/R Deduction (\$50.00 Monthly)						
C.	Full Name of Individual (Last, First, Middle Initia De Rosa, Peter A., , Mr., Mailing Address 8259 Laughlin Drive	l) or Full C	Drganization Name	Date of Receipt						
	City Niagara Falls FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify)	Age	Zip Code 14304-2461	07 31 2017 Transaction ID : PR9225517251 Amount of Each Receipt this Period 30.00 Memo Item P/R Deduction (\$30.00 Monthly)						
	UBTOTAL of Receipts This Page (optional)		r	180.00						
ΙT	OTAL This Period (last page this line number on	ly)	••••••							

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	y information copied from such Reports and Sta for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)											
$\Big\rangle$	New York Life Insurance Compared	ny Politi	ical	Action Committee								
A.	Full Name of Individual (Last, First, Middle Initia Dean, Lee R., , Mr.,	l) or Full C	Drgar	nization Name		Date o	of Re	ceipt				
	Mailing Address 10 Butler Road	State		Zip Code	07 31 2017 Transaction ID : PR9226217251							
	City Sudbury	MA		01776-1514								
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 83.34							
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	•	ion (for Individual)		N	lemo	Item				
	Receipt For: Primary General Other (specify) ▼	Yea	r-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)								
B	Full Name of Individual (Last, First, Middle Initia Decorte Jr., Thomas L., , Mr.,	l) or Full C	Drgar	nization Name		Date o	of Re	ceipt				
	Mailing Address 105 Charwood Drive					07		D D D 31	/ Y	201	ү ү 7	1
	City Pearl River	State LA		Zip Code 70452-3749					PR9228			
	FEC ID number of contributing federal political committee.	С		10432-3749		Amoun	IT OF	Each R	eceipt t	nis Pe	riod 28.83	
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	•	tion (for Individual)	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 201.81	P/R Deduction (\$28.83 Monthly)							
C.	Full Name of Individual (Last, First, Middle Initia Dent, Richard J., , Mr.,	l) or Full C	Drgar	nization Name		Date o	of Re	ceipt				
	Mailing Address 11706 S 93rd East Avenue	1		1		^M 07	/	D D D 31	/ Y	201		
	City Bixby	State OK		Zip Code 74008-1786					PR9238 eceipt t			
	FEC ID number of contributing federal political committee.	С						,	,		35.00	
Name of Employer (for Individual)OctNew York Life Insurance CompanyAge			•	ion (for Individual)		N	1emo	Item				
	Receipt For: Primary General Other (specify)	Yea	ur-to-Date ▼ 245.00	P/R Deduction (\$35.00 Monthly)								
s	UBTOTAL of Receipts This Page (optional)			•				, .	. ,	1	47.17	
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
ightarrow New York Life Insurance Cor	npany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middle A. DeSanto, Craig, , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 301 Elizabeth Street Penthouse G			07 31 2017							
City	State	Zip Code	Transaction ID : PR9240817251							
New York	NY	10012-2854	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		46.16							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) ior Vice President	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.20	P/R Deduction (\$23.08 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. Diamond, Dean, , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8201 Victoria Lake Drive			07 31 2017							
City Waxhaw	State NC	Zip Code 28173-9819	Transaction ID : PR9245817251							
FEC ID number of contributing		20173-9019	Amount of Each Receipt this Period							
federal political committee.	С		76.92							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		, 576.90	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Middle C. Downey, Michael, , Mr.,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 67 Haller Drive			07 / D D / Y Y Y Y Y 2017							
Cedar Grove	State NJ	Zip Code 07009-1704	Transaction ID : PR9267817251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		76.94							
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) or Associate	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 577.05	P/R Deduction (\$38.47 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		200.02							
TOTAL This Period (last page this line num	ber only)									

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: concerning only only only only only only only only							
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame_and_a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	ny Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Initial Tait, James W., , Mr.,) or Full O	rganization Name	Date of Receipt							
	Mailing Address 13618 Basket Ring Court			07 / D D / Y Y Y Y 2017							
	City Gainesville	State VA	Zip Code 20155-3025	Transaction ID : PR92717251							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)							
B.	Full Name of Individual (Last, First, Middle Initial Duncan, David B., , Mr.,	-	rganization Name	Date of Receipt							
	Mailing Address 17438 Bothell Way NE Unit C104			07 31 2017							
	City Bothell	State WA	Zip Code 98011-1963	Transaction ID : PR9277117251 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		30.00							
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 210.00	P/R Deduction (\$30.00 Monthly)							
с.	Full Name of Individual (Last, First, Middle Initial Dunn, Jeffrey, , Mr.,) or Full O	rganization Name	Date of Receipt							
	Mailing Address 97 West Maple Avenue			07 / D D / Y Y Y Y 07 31 2017							
	City Fort Mitchell	State KY	Zip Code 41011-2616	Transaction ID : PR9278817251 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		38.48							
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			110.15							
т	OTAL This Period (last page this line number onl	ly)									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		1b	11c	12				
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NAME OF COMMITTEE (In Full)		active of any political commute		mout	10110 110		551111111				
New York Life Insurance Com	pany Politi	cal Action Committee									
Full Name of Individual (Last, First, Middle I Eisenberger, David, , Mr.,	nitial) or Full C	rganization Name	Date o	Date of Receipt							
Mailing Address 39 Olympia Lane			м м 07	07 31 2017							
City Monsey	State NY	Zip Code 10952-2829		Transaction ID : PR9290617251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С					- 1	30.0	0			
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	M	lemo It	tem						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)								
Full Name of Individual (Last, First, Middle I B. Ellis Jr., Walker R., , Mr.,	nitial) or Full C	rganization Name	Date o	f Rece	eipt						
Mailing Address 650 Northwest 48th Avenue			м м 07	/	D D D 31	/ Y	2017	Y			
City Coconut Creek	State FL	Zip Code 33063-4637	Transaction ID : PR929491725 Amount of Each Receipt this Pe								
FEC ID number of contributing federal political committee.	С						41.6	7			
Name of Employer (for Individual) New York Life Insurance Company		Occupation (for Individual) Agent			Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼		1							
Other (specify) ▼		291.69	P/R Deduction (\$41.67 Monthly)								
Full Name of Individual (Last, First, Middle I Jennell, Richard C., , Mr.,	nitial) or Full C	rganization Name	Date o	f Rece	eipt						
Mailing Address 302 Chestnut Street PO Box 335 City	State	Zip Code	07	JL	31	/ Y R93017	2017	Y			
Pearisburg	VA	24134-2006					s Period				
FEC ID number of contributing federal political committee.	С			. ,		9	34.0	0			
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt		Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	P/R Deduction (\$34.00 Monthly)								
SUBTOTAL of Receipts This Page (optional)				. ,		9	105.6	7			
TOTAL This Period (last page this line number	er only)					- 41-					

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ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)							
	y information copied from such Reports and Sta for commercial purposes, other than using the r			son for the purpose of soliciting contributions							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical Action Committee								
A.	Full Name of Individual (Last, First, Middle Initia Erickson, Gary A., , Mr.,	l) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 242 W Fairview Way			07 / D D / Y Y Y Y 31 2017							
	City	State	Zip Code	Transaction ID : PR9301817251							
	Palatine	IL	60067-7900	_ Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		41.67							
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item							
	New York Life Insurance Company	Age	ent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)							
в.	Full Name of Individual (Last, First, Middle Initia Erland, A. David, , Mr.,	l) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 23813 Northeast 27th Street			07 31 2017							
	City	State	Zip Code	Transaction ID : PR9301917251							
	Sammamish	WA	98074-5485	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		153.86							
	Name of Employer (for Individual) New York Life Insurance Company		cupation (for Individual) nior Partner	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1153.95	P/R Deduction (\$76.93 Bi-Weekly)							
C	Full Name of Individual (Last, First, Middle Initia Erwin, John K., , Mr.,	ii) or full C	Organization Name	Date of Receipt							
	Mailing Address 1214 Stockton Road			07 31 2017							
	City	State	Zip Code	Transaction ID : PR9302917251							
	Kinston	NC	28504-2163	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		50.00							
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 265.00	P/R Deduction (\$50.00 Monthly)							
s	JBTOTAL of Receipts This Page (optional)		•	245.53							
Т	OTAL This Period (last page this line number or	וy)	•								

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IT.			Use separate schedule(s)	(checl	< only	y or	ne)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		Date of Receipt 77 / 31 / Y Transaction ID : PR9305(12 16	17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for to solic	the it co	pur ntrib	pose of outions	f solicitin	ig cor ch co	ntributi	ons		
	NAME OF COMMITTEE (In Full)												
\rangle	New York Life Insurance Compa	ny Politi	cal Action Committee										
Α.	Full Name of Individual (Last, First, Middle Initi Esquivel Jr., Filemon, , Mr.,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 629 E Kenedy Avenue			N	07 31 2017								
	City Kingsville	State TX	Zip Code 78363-5774		Transaction ID : PR9305017251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		41.67									
	Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Age			M	emo	tem						
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R	Ded	ucti	on (\$41	.67 Mon	thly)				
в.	Full Name of Individual (Last, First, Middle Initi Fahning, Gerald H., , Mr.,	al) or Full O	rganization Name	Da	ite of	f Re	eceipt						
	Mailing Address 304 1st Avenue Northwest PO Box 177	0	IV		/				۲ 17	Y			
	City Dedge Center	State MN	Zip Code 55927-9034							-			
	Dodge Center FEC ID number of contributing federal political committee.	C	33927-9034	An	noun	t of	Each F	Receipt t	nis P	eriod 30.0	0		
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)									
С.	Full Name of Individual (Last, First, Middle Initi Fanning, Thomas W., , Mr.,	al) or Full O	rganization Name	Da	ite of	f Re	eceipt						
	Mailing Address 1049 Terrace Avenue			- L	07 ^M		D 31	_ L	20)17 [°]	Y		
	City Wyomissing	State PA	Zip Code 19610-2048				-	: PR9312 Receipt t	-	-			
	FEC ID number of contributing federal political committee.	С					y :	. ,		41.6	7		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt		М	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)									
⊢	UBTOTAL of Receipts This Page (optional)			Γ	-		9 		-	113.3	4		

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ITEMIZED RECEIPTS	,	Use separate schedule(s)	(check only one)									
II EIVIIZED REGEIPIS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	<u> </u>	·····										
New York Life Insurance	e Company Politi	cal Action Committee										
Full Name of Individual (Last, First, Felte, David, , Mr.,	Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 123 Keppel Way			07 31 2017									
City Cotati	State CA	Zip Code 94931-5363	Transaction ID : PR9321417251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		83.34									
Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)									
Full Name of Individual (Last, First, B. Mathas, Theodore, , Mr.,	Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 8 Carriage Trail			07 31 2017									
City	State	Zip Code	Transaction ID : PR93217251									
Tarrytown	NY	10591-6306	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		230.78									
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) irman & Chief Executive Officer	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)									
Full Name of Individual (Last, First, Fenwick, Terry G., , Mr.,	Middle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2309 Stannye Driv			07 31 2017									
City Louisville	State KY	Zip Code 40222-6351	Transaction ID : PR9321817251 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		83.33									
Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 583.31	P/R Deduction (\$83.33 Monthly)									
SUBTOTAL of Receipts This Page (d	pptional)		397.45									
TOTAL This Period (last page this lir	e number only)	······										

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)							
			person for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance Con	npany Polit	ical Action Committee								
Full Name of Individual (Last, First, Middle Findling, Jeffrey, , Mr.,	e Initial) or Full C	Drganization Name	Date of Receipt							
Mailing Address 252 McCord Street			07 / D D / Y Y Y Y 2017							
City Marietta	State GA	Zip Code 30064-2320	Transaction ID : PR9330617251							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 38.48							
Name of Employer (for Individual) New York Life Insurance Company		supation (for Individual) nior Associate	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R Deduction (\$19.24 Bi-Weekly)							
Full Name of Individual (Last, First, Middle B. Fischer, Stephen K., , Mr.,	Initial) or Full C	Drganization Name	Date of Receipt							
Mailing Address 55 Pearson Street			07 / D D / Y Y Y Y 2017							
City Beverly	State MA	Zip Code 01915-3038	Transaction ID : PR9332917251							
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 41.67							
Name of Employer (for Individual) New York Life Insurance Company	Occ	cupation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291,69	P/R Deduction (\$41.67 Monthly)							
Full Name of Individual (Last, First, Middle C. Fox, Cynthia S., , Ms.,	Initial) or Full C	Drganization Name	Date of Receipt							
Mailing Address 1114 Sunset Drive			07 / D D / Y Y Y Y 31 2017							
City Kimberly	State WI	Zip Code 54136-1234	Transaction ID : PR9348717251							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1225.00	P/R Deduction (\$175.00 Monthly)							
SUBTOTAL of Receipts This Page (optional))		255.15							
TOTAL This Period (last page this line num	per only)									

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			for each category of the Detailed Summary Page		X 11a 11b 11c 12 13 14 15 16			17					
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose of	soliciting	contribu	tions			
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compai	ny Politio	cal Action Committee										
A.	Full Name of Individual (Last, First, Middle Initia Hamrick, Jane, , Ms.,	l) or Full Or	rganization Name	Date of Receipt									
	Mailing Address 531 East 88th Street Apt. 3C				м м 07	/	D 31) / Y	ү ү 2017	Y			
	City New York	State NY	Zip Code 10128-7737		Transaction ID : PR93517251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>				60.	00			
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) President & Actuary		Me	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00		P/R Dedu	ucti	on (\$30	.00 Bi-We	ekly)				
	Full Name of Individual (Last, First, Middle Initia Fthenakis, Zacharias, , Mr.,	l) or Full Or	rganization Name		Date of	Re	eceipt						
	Mailing Address 99 Whistler Road			м м 07	/	31	/ Y	ү ү 2017	Y				
	City Manhasset	State NY	Zip Code 11030-2839					PR93613					
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period								
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 350.00	P/R Deduction (\$50.00 Monthly)									
	Full Name of Individual (Last, First, Middle Initia Gamble, Michael, , Mr.,	l) or Full Or	rganization Name		Date of	Re	eceipt						
	Mailing Address 1709 Huntington Court	1			^M 07	1	31) / Y	2017 [°]	Y			
	City Safety Harbor	State FL	Zip Code 34695-5636				-	PR9370	517251 is Period				
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	, ,	38.	48			
	Name of Employer (for Individual) New York Life Insurance Company		ipation (for Individual) orate Vice President		Me	emo	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 236.47	P/R Deduction (\$15.23 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)						, .	.,	148.4	48			
т	OTAL This Period (last page this line number or	ıly)	••••••	-					4				

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171			Use separate schedule(s)	(ch	eck only	/ or	ne)	L					
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a			11b 14	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	contribu	tions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compared	ny Politic	cal Action Committee										
A.	Full Name of Individual (Last, First, Middle Initia Garcia, Eduardo L., , Mr.,	al) or Full Or	ganization Name		Date of	Re	eceipt						
	Mailing Address 5218 Wooldridge Road				07 31 Y Y Y Y Y 07 31 2017								
	City Corpus Christi	State TX	Zip Code 78413-3833		Transaction ID : PR9373117251 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		41.67									
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	pation (for Individual) nt		Me	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)									
в.	Full Name of Individual (Last, First, Middle Initia Garrett, Scott, , Mr.,	al) or Full Or	ganization Name		Date of	Re	eceipt						
	Mailing Address 177 W 3rd Avenue				07 / D D / Y Y Y Y Y 07 31 2017								
	City Woodhull	State IL	Zip Code 61490-5221				-	PR93773 Receipt th					
	FEC ID number of contributing federal political committee.	С							41.	_			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) nt		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)									
С.	Full Name of Individual (Last, First, Middle Initia Garris Jr., Dagon, , Mr.,	al) or Full Or	ganization Name		Date of	Re	eceipt						
	Mailing Address 20410 Brightonwood Lane	01-1-	The Oak		07 ^M	1	31		2017	Y			
	City Spring	State TX	Zip Code 77379-2750					PR9377					
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	, ,	50.	00			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agen	pation (for Individual) t		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)									
s	UBTOTAL of Receipts This Page (optional)			•			, .	.,	133.	34			
т	OTAL This Period (last page this line number or	וy)		•	<u> </u>		,						

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane and a	L ay not be sold or used by any p address of any political committe	erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee											
Full Name of Individual (Last, First, Middle I A. Garron, Kevin, , Mr.,	nitial) or Full C	organization Name	Date of Receipt										
Mailing Address 50 N Evergreen Road Apt. 2	20B		07 31 2017										
City Edison	State NJ	Zip Code 08837-2252	Transaction ID : PR9377917251 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		41.67										
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)										
Full Name of Individual (Last, First, Middle I B. Garry, Nicholas A., , Mr.,	nitial) or Full C	organization Name	Date of Receipt										
Mailing Address 2404 S 3rd Avenue			07 31 2017										
City Sioux Falls	StateZip CodeSD57105-3915		Transaction ID : PR9378217251 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		83.34										
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)										
Full Name of Individual (Last, First, Middle I c. Hoge, F. Courtney, , Mr.,	nitial) or Full C	organization Name	Date of Receipt										
Mailing Address 3027 Golf Colony Drive			07 / D D / Y Y Y Y 31 2017										
City Salem	State VA	Zip Code 24153-6833	Transaction ID : PR93817251 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		83.34										
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)										
SUBTOTAL of Receipts This Page (optional)			208.35										
TOTAL This Period (last page this line numbe	r only)	······											

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	ny information copied from such Reports and Sta for commercial purposes, other than using the				for the		oose of	soliciting	g contrib					
$\overline{\}$	NAME OF COMMITTEE (In Full)													
\rangle	New York Life Insurance Compa	ny Politio	cal Action Committee											
/	Full Name of Individual (Last, First, Middle Initia	al) or Full Or	rganization Name											
Α.	Prentice, Jerome C., , Mr.,				Date of Receipt									
	Mailing Address 6003 Wilmington Drive				07	1	31	/ Y	2017	Y				
	City	State	Zip Code		Trans	acti	on ID :	PR94217	7251					
	Burke	VA	22015-3823		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C			92.00									
	Name of Employer (for Individual)	Occu	pation (for Individual)		M	emo	Item							
	New York Life Insurance Company	Ager	nt											
	Receipt For: Primary General	Aggregate	Year-to-Date ▼											
	Other (specify) ▼	· · · ·	644.00	7 ⁶	P/R Ded	uctio	on (\$92.	00 Month	ıly)					
D	Full Name of Individual (Last, First, Middle Initia Barry, Becky V., , Ms.,	al) or Full Or	rganization Name		Data of		agint							
D.	Mailing Address 10935 Country Club Road			_	Date of	Re		/ Y	Y Y	Y				
			1		07	Ľ	31		2017					
	City Balla Foursha	State SD	Zip Code				-	PR94324						
	Belle Fourche		57717-6193		Amount	t ot	Each R	eceipt th	is Perio	d	_			
	FEC ID number of contributing federal political committee.	C		41.67										
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age		Memo Item										
	Receipt For:	Aggregate	Year-to-Date 🔻		1									
	Other (specify) ▼		291.69	P/R Deduction (\$41.67 Monthly)										
			,	_										
C.	Full Name of Individual (Last, First, Middle Initia Grozinger, Otto N., , Mr.,	al) or Full Oi	rganization Name		Date of	Re	ceipt							
	Mailing Address 10035 Winding Ridge Drive				MM	/		/ Y	Y Y	Y				
	City	State	Zip Code		07 Trans	acti	31 ion ID :	PR94342	2017 217251					
	Shreveport	LA	71106-7685					eceipt th		d				
	FEC ID number of contributing	С							100	0.00				
	federal political committee.				5	-	9	9	_					
	Name of Employer (for Individual)		pation (for Individual)		M	emc	Item							
New York Life Insurance Company Receipt For:														
	Primary General	Aggregate	Year-to-Date ▼	- F	P/R Ded	ucti	on (\$10	0.00 Mon	thly)					
Other (specify)			656.70											
5	UBTOTAL of Receipts This Page (optional)								233	3.67				
			, ,	_		-	,			-	4			
Т	OTAL This Period (last page this line number o	nly)	······]		L		_							

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17							
			e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance	e Company Politi	cal Action Committee								
Full Name of Individual (Last, First Guttieri, Peter N., , Mr.,	, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 59 Mayfair Road			07 31 2017							
City	State	Zip Code	Transaction ID : PR9440817251							
Nesconset	NY	11767-2608	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		30.00							
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
New York Life Insurance Company	Age	nt								
Receipt For:	Aggregate	Year-to-Date V								
Other (specify) ▼		210.00	P/R Deduction (\$30.00 Monthly)							
Full Name of Individual (Last, First B. Hall, Karen B., , Ms.,	, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2248 Viaduct Lom	а		07 31 2017							
City	State	Zip Code	Transaction ID : PR9448417251							
Camarillo	CA	93012-8267	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		30.00							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item							
Receipt For:	Aggregate	Year-to-Date V								
Primary General Other (specify) ▼		210.00	P/R Deduction (\$30.00 Monthly)							
Full Name of Individual (Last, First C. Halpern, Sidney G., , Mr.		rganization Name	Date of Receipt							
Mailing Address 8 Pebblebrook La	ne		07 / D D / Y Y Y Y 07 31 2017							
City	State	Zip Code	Transaction ID : PR9450817251							
Moreland Hills	ОН	44022-2380	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		100.00							
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
New York Life Insurance Company	Age	nt								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)							
SUBTOTAL of Receipts This Page (optional)		160.00							
TOTAL This Period (last page this li	ne number only)	······								

SCHEDULE A (FEC Form	Use separate sched	
ITEMIZED RECEIPTS	for each category o Detailed Summary I	
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) New York Life Insurance C	company Political Action Comr	nittee
Full Name of Individual (Last, First, Mi A. Hamill, Mary Lou, , Ms.,	ddle Initial) or Full Organization Name	Date of Receipt
Mailing Address 183 Biltmore Drive		07 / D D / Y Y Y Y 07 31 2017
City North Barrington	State Zip Code IL 60010-2001	Transaction ID : PR9452617251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.67
Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$41.67 Monthly)
Full Name of Individual (Last, First, Mi B. Handa, Rohan, , Mr.,	ddle Initial) or Full Organization Name	Date of Receipt
Mailing Address 19 Joy Drive		07 31 2017
City Manhasset Hills	State Zip Code NY 11040-1108	Transaction ID : PR9455517251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Executive Partner	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$19.23 Bi-Weekly)
Full Name of Individual (Last, First, Mi C. Harding, Benjamin, , Mr.,	ddle Initial) or Full Organization Name	Date of Receipt
Mailing Address 12 Maxwell Road		07 / ^D D / ^Y Y Y Y 31 2017
City Winchester	StateZip CodeMA01890-2919	Transaction ID : PR9459917251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	P/R Deduction (\$30.00 Monthly)
	umber only)	

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FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) Image: 11 a model 12 model 13 model 15 model 16 model 17 model							
	y information copied from such Reports and Sta for commercial purposes, other than using the n			rson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Initia Hartranft II, Gordon D., , Mr., Mailing Address 109 N Delphia Avenue	l) or Full C	rganization Name	Date of Receipt							
				07 31 2017							
	City Park Ridge	State IL	Zip Code 60068-3240	Transaction ID : PR9470417251							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
	New York Life Insurance Company	Age	ent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)							
_	Full Name of Individual (Last, First, Middle Initia	l) or Full C	organization Name								
в.	Haughey, James, , Mr., Mailing Address 4101 W El Prado Boulevard			Date of Receipt 07 31 2017							
	City	State	Zip Code	Transaction ID : PR9473817251							
	Татра	FL	33629-8525	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		32.00							
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Associate	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	P/R Deduction (\$16.00 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia Hernandez, Concepcion S., , Ms.,	l) or Full C	organization Name	Date of Receipt							
	Mailing Address 1120 Whitewing Avenue			07 / D D / Y Y Y Y 2017							
	City McAllen	State TX	Zip Code 78501-4056	Transaction ID : PR9490717251							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 224.00	P/R Deduction (\$32.00 Monthly)							
s	UBTOTAL of Receipts This Page (optional)		•	122.00							
т	OTAL This Period (last page this line number or	lly)	••••••								

FOR LINE NUMBER: PAGE 312 OF 352

T	EMIZED RECEIPTS		f	Jse separate schedule(s) or each category of the Detailed Summary Page	`	eck onl 11a 13		e) 11b 14	11c 15	12	_	17		
	y information copied from such Reports and Stat for commercial purposes, other than using the na													
\rangle	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politi	ical	Action Committee										
Α.	Full Name of Individual (Last, First, Middle Initial Hoberman, Richard, , Mr.,) or Full C	Drgar	nization Name	Date of Receipt									
	Mailing Address 14 Wake Robin Road	01-1-		Zie Ooste	07 / D D / Y Y Y Y Y 2017									
	City Westport	State CT		Zip Code 06880-6203					PR9507 [,] eceipt th					
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period									
	Name of Employer (for Individual) New York Life Insurance Company			ion (for Individual) ite Vice President		М	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 288.45	P/R Deduction (\$19.23 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial Hoffmann, Eric, , Mr.,) or Full C	Drgar	nization Name	Date of Receipt									
J.	Mailing Address 245 E 19th Street Apt. 2F	1		07		31	/ Y	2017						
	City New York	State NY		Zip Code 10003-2638					PR95101 eceipt th					
	FEC ID number of contributing federal political committee.	С									58.00			
	Name of Employer (for Individual) New York Life Insurance Company		Occupation (for Individual) Vice President				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 435.00	P/R Deduction (\$29.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initial Holmes III, John S., , Mr.,) or Full C	Drgar	nization Name		Date of	f Rec	eipt						
	Mailing Address 1916 Emoriland Boulevard					^M 07	/	D D D 31	/ Y	y 2017				
	City Knoxville	State TN		Zip Code 37917-3114					PR9515					
	FEC ID number of contributing federal political committee.	С				Amoun	, OIE		eceipt th		30.00			
	Name of Employer (for Individual) New York Life Insurance Company	Occ Age	•	ion (for Individual)		М	emo	ltem						
	Receipt For: Primary General Other (specify)	Yea	r-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)										
s	UBTOTAL of Receipts This Page (optional)			•					,	12	26.46			
т	OTAL This Period (last page this line number on	ly)							- T					

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) ▲ 11a 11b 13 14 15 16 17						
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full) New York Life Insurance Comp	any Politi	cal Action Committee							
Full Name of Individual (Last, First, Middle In A. Hughes, David, , Mr.,	itial) or Full C	Organization Name	Date of Receipt						
Mailing Address 1480 Cole Lane			07 31 2017						
City Upland	State CA	Zip Code 91784-8066	Transaction ID : PR9531617251						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1153.95	P/R Deduction (\$76.93 Bi-Weekly)						
Full Name of Individual (Last, First, Middle In B. Hunter, Rebecca A., , Ms.,	itial) or Full C	Organization Name	Date of Receipt						
Mailing Address 6566 S Rabia Avenue			07 31 2017						
City	State	Zip Code	Transaction ID : PR9537217251						
Boise	ID	83709-5649	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		30.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)						
Full Name of Individual (Last, First, Middle In C. Hunter, Stanley O., , Mr.,	itial) or Full C	Organization Name	Date of Receipt						
Mailing Address 28 Westminster Court			07 31 2017						
City	State	Zip Code	Transaction ID : PR9537317251						
New Rochelle FEC ID number of contributing	NY	10801-3107	Amount of Each Receipt this Period						
federal political committee.	С		50.00						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual)	Memo Item						
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
SUBTOTAL of Receipts This Page (optional)			233.86						
TOTAL This Period (last page this line number		•							

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: concerning only only only only only only only only
An or	y information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal Action Committee	
Α.	Full Name of Individual (Last, First, Middle Initial Hutt, Brian M., , Mr.,) or Full Oi	rganization Name	Date of Receipt
	Mailing Address 9612 Pinkney Court	State	Zip Code	07 31 2017
	City Potomac	MD	20854-4332	Transaction ID : PR9540017251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 875.00	P/R Deduction (\$125.00 Monthly)
в.	Full Name of Individual (Last, First, Middle Initial Hutto, Timothy, , Mr.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 500 Throckmorton Street #805	07 31 2017		
	City Fort Worth	State TX	Zip Code 76102-3733	Transaction ID : PR9540317251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) naging Partner	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 750.00	P/R Deduction (\$50.00 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initial Isbell, Lois L., , Ms.,) or Full O	rganization Name	Date of Receipt
	Mailing Address 2820 Moss Avenue			07 / D D / Y Y Y Y Y 07 31 2017
	City Midland	State TX	Zip Code 79705-4225	Transaction ID : PR9548817251 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		38.00
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item
	Receipt For: Primary General Other (specify)	P/R Deduction (\$38.00 Monthly)		
s	UBTOTAL of Receipts This Page (optional)			263.00
т	OTAL This Period (last page this line number on	ly)	·····	

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)							
II EIVIIZED KEGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) New York Life Insurance Com	pany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middle I A. Jackson, Gerald S., , Mr.,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2629 Northwest Three Siste	rs Drive		07 31 Y Y Y Y Y							
City Bend	State OR	Zip Code 97703-5608	Transaction ID : PR9552017251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		100.00							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)							
Full Name of Individual (Last, First, Middle I Jarvis, Sam, , Mr.,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 114 Lakeside Drive			07 / D D / Y Y Y Y 07 31 2017							
City Cortez	State CO	Zip Code 81321-4248	Transaction ID : PR9562817251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	s l									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)							
Full Name of Individual (Last, First, Middle I C. Jean, Margaret, , Ms.,	nitial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4812 W Estrella Street	01-1-	7.0.4	M M / D D / Y Y Y Y Y 07 31 2017							
City Tampa	State FL	Zip Code 33629-5409	Transaction ID : PR9563917251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		27.24							
Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Occupation (for Individual) Corporate Vice President		Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 204.30	P/R Deduction (\$13.62 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)			157.24							
TOTAL This Period (last page this line numbe	r only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		separate schedule(s)	FOR LINE NUMBER: PAGE 316 OF 352 (check only one)					
		ach category of the ed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
		erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance Co	mpany Political Ac	tion Committee						
Full Name of Individual (Last, First, Midd A. Jenkins, Steven J., , Mr.,	e Initial) or Full Organizati	on Name	Date of Receipt					
Mailing Address 14412 Riverside Drive	State Zin	Cada	07 / D D / Y Y Y Y Y 31 2017					
City Ashland		Code 8005-3176	Transaction ID : PR9565817251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		35.00					
Name of Employer (for Individual) New York Life Insurance Company	Occupation (Agent	for Individual)	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-I	Date ▼ 245.00	P/R Deduction (\$35.00 Monthly)					
Full Name of Individual (Last, First, Midd Jensen, Joann M., , Ms., Mailing Address 1809 Willis Lane	e Initial) or Full Organizati	on Name	Date of Receipt					
			07 31 2017 Transaction ID : PR9566917251 Amount of Each Receipt this Period					
City Keller		Code 248-3151						
FEC ID number of contributing federal political committee.	С							
Name of Employer (for Individual) New York Life Insurance Company	Occupation (Agent	for Individual)	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-I	Date ▼ 210.00	P/R Deduction (\$30.00 Monthly)					
Full Name of Individual (Last, First, Midd Johnson, Bradley D. , , Mr.,	e Initial) or Full Organizati	on Name	Date of Receipt					
Mailing Address 5855 Elkhorn Lane	Otata Zia	Orda	07 / D D / Y Y Y Y 07 31 2017					
City Santa Maria		Code 455-6000	Transaction ID : PR9572917251 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		125.00					
Name of Employer (for Individual) New York Life Insurance Company	Occupation (Agent	for Individual)	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate Year-to-I	Date ▼ 875.00	P/R Deduction (\$125.00 Monthly)					
SUBTOTAL of Receipts This Page (optiona TOTAL This Period (last page this line num			190.00					

Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 13	11b	11c	12	17						
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	l ay not be sold or used by any p ddress of any political committe	erson for the p	urpose of so	15 liciting n such	16 contributi committe	17 ions ee.						
NAME OF COMMITTEE (In Full)							-						
New York Life Insurance Com	npany Politi	cal Action Committee											
Full Name of Individual (Last, First, Middle A. Kahler, Michael E., , Mr.,	Initial) or Full O	rganization Name	Date of	Receipt									
Mailing Address 605 Fairway Drive			M M M										
City Dell Rapids	State SD	Zip Code 57022-2113		ction ID : PR									
FEC ID number of contributing federal political committee.	С					30.0	0						
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) nt	Mer	mo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Dedu	ction (\$30.00	Monthl	y)							
Full Name of Individual (Last, First, Middle B. Kaneski, Kelly D., , Ms.,	Initial) or Full O	rganization Name	Date of	Receipt									
Mailing Address 37 Saratoga Circle			07	/ 0 0 0 31	/ Y	2017	Y						
City Sacramento	State CA	Zip Code 95864-7110	Transaction ID : PR9599917251 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		250.00										
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduc	P/R Deduction (\$250.00 Monthly)									
Full Name of Individual (Last, First, Middle C. Kardon, Bruce, , Mr.,	Initial) or Full O	rganization Name	Date of	Receipt									
Mailing Address 4773 Parkside Drive			07	/ D D 31		2017	Y						
City Frisco	State TX	Zip Code 75034-8100		of Each Rec									
FEC ID number of contributing federal political committee.	С			g	,	33.0	0						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President	Me	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 247.50	P/R Dedu	ction (\$16.50	Bi-Wee	kly)							
SUBTOTAL of Receipts This Page (optional)					, ,	313.0	0						
TOTAL This Period (last page this line numb	er only)				-								

Use separate schedule(s)

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		Use separate schedule(s)	(ch	(check only one)									
			for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c	12	17			
	on copied from such Reports and Sta prcial purposes, other than using the n				for the		pose of		contribu				
	COMMITTEE (In Full) ork Life Insurance Compar	ny Politic	cal Action Committee										
	e of Individual (Last, First, Middle Initia My M., , Ms.,	l) or Full Or	ganization Name		Date of	Re	eceipt						
Mailing Ac	dress 4782 Falmouth Road				07 31 2017								
City Cotuit		State MA	Zip Code 02635-2513					PR96061 eceipt th	I 17251 is Period				
	umber of contributing litical committee.	С						-	28.	83			
New York	Employer (for Individual) Life Insurance Company	Occu Ager	pation (for Individual) nt		Me	emc	tem						
Receipt Fo		Aggregate	Year-to-Date ▼ 201.81	F	P/R Dedu	ucti	on (\$28.	83 Month	nly)				
	of Individual (Last, First, Middle Initia litchell A., , Mr.,	l) or Full Or	ganization Name		Date of	Re	eceipt						
Mailing Ac	dress 616 E Street Northwest Apt. 101		07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
City Washingto	n	State DC	Zip Code 20004-2276	-				PR96073					
FEC ID nu	umber of contributing litical committee.	C				Amount of Each Receipt this Period							
Name of I New York	ne of Employer (for Individual) York Life Insurance Company Agent				Memo Item								
Receipt Fo		Aggregate Year-to-Date ▼ 201.81					P/R Deduction (\$28.83 Monthly)						
	of Individual (Last, First, Middle Initia , Brian, , Mr.,	l) or Full Or	ganization Name		Date of	Re	eceipt						
	Idress 30 Northrup Drive				07 31 2017								
City Brentwoo	d	State NH	Zip Code 03833-6220				-	PR96100 leceipt th	017251 is Period				
	umber of contributing litical committee.	С			<u> </u>		, .	9	50.	00			
New York	Employer (for Individual) Life Insurance Company	Occupation (for Individual) Agent				emo	tem						
Receipt Fo		Aggregate Year-to-Date ▼ 350.00					on (\$50	.00 Month	nly)				
SUBTOTAL	of Receipts This Page (optional)						, .	,	107.0	66			
TOTAL This	Period (last page this line number on	ly)		-			-						

Use separate schedule(s)

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17			Use separate schedule(s)	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 13	11b	11c	12	17				
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committe	erson for the	purpose of	soliciting	contrib	utions				
	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Compa	any Politi	cal Action Committee									
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Keefe, David F., , Mr.,			rganization Name	Date o	of Receipt							
	Mailing Address 116 Mill Street			M N 07	/ D 31) / Y	y y 2017	Ŷ				
	City	State MA	Zip Code		saction ID :							
	Newton Center		02459-1127	Amoun	t of Each F	Receipt th	is Perio	d				
	FEC ID number of contributing federal political committee.	С					100	0.00				
	Name of Employer (for Individual)	Оссі	upation (for Individual)	N	lemo Item							
	New York Life Insurance Company											
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General		700.00	P/R Dec	duction (\$10	0.00 Mon	thly)					
	Other (specify) v											
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name									
В.	Kellert, Noel, , Mr.,			Date o	of Receipt							
	Mailing Address 6901 Rockledge Drive Suite 500	Chata	Zin Oode	07	31) / Y	2017	Y				
	City Bethesda	State MD	Zip Code 20817-7857		saction ID :			-				
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period 38.48							
	Name of Employer (for Individual)	Occi	upation (for Individual)		lemo Item							
	New York Life Insurance Company	Sen		_								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		288.60	P/R Dec	luction (\$19.	24 Bi-We	ekly)					
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Kelly, Richard G., , Mr.,	al) or Full O	rganization Name	Date o	of Receipt							
	Mailing Address 32 Marlboro Street			M N 07	M M / D D / Y Y Y Y Y							
	City	State	Zip Code	Tran	saction ID :	PR9615	617251					
	Norwood	MA	02062-1212	Amoun	t of Each F	Receipt th	is Perio	d				
	FEC ID number of contributing federal political committee.	С			83.34							
	Name of Employer (for Individual)	Осси	upation (for Individual)	N	Memo Item							
	New York Life Insurance Company	Ager	nt	_								
	Receipt For:	Aggregate	Year-to-Date ▼		duation (¢00	Od Mand	- I. A					
	Other (specify)		583.38	P/R Dec	duction (\$83	.34 Monti	ııy)					
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number c						221	.82				

Use separate schedule(s)

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Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a		on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) New York Life Insurance Company Politi	cal Action Committee	
New York Life Insurance Company Age	Zip Code 02790-2634 upation (for Individual)	Date of Receipt
Primary General Other (specify) ▼	Year-to-Date ▼ 639.38	P/R Deduction (\$91.34 Monthly)
Full Name of Individual (Last, First, Middle Initial) or Full C Kincannon, Gail A., , Ms., Mailing Address 11712 Emerald Falls Drive	rganization Name	Date of Receipt
City State Austin TX FEC ID number of contributing federal political committee. C Name of Employer (for Individual) New York Life Insurance Company Occ Age	Zip Code 78738-5329 upation (for Individual) ent	Transaction ID : PR9630617251 Amount of Each Receipt this Period
Receipt For: Aggregate Primary General Other (specify) ▼	Year-to-Date ▼ 875.00	P/R Deduction (\$125.00 Monthly)
Full Name of Individual (Last, First, Middle Initial) or Full C Kirgan, Tiffany H., , Ms., Mailing Address 3557 County Road 3802	rganization Name	Date of Receipt
New York Life Insurance Company Age	Zip Code 75757-8414 upation (for Individual) nt Year-to-Date ▼ 350.00	07 31 2017 Transaction ID : PR9633617251 Amount of Each Receipt this Period 50.00 Memo Item P/R Deduction (\$50.00 Monthly)
SUBTOTAL of Receipts This Page (optional)	r	266.34

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	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements ma the name and a	I ay not be sold or used by any p address of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	npany Politi	cal Action Committee								
Full Name of Individual (Last, First, Middle A. Kline, Mark B., , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 145 Robert E Lee Blvd. St	e. 310		07 31 2017							
City New Orleans	State LA	Zip Code 70124-2574	Transaction ID : PR9637717251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		250.00							
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)							
Full Name of Individual (Last, First, Middle B. Klotz, Thomas C., , Mr.,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 70 Verde Street			07 31 2017							
City Kenner	State LA	Zip Code 70065-1029	Transaction ID : PR9638417251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)							
Full Name of Individual (Last, First, Middle C. Kortkamp, Dominick, , Mr.,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 31 Hill Lane	01-14	7. 0.4	07 / D D / Y Y Y Y 2017							
City Roslyn Heights	State NY	Zip Code 11577-2611	Transaction ID : PR9649317251 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		230.78							
Name of Employer (for Individual) New York Life Insurance Company	Mar	upation (for Individual) aging Partner	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1730.85	P/R Deduction (\$115.39 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optional)		530.78							
TOTAL This Period (last page this line num	ber only)									

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Any i or fo N. N A. FL M Ci V FE fe	r commercial purposes, other than using the in AME OF COMMITTEE (In Full) Jew York Life Insurance Compa ull Name of Individual (Last, First, Middle Initia Adkins Jr., James E., , Mr., ailing Address 10200 Wendover Drive	name and ac	Idress of any political committee	X 11a 11b 11c 12 13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee. 110 110							
A. $\frac{A}{M}$	r commercial purposes, other than using the in AME OF COMMITTEE (In Full) Jew York Life Insurance Compa ull Name of Individual (Last, First, Middle Initia Adkins Jr., James E., , Mr., ailing Address 10200 Wendover Drive	name and ac	Idress of any political committee	erson for the purpose of soliciting contributions							
	AME OF COMMITTEE (In Full) Jew York Life Insurance Compa ull Name of Individual (Last, First, Middle Initia Adkins Jr., James E., , Mr., ailing Address 10200 Wendover Drive	ny Politic	cal Action Committee								
A. Fi M Ci V FE fe	ull Name of Individual (Last, First, Middle Initia Adkins Jr., James E., , Mr., ailing Address 10200 Wendover Drive	-									
A. <u>A</u> M Ci V FE fe	Adkins Jr., James E., , Mr., ailing Address 10200 Wendover Drive	al) or Full Or	ganization Name								
Ci V FE fe				Date of Receipt							
V FE fe	itv			07 31 Y Y Y Y Y							
FE		State VA	Zip Code	Transaction ID : PR96517251							
fe	lienna	VA	22181-2960	Amount of Each Receipt this Period							
Na	EC ID number of contributing deral political committee.	С		250.00							
	ame of Employer (for Individual)	Occu	pation (for Individual)	Memo Item							
N	ew York Life Insurance Company	Agen	ıt								
R	eceipt For:	Aggregate	Year-to-Date ▼								
-	Primary General	· · · ·	1750.00	P/R Deduction (\$250.00 Monthly)							
	Other (specify)		1750.00	1							
Fi	ull Name of Individual (Last, First, Middle Initia	al) or Full Or	ganization Name								
	Kozak, Iris, , Ms.,			Date of Receipt							
	ailing Address 14104 Skye Terrace			07 ^D D ^D ^Y Y Y Y 31 2017							
Ci		State	Zip Code	Transaction ID : PR9651917251							
	elray Beach	FL	33446-3384	Amount of Each Receipt this Period							
	EC ID number of contributing deral political committee.	С		50.00							
	ame of Employer (for Individual) ew York Life Insurance Company	Occu Ager	pation (for Individual) nt	Memo Item							
R	eceipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$50.00 Monthly)							
	Primary General										
	Other (specify) V		, 350.00	1							
	ull Name of Individual (Last, First, Middle Initia Krantz Jr., Peter R., , Mr.,	al) or Full Or	ganization Name	Date of Receipt							
M	ailing Address 113 Locust Lane			07 31 / Y Y Y Y Y 07 31 2017							
Ci		State	Zip Code	Transaction ID : PR9653417251							
Y	′orktown	VA	23693-4935	Amount of Each Receipt this Period							
	EC ID number of contributing deral political committee.	С		41.67							
Na	ame of Employer (for Individual)	Occu	pation (for Individual)	Memo Item							
	ew York Life Insurance Company	Agen	t								
R	eceipt For:	Aggregate	Year-to-Date ▼								
-	Primary General		291.69	P/R Deduction (\$41.67 Monthly)							
L	Other (specify)		291.09	1							
	BTOTAL of Receipts This Page (optional)			341.67							

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			Use separate schedule(s)	(ch	(check only one)							
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c	12	Г	17	
	y information copied from such Reports and St for commercial purposes, other than using the				for the		pose of	soliciting	g contr	ibutic	ns	
	NAME OF COMMITTEE (In Full) New York Life Insurance Compa	any Politi	cal Action Committee									
A.	Full Name of Individual (Last, First, Middle Initi Krasne, Seth, , Mr.,	al) or Full O	Organization Name		Date of	f Re	eceipt					
	Mailing Address 5333 E 6th Street		^M 07	1	D 31	D / Y	201					
	City Tucson	State AZ	Zip Code 85711-2340	_				PR9653 Receipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>		-			28.83		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent		M	emo	ttem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 201.81		P/R Ded	ucti	on (\$28	.83 Mont	hly)			
в.	Full Name of Individual (Last, First, Middle Initi Kuchuk, Aleksandr, , Mr.,	al) or Full O	organization Name		Date of	f Re	eceipt					
	Address 315 Ocean Parkway Apt. 4F	Otata	Zin Oode		07	/	D 11		y 2017			
	City Brooklyn	State NY	Zip Code 11218-4833				-	PR9658				
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period							
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nior Associate		M	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.60					on (\$19	.24 Bi-We	∋ekly)			
с.	Full Name of Individual (Last, First, Middle Initi Lam, Agnes, , Ms.,	al) or Full O	Organization Name		Date of	f Re	eceipt					
	Mailing Address 7131 Calla Pass				07 / ^D D / ^Y Y Y Y 07 31 2017							
	City Middleton	State WI	Zip Code 53562-1072	_	Transaction ID : PR9668317251 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			Ē		y	9	1	15.38		
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Managing Partner				emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 865.35	'	P/R Ded	lucti	on (\$57	7.69 Bi-W	eekly)			
	UBTOTAL of Receipts This Page (optional)			• -			, . , .		18	82.69		

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th			person for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)	nony Doliti	aal Aatian Committee										
> New York Life Insurance Com	pany Politi	cal Action Committee										
Full Name of Individual (Last, First, Middle I A. Landazuri, Carlos, , Mr.,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4715 Coho Lane			07 31 2017									
City	State	Zip Code	Transaction ID : PR9671617251									
West Linn	OR	97068-2970	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		27.24									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
New York Life Insurance Company	Cor	porate Vice President										
Receipt For:	Aggregate	Year-to-Date 🔻										
Primary General		204.30	P/R Deduction (\$13.62 Bi-Weekly)									
Other (specify) V		204.30	1									
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name										
B. Langley, Edward D., , Mr.,			Date of Receipt									
Mailing Address 19069 Greenleaf Circle	Chata	Zin Oode	07 / 07 / 07 / 2017									
City Ponchatoula	State LA	Zip Code 70454-5274	Transaction ID : PR9674417251									
		70434-3274	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	-									
Primary General			P/R Deduction (\$250.00 Monthly)									
Other (specify) ▼		, 1750.00	1									
Full Name of Individual (Last, First, Middle I C. Leitner, Kimberley, , Ms.,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 9 Wilshire Run			07 31 2017									
City	State	Zip Code	Transaction ID : PR9701817251									
Scotch Plains	NJ	07076-2843	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		30.00									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
New York Life Insurance Company	Dire	ctor										
Receipt For:	Aggregate	Year-to-Date V										
Other (specify)		225.00	P/R Deduction (\$15.00 Bi-Weekly)									
			1									
SUBTOTAL of Receipts This Page (optional)			307.24									
TOTAL This Period (last page this line numbe	r only)											

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IT.	ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	X 11a		11b	11c		Г	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	erson for the	e pur ontrit	pose of	soliciting	contr	ibutic	ns	
	NAME OF COMMITTEE (In Full)										
$ \rangle$	New York Life Insurance Compa	any Politi	cal Action Committee								
<u> </u>	Full Name of Individual (Last, First, Middle Initi Leonard, Jason, , Mr.,	al) or Full O	Organization Name	Date of	of Re	eceipt					
	Mailing Address 9 Kings View			-	M M / D D / Y Y Y Y						
	City	State	Zip Code	Tran	sact	ion ID :	PR97048	31725 ⁻	1		
	San Antonio	TX	78257-1718	Amour	nt of	Each R	eceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	С				-		3	84.60)	
	Name of Employer (for Individual)	Occi	upation (for Individual)	N	Nemo	b Item					
	New York Life Insurance Company	Mar	naging Partner								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		1961.58	P/R De	ducti	on (\$115	5.39 Bi-W	/eekly))		
			age age are								
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Organization Name								
Β.	Lewis, Paul A., , Mr.,			Date of	of Re	eceipt					
	Mailing Address PO Box 581	State	Zin Code	07	M /	31	/ Y	2017			
	City Lockeford	State CA	Zip Code 95237-0581				PR97126 eceipt th				
	FEC ID number of contributing federal political committee.	С			· · · · ·				83.34		
	Name of Employer (for Individual) New York Life Insurance Company	Occ	cupation (for Individual) ent		Vemo	ttem					
	Receipt For:		Year-to-Date V								
	Primary General Other (specify) ▼		583.38	P/R Dee	ducti	on (\$83.	34 Month	nly)			
				·							
C.	Full Name of Individual (Last, First, Middle Initi Kunhardt Jr., Daniel, , Mr.,	al) or Full O	Organization Name	Date of	of Re	eceipt					
	Mailing Address 11 Madison Circle			07		31	JL	2017			
	City Greenfield	State MA	Zip Code 01301-2703			-	PR97172	-			
			01001 2700	Amour	nt of	Each R	eceipt th	is Per	IOD	_	
	FEC ID number of contributing federal political committee.	С				y	y	2	50.00)	
	Name of Employer (for Individual) New York Life Insurance Company	Occi Agei	upation (for Individual) nt		Vem	o Item					
	Receipt For:	Aggregate	Year-to-Date V								
	Other (specify)		1750.00	P/R Deduction (\$250.00 Monthly)							
⊢	UBTOTAL of Receipts This Page (optional)					5 .	· ·	7	17.94		

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)					
Any information copied from such Reports and St or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full) New York Life Insurance Compa	any Polit	ical Action Committee						
Full Name of Individual (Last, First, Middle Initi A. Lindblom, Kevin D., , Mr.,	ial) or Full C	Organization Name	Date of Receipt					
Mailing Address 720 W Williams Drive			07 / D D / Y Y Y Y 2017					
City Marion	State IA	Zip Code 52302-5937	Transaction ID : PR9723117251					
		52502-5957	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		41.67					
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item					
New York Life Insurance Company	Age	ent						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)					
Full Name of Individual (Last, First, Middle Init	ial) or Full C	Drganization Name						
B. Hopkins, Gillian L., , Ms.,			Date of Receipt					
Mailing Address PO Box 2075			07 / D D / Y Y Y Y 07 31 2017					
City Westminster	State MD	Zip Code 21158-7063	Transaction ID : PR9740917251					
		21150-7005	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		58.00					
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item					
Receipt For:	Aggregate	Year-to-Date V						
Other (specify) ▼		406.00	P/R Deduction (\$58.00 Monthly)					
Full Name of Individual (Last, First, Middle Initi C. Lu, Minde, , Mr.,	ial) or Full C	Drganization Name	Date of Receipt					
Mailing Address 86-06 Avon Street			07 / D D / Y Y Y Y 2017					
City	State	Zip Code	Transaction ID : PR9744717251					
Jamaica Estates	NY	11432-3135	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		76.92					
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item					
New York Life Insurance Company	Exe	cutive Partner						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 576.90	P/R Deduction (\$38.46 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)			176.59					
TOTAL This Period (last page this line number of	only)							

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			Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any po ddress of any political committee	erson f to so	for the	pur ntrib	pose of	soliciting	g con	tributi	ons
	NAME OF COMMITTEE (In Full)										
\rangle	New York Life Insurance Comp	any Politi	cal Action Committee								
Α.	Full Name of Individual (Last, First, Middle Ini Lutz, Eugene, , Mr.,	tial) or Full O		Date of Receipt							
	Mailing Address 112 Brook Street				07 31 Y Y Y Y 2017						
	City Garden City	State NY	Zip Code 11530-6404					PR9750 leceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>			-		230.7	8
	Name of Employer (for Individual) New York Life Insurance Company		ipation (for Individual) aging Partner		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1730.85	P	/R Ded	ucti	on (\$11	5.39 Bi-V	Veekl	y)	
в.	Full Name of Individual (Last, First, Middle Ini Lynch Jr., Thomas F., , Mr.,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 47 Saratoga Road		07 / D D / Y Y Y Y Y 2017							Y	
	City	State	Zip Code		Trans	acti	on ID :	PR9752	21725	51	
	Newburgh	NY	12550-8734		Amoun	t of	Each R	eceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С			<u> </u>		7	7		39.0	0
	Name of Employer (for Individual) New York Life Insurance Company	Occi Age	upation (for Individual) nt		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 273.00	P	/R Ded	uctio	on (\$39.	00 Monti	hly)		
С.	Full Name of Individual (Last, First, Middle Ini Madgett, Brian, , Mr.,	tial) or Full O	rganization Name		Date o	f Re	eceipt				
	Mailing Address 4607 102nd Lane Northeast				^M 07	/	31	L L	201	1. A 1.	Y
	City Kirkland	State WA	Zip Code 98033-7646					PR9757			
	FEC ID number of contributing federal political committee.	С			Amoun				115 F 6	76.9 [,]	4
	Name of Employer (for Individual) New York Life Insurance Company		ipation (for Individual) President		М	emo	tem Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 577.05	P	P/R Dec	lucti	on (\$38.	.47 Bi-W	eekly)	
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			-			5 ·	5		346.72	2

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			Use separate schedule(s)	(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b 14	11c 15	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		oose of	soliciting	contribut	tions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politic	cal Action Committee										
A.	Full Name of Individual (Last, First, Middle Initia Maher, Daniel T., , Mr.,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 117 Alden Street				07 31 2017								
	City Dedham	State MA	Zip Code 02026-5127					PR97606 leceipt th	517251 is Period				
	FEC ID number of contributing federal political committee.	С							41.0	67			
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	ipation (for Individual) nt		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.69]	P/R Dedu	uctio	on (\$41.	.67 Month	nly)				
в.	Full Name of Individual (Last, First, Middle Initia Mauceri, Maria, , Ms.,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 152 E 94th Street Apt. 5G				м м 07	/	31	/ Y	2017	Ŷ			
	City New York	State NY	Zip Code 10128-2575				-	PR97974	17251 is Period				
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Vice President & Actuary							230.	76			
	Name of Employer (for Individual) New York Life Insurance Company				Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 1730.70] F	P/R Dedu	uctic	on (\$115	5.38 Bi-W	'eekly)				
C.	Full Name of Individual (Last, First, Middle Initia Maus, Richard C., , Mr.,	l) or Full Or	ganization Name		Date of	Re	ceipt						
	Mailing Address 5762 Berkshire Lane	Otata	7.0.0.1		07	/	31		2017	Y			
	City Dallas	State TX	Zip Code 75209-2402					PR97980 leceipt th	is Period				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	. ,	200.0	00			
Name of Employer (for Individual) New York Life Insurance Company			pation (for Individual) It		Me	emo	tem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1400.00] F	P/R Ded	uctio	on (\$20	0.00 Mon	thly)				
s	UBTOTAL of Receipts This Page (optional)			•			, .		472.4	13			
т	OTAL This Period (last page this line number or	ıly)	•••••	- ►			,						

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) New York Life Insurance Com	ipany Polit	ical Action Committee					
Full Name of Individual (Last, First, Middle McFadden, Chauvon, , Mr., Mailing Address 43805 Central Station Dr. A	pt. 337		Date of Receipt				
City Ashburn	State VA	Zip Code 20147-7375	Transaction ID : PR9802917251				
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	upation (for Individual) ent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 385.00	P/R Deduction (\$55.00 Monthly)				
Full Name of Individual (Last, First, Middle B. Mc Caffrey, Michael S., , Mr.,	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 1771 Tapo Street			07 31 2017				
City Simi Valley	State CA	Zip Code 93063-7677	Transaction ID : PR9806717251				
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 41.67				
Name of Employer (for Individual) New York Life Insurance Company	Occ Age	cupation (for Individual) ent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 291.69	P/R Deduction (\$41.67 Monthly)				
Full Name of Individual (Last, First, Middle McCarthy, Brendan, , Mr.,	Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 21 Hillside Road			07 / D D / Y Y Y Y 07 31 2017				
City Wellesley	State MA	Zip Code 02481-3215	Transaction ID : PR9807617251 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		58.00				
Name of Employer (for Individual) New York Life Insurance Company Receipt For:	Age		Memo Item				
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 406.00	P/R Deduction (\$58.00 Monthly)				
SUBTOTAL of Receipts This Page (optional).			154.67				
TOTAL This Period (last page this line number	er only)	•					

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FOR LINE NUMBER:

PAGE 330 OF

IT	EMIZED RECEIPTS		fo	r each category of the etailed Summary Page	`	eck on 11a 13		e) 11b 14	11c	12 16	17
	y information copied from such Reports and Stat for commercial purposes, other than using the na					for the	purp	ose of	soliciting	g contrib	utions
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politio	cal	Action Committee							
A.	Full Name of Individual (Last, First, Middle Initial Mc Dowell, Roger, , Mr.,) or Full Or	rgani	zation Name	Date of Receipt						
	Mailing Address 342 Rachel Road	1			07 / ^D D / ^Y Y Y Y 2017						Y
	City Kennewick	State WA	ŀ	Zip Code 99338-8316					PR9816		
				99330-0310	_	Amoun	t of E	Each R	eceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	С				<u> </u>				50	0.00
	Name of Employer (for Individual)	Occu	upatio	on (for Individual)		M	emo	Item			
	New York Life Insurance Company	Ager	nt								
	Receipt For:	Aggregate `	Year	-to-Date ▼							
	Primary General			050.00	F	P/R Dec	luctio	n (\$50.	00 Mont	hly)	
	Other (specify) v		7	350.00							
в.	Full Name of Individual (Last, First, Middle Initial McKenna, Meghann P., , Ms.,) or Full Or	rgani	zation Name		Date o	f Rec	eipt			
	Mailing Address 3151 Lily Drive			[™] 07		 31	/ Y	2017	Y		
	City	State		Zip Code		Trans	actio	n ID :	PR98224	417251	
	Bozeman	MT		59718-6088		Amoun	t of E	Each R	eceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	С			. 4			250	0.00		
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	•	on (for Individual)		M	emo	ltem			
	Receipt For:	Aggregate `	Year	-to-Date 🔻	-						
	Primary General Other (specify) ▼		,	1750.00	P	/R Ded	uctior	า (\$250).00 Mon	thly)	
C.	Full Name of Individual (Last, First, Middle Initial Mears, Mark S., , Mr.,) or Full Or	rgani	zation Name		Date o	f Rec	eipt			
	Mailing Address 2345 Pendragon Road					^M 07	/	D D D 31	/ Y	y y 2017	Y
	City	State		Zip Code		Tran	sactio	on ID :	PR9831	417251	
	Kingsport	TN		37660-2936		Amoun	t of E	Each R	eceipt th	nis Perio	d
	FEC ID number of contributing federal political committee.	С						,	,	41	1.67
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agen	•	on (for Individual)		N	lemo	ltem			
	Poppint For:	Aggregate `		to Data V	\neg						
	Primary General	Ayyreyale	rear	291.69	F	P/R Dec	ductio	n (\$41.	67 Mont	hly)	
	Other (specify)	7	231.03								
s	UBTOTAL of Receipts This Page (optional)			•			. ,		,	341	1.67
т	OTAL This Period (last page this line number on	ly)		····· •				-			

Use separate schedule(s)

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one) Image: Mark one)					
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.					
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	ny Politio	cal Action Committee						
A.	Full Name of Individual (Last, First, Middle Initial Mersol, Joe M., , Mr., Mailing Address 9647 Struthers Road) or Full O	rganization Name	Date of Receipt					
	City	State	Zip Code	07 31 2017 Transaction ID : PR9844217251					
	New Middletown	ОН	44442-8781	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) New York Life Insurance Company	Occu Agei	upation (for Individual) nt	Memo Item					
	Respiret For:	Year-to-Date ▼ 350.00	P/R Deduction (\$50.00 Monthly)						
B.	Full Name of Individual (Last, First, Middle Initial Miller, Gary J., , Mr.,) or Full Oi	rganization Name	Date of Receipt					
	Mailing Address 1211 E Nicolet Avenue			07 31 2017					
	City Phoenix	State AZ	Zip Code 85020-5118	Transaction ID : PR9854117251 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		70.00					
	Name of Employer (for Individual) New York Life Insurance Company	Occı Age	upation (for Individual) nt	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 490.00	P/R Deduction (\$70.00 Monthly)					
с.	Full Name of Individual (Last, First, Middle Initial Miller, Jay P., , Mr.,) or Full Oi	rganization Name	Date of Receipt					
	Mailing Address 5407 Landon Circle			07 31 2017					
	City Boynton Beach	State FL	Zip Code 33437-1677	Transaction ID : PR9855217251					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	upation (for Individual) nt	Memo Item					
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 583.38	P/R Deduction (\$83.34 Monthly)						
s	UBTOTAL of Receipts This Page (optional)			203.34					
т	OTAL This Period (last page this line number onl	ly)	·····						

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PAGE 332 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	\checkmark 11a 11b 11c 12 13 14 15 16 17
			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) New York Life Insurance Cor	npany Politi	cal Action Committee	
Full Name of Individual (Last, First, Middle Montgomery, Jason, , Mr., Mailing Address 3833 Evergreen Oaks Driv City Lutz FEC ID number of contributing federal political committee.		Drganization Name Zip Code 33558-5042	Date of Receipt 07 / 31 / 2017 Transaction ID : PR9876417251 Amount of Each Receipt this Period 38.48
Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify) ▼	Occ Cor Aggregate	upation (for Individual) porate Vice President Year-to-Date 215.54	P/R Deduction (\$13.62 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. Moro, Robert A., , Mr., Mailing Address 50 Wenwood Drive	e Initial) or Full C	Organization Name	Date of Receipt
City Hauppauge	State NY	Zip Code 11788-4321	Transaction ID : PR9886517251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual) New York Life Insurance Company		supation (for Individual)	250.00 Memo Item
Receipt For: Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 1750.00	P/R Deduction (\$250.00 Monthly)
Full Name of Individual (Last, First, Middle C. Murphy, Michael P., , Mr.,	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address 5151 Hoag Lane	1 -		07 / D D / Y Y Y Y Y 2017
City Fayetteville	State NY	Zip Code 13066-2574	Transaction ID : PR9902317251 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		41.67
Name of Employer (for Individual) New York Life Insurance Company Receipt For: Primary General Other (specify)	Age	upation (for Individual) nt Year-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)
SUBTOTAL of Receipts This Page (optional)		330.15
TOTAL This Period (last page this line num	ber only)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 333 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) New York Life Insurance C	company Politi	cal Action Committee							
Full Name of Individual (Last, First, Mi A. Navarro, Kathleen, , Ms.,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 405 E 14th Street #1G			07 31 2017						
City New York	State NY	Zip Code 10009-2702	Transaction ID : PR9914517251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		31.00						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President & Chief Diversity Offic	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 232.50	P/R Deduction (\$15.50 Bi-Weekly)						
Full Name of Individual (Last, First, Mi B. Bergeron, James W., , Mr.,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1543 Sunswept Drive			07 / D D / Y Y Y Y 31 2017						
City Bel Air	State MD	Zip Code 21015-5025	Transaction ID : PR99217251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) New York Life Insurance Company	Occi	upation (for Individual) nt	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	P/R Deduction (\$100.00 Monthly)						
Full Name of Individual (Last, First, Mi C. O'Brien, Daniel, , Mr.,	ddle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 65 Ridgewood Road			07 / D D / Y Y Y Y Y 31 / 2017						
City Ridgefield	State CT	Zip Code 06877-5219	Transaction ID : PR9946017251 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		36.38						
Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) President	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 218.01	P/R Deduction (\$13.62 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	nal)		167.38						
TOTAL This Period (last page this line r	umber only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 334 OF

			Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page	>	11a 13		11b 14	11c	12	17		
Ar	ny information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma ame and a	ay not be sold or used by any pe ddress of any political committee	rson to so	for the p	ourp	oose of	f soliciting	g contribu	itions		
	NAME OF COMMITTEE (In Full)											
\rangle	New York Life Insurance Compar	ny Politi	cal Action Committee									
A.	Full Name of Individual (Last, First, Middle Initial O'Brien, Katherine, , Ms.,) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 20 West 77th Street Apt. #16A				07 31 2017							
	City New York	State NY	Zip Code 10024-5127					PR9946 Receipt tl	417251 his Perioc	1		
	FEC ID number of contributing federal political committee.	С					.		38	.48		
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) & Chief Human Resources Officer		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	F	P/R Dedu	uctio	on (\$19).24 Bi-W	eekly)			
в.	Full Name of Individual (Last, First, Middle Initial Oestreicher, David, , Mr.,) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 10 Timberlane Drive			07 / D D / Y Y Y Y 2017								
	City	State	Zip Code 14221-1422					PR9950				
	Williamsville	NY	_	Amount	of	Each F	Receipt tl	nis Perioc	1			
	FEC ID number of contributing federal political committee.	С	65.00									
	Name of Employer (for Individual) New York Life Insurance Company	Occupation (for Individual) Agent			Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼	-								
	Other (specify) ▼		455.00	P/R Deduction (\$65.00 Monthly)								
с.	Full Name of Individual (Last, First, Middle Initial Ogden, Daniel, , Mr.,) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 2507 Lander Court				07 ^M	/	31	_ L	2017	Ŷ		
	City Midlothian	State VA	Zip Code 23113-6732	-			-	: PR9950 Receipt th	nis Perioc	1		
	FEC ID number of contributing federal political committee.	С					,	,		.48		
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President		Me	emo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60	F	P/R Dedu	uctio	on (\$19	9.24 Bi-W	eekly)			
s	UBTOTAL of Receipts This Page (optional)								141.	96		
т	OTAL This Period (last page this line number on	ly)	·····				,			-		

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PAGE 335 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)									
11	EWIZED RECEIPTS		for each category of the Detailed Summary Page	X 11: 13	a	11b 14	11c	12	Г	17			
	y information copied from such Reports and S for commercial purposes, other than using the			erson for t		rpose of	soliciting	g contri	ibutio	ons			
\setminus	NAME OF COMMITTEE (In Full)												
	New York Life Insurance Comp	any Politi	cal Action Committee										
Α.	Full Name of Individual (Last, First, Middle In Otto, Jacqueline C., , Ms.,	itial) or Full O	organization Name	Date	of R	eceipt							
	Mailing Address 22613 Judd Drive				M M / D D / Y Y Y Y 07 31 2017								
	City Chugiak	State AK	Zip Code 99567-5371			tion ID : f Each R							
	FEC ID number of contributing federal political committee.	С							41.67				
	Name of Employer (for Individual) New York Life Insurance Company	Occu Age	upation (for Individual) ent		Mem	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 291.69	P/R D	educ	tion (\$41.	67 Mont	hly)					
в.	Full Name of Individual (Last, First, Middle Ini Padmavijayam, Govindhan, , Mr.,	itial) or Full O	organization Name	Date	of R	eceipt							
	Mailing Address 25 Hamilton Drive			М	07 / 10 0 / Y Y Y Y Y 2017								
	City	State	Zip Code	Tra	insac	tion ID :	PR99699	917251		_			
	Princeton Junction	NJ	08550-2931	Amo	unt o	f Each R	eceipt th	nis Peri	iod				
	FEC ID number of contributing federal political committee.	С					1 95	;	38.48	,			
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) porate Vice President		Mem	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.60	P/R D	educt	ion (\$19.	24 Bi-We	∍ekly)					
с.	Full Name of Individual (Last, First, Middle In Palillo, Lynn, , Ms.,	itial) or Full O	organization Name	Date	of R	eceipt							
	Mailing Address 1670 Bell Boulevard Apt. 520			0	7 [™]	31		2017	7]			
	City Bayside	State NY	Zip Code 11360-1661			tion ID : f Each R							
	FEC ID number of contributing federal political committee.	С				, . , .	 	3	38.48				
	Name of Employer (for Individual) New York Life Insurance Company		upation (for Individual) nager		Merr	o Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 288.60)educ	tion (\$19.	.24 Bi-W	eekly)					
s	UBTOTAL of Receipts This Page (optional)					y		11	18.63				
т	OTAL This Period (last page this line number	only)							-				

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)					
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) New York Life Insurance Compar	ny Politic	al Action Committee						
Α.	Full Name of Individual (Last, First, Middle Initia Parker, Silas C., , Mr., Mailing Address 2708 Enfield Road	l) or Full Or	ganization Name	Date of Receipt					
				07 31 2017					
	City	State	Zip Code	Transaction ID : PR9981917251					
	Austin	ТХ	78703-3601	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		41.67					
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item					
	New York Life Insurance Company	Agen	t						
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)					
в.	Full Name of Individual (Last, First, Middle Initia Payne, Kevin L., , Mr.,	l) or Full Or	ganization Name	Date of Receipt					
	Mailing Address PO Box 636			07 / D D / Y Y Y Y 2017					
	City Lyndon	State KS	Zip Code 66451-0636	Transaction ID : PR9997317251					
			00431-0030	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		41.67					
	Name of Employer (for Individual) New York Life Insurance Company	Occu Ager	pation (for Individual) ht	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 291.69	P/R Deduction (\$41.67 Monthly)					
С.	Full Name of Individual (Last, First, Middle Initia Pearce, William, , Mr.,	l) or Full Or	ganization Name	Date of Receipt					
	Mailing Address 5021 Corinthian Bay Drive			07 / D D / Y Y Y Y 07 31 2017					
	City	State TX	Zip Code 75034-2163	Transaction ID : PR9998317251					
	Frisco FEC ID number of contributing federal political committee.	C	75034-2103	Amount of Each Receipt this Period 76.94					
	·			Memo Item					
	Name of Employer (for Individual) New York Life Insurance Company		pation (for Individual) utive Partner						
	Peopint For:		/ear-to-Date ▼						
	Other (specify)	Aggregate	577.05	P/R Deduction (\$38.47 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			160.28					
	OTAL This Period (last page this line number on			90041.93					

SCHEDULE B (FEC Form 3X)							:			PAG	iE 3	337 OF 3	52
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page			only 21b 28a	one) 22 28b	×	23 28c		26 29	\square	27 30b	
Any information copied from such Reports and States or for commercial purposes, other than using the nar													
NAME OF COMMITTEE (In Full) New York Life Insurance Company	/ Politica	I Action Cor	nmit	tee									
Full Name (Last, First, Middle Initial) A. Friends Of Chris Murphy						Date o	_	burse		-	Y	YY	
Mailing Address PO Box 127						07		2	7		20	17	
Cheshire	State CT	Zip Code 06410				FEC lo	lentif	icatio	n Nu	mber		_	
Purpose of Disbursement Check Voided			0	11]	C	1 m	4926 ction		12159	267		
Candidate Name Murphy, Christopher, S., , Office Sought: House Disburse	mont For		Cate Ty	egory /pe	/	Amoun	it of	Each	Disb	oursem	_	this Period 500.00	1
Office Sought:	ment For: 2 Primary Other (spec	General				Me	emo		Cheo	ck Void	-		
Full Name (Last, First, Middle Initial) B. PAC To The Future Mailing Address 700 13th Street, NW, Suite 600						Date o	_	D			ү 20	ү 17	
Washington Purpose of Disbursement	State DC	Zip Code 20005	_	_	_	FEC Id		icatio		mber			
Contribution Candidate Name PAC To The Future Office Sought: House Senate Disburset	ment For: Primary	General	Cate	egory pe	/			Each	Dist	12167 oursem	ent 2	this Period	i
State: District:	Other (spec	sify)				Me	emo	Item					
Full Name (Last, First, Middle Initial) C. Dakota Prairie PAC						Date o	_	burse		-	V	YY	
Mailing Address 918 Pennsylvania Ave. SE						07	/	3			20		
City Washington Purpose of Disbursement Contribution Candidate Name	State DC	Zip Code 20003	<u></u>	11 egory			ansa	iction	ID :	12167		this Period	1
Office Sought: House Disburser Senate President District:	ment For: Primary Other (spec	General cify) ▼		/pe		Me	emo	Item	Con	tributic	-	500.00	
SUBTOTAL of Disbursements This Page (optional)					_			7	-	7	2	2500.00	

S	CHEDULE B (FEC Form 3X)			F	OR L		NUMBER	:			PA	GE	338 O	F 352
IT	EMIZED DISBURSEMENTS	DISBURSEMENTS Use separate schedule(s) for each category of the Detailed Summary Page				only 21b	y one) 22 🗶 23 26 27							
		Dotallou	ourninary r ago			28a	28b		28c		29		30b	
	ny information copied from such Reports and State for commercial purposes, other than using the na													
\square	NAME OF COMMITTEE (In Full)													
	New York Life Insurance Compan	y Politica	al Action Cor	nmit	tee									
Α.	Full Name (Last, First, Middle Initial)						Date o	f Dis	sburse	ment				
	Mailing Address 192 Lexington Avenue, Suite 100	1				_	м м 07	/	3		Y		017	Y
	,													_
	City	State NY	Zip Code				FEC lo	lentif	icatior	n Nur	nber			
	New York Purpose of Disbursement	IN F	10016				\mathbf{C}	000	0 4000					
	Contribution			0	011		С	1 m)3486(1		740		
	Candidate Name			Cate	egory	/			ction Each				s t this P	eriod
	IMPACT				ype						-	-		
		ement For:					L.,		7		-	-	5000.00)
	Senate President	Primary Other (spe	General				- C			Contr	ibutio	on		
	State: District:		ony) v				Me	emo	Item					
_	Full Name (Last, First, Middle Initial)													
Β.	Rock City PAC						Date o	f Dis	sburse	ment				
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	Mailing Address 1015 Stonebridge Park Drive						07		3	1		2	017	
	City	State TN	Zip Code				FEC lo	lentif	icatior	n Nur	nber			
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	Office Sought: House Disburse Senate	ement For:	General						7	O !		1	5000.00	,
	President	Other (spe								Contr	ibuti	on		
	State: District:		27				Me	emo	Item					
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C.	Building America's Republican Re	presenta	ation PAC				Date o	f Dis	sburse	ment				
	Mailing Address 222 W Loo Hun, #202						м м 07	1	D 3		Y		017	Y
	Mailing Address 332 W. Lee Hwy. #303						07					2		
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SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 339 OF 352
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b
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NAME OF COMMITTEE (In Full)				
New York Life Insurance Compar	ny Politica	al Action Con	nmittee	
Full Name (Last, First, Middle Initial) A. Missouri for Accountability and Cl	hange (N	IACPAC)		Date of Disbursement
Mailing Address 611 Pennsylvania Ave, SE Unit 143				07 31 2017
City	State	Zip Code		FEC Identification Number
Washington	DC	20003		
Purpose of Disbursement Contributuion			011	С
Candidate Name			011	Transaction ID : 12167141
			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General cify) ▼		5000.00 Contributuion
State: District:				Memo Item
Full Name (Last, First, Middle Initial) B. In The Arena PAC Mailing Address P.O. Box 7244				Date of Disbursement
City	State	Zip Code		FEC Identification Number
Little Rock Purpose of Disbursement	AR	72217		
Contribution			011	C
Candidate Name			Category/ Type	Transaction ID : 12167142 Amount of Each Disbursement this Period
Office Sought: House Disburs Senate President District:	ement For: Primary Other (spe	General Cify)	1350	5000.00 Contribution Memo Item
Full Name (Last, First, Middle Initial)				
c. Tony Cardenas For Congress				Date of Disbursement
Mailing Address 410 1st Street, SE Suite 310				07 31 2017
City Washington	State DC	Zip Code 20003		FEC Identification Number
Purpose of Disbursement Contribution	·		011	C C00498873 Transaction ID : 12167147
Candidate Name Cardenas, Tony, , ,			Category/ Type	Amount of Each Disbursement this Period
	ement For:	2018	ishe	2000.00
Senate	Primary	General		Contribution
President	Other (spe			Memo Item
State: CA District: 29				
SUBTOTAL of Disbursements This Page (optional))		····· ►	12000.00
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SCHEDULE B (FEC Form 3X)							NUMBER: PAGE 340 OF 352
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)			-			
Ľ	New York Life Insurance Compan	y Politica	al Action Co	mmit	tee		
Α.	Full Name (Last, First, Middle Initial) Moulton For Congress						Date of Disbursement
	Mailing Address P.O. Box 2013						07 / D D / Y Y Y Y 2017
	City Salem	State MA	Zip Code 01970				FEC Identification Number
	Purpose of Disbursement Contribution		01070		4.4		C C00547240
	Candidate Name				11		Transaction ID : 12167148
	Moulton, Seth, , ,				egory ype	//	Amount of Each Disbursement this Period
		ement For:	2018		-		2500.00
	Senate President	Primary Other (spe	General				Contribution
	State: MA District: 06		(Gily)				Memo Item
_	Full Name (Last, First, Middle Initial)						
В.	Pascrell For Congress						Date of Disbursement
	Mailing Address Pob 100						07 31 2017
	City	State NJ	Zip Code				FEC Identification Number
	Teaneck Purpose of Disbursement	INJ	07666	_	_	_	C C00313510
	Contribution			C)11		Transaction ID : 12167149
	Candidate Name Pascrell, William, J., , Jr.				egory	//	Amount of Each Disbursement this Period
		ement For:	2018	- 13	ype		2500.00
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	President	Other (spe	ecify)				Memo Item
_	State: NJ District: 09 Full Name (Last, First, Middle Initial)						
C.	Ryan Costello For Congress						Date of Disbursement
	Mailing Address PO Box 3154						07 31 2017
	City West Chester	State PA	Zip Code 19381				FEC Identification Number
	Purpose of Disbursement Contribution				-		C C00554899
	Candidate Name			0	11	4	Transaction ID : 12167150
	Costello, Ryan, A., ,				egory ype	//	Amount of Each Disbursement this Period
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	w York Life Insurance Compan	y Politica	I Action Col	mmit	tee							
-	Name (Last, First, Middle Initial) m Macarthur For Congress Inc.					Date of Disbursement						
Mail	ing Address P.O. Box 999		1			07 31 2017						
City Edis		State NJ	Zip Code 08818			FEC Identification Number						
Purp	pose of Disbursement ntribution	110	00010	0	11	C C00557520						
	didate Name			Cate	egory/	Transaction ID : 12167151 Amount of Each Disbursement this Period						
	cArthur, Thomas, , ,	. =			ype	2000.00						
	Senate President	ement For: 2 Primary Other (spec	X General			Contribution Memo Item						
Stat												
_	Name (Last, First, Middle Initial) mes For Congress					Date of Disbursement						
Mail	ing Address 857 Post Road, #312					07 31 2017						
	field	State CT	Zip Code 06824			FEC Identification Number						
Co	oose of Disbursement ntribution didate Name			1.00)11	C C00434191 Transaction ID : 12167152						
	mes, Jim, , ,				egory/ ype	Amount of Each Disbursement this Period						
		ment For:	2018			2500.00						
	Senate	Primary	General			Contribution						
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-	Name (Last, First, Middle Initial) aves For Congress					Date of Disbursement						
Mail	ing Address PO Box 335					07 / <u>31</u> / <u>2017</u>						
City Call	ioun	State GA	Zip Code 30703			FEC Identification Number						
	oose of Disbursement ntribution			0	11	C C00462556 Transaction ID : 12167156						
	^{didate Name} aves, John, Thomas, , Jr.				egory/ ype	Amount of Each Disbursement this Period						
		ment For: 2	2018)po	1500.00						
01-1	Senate President	Primary Other (spec	General cify) ▼			Contribution Memo Item						
Stat	e: GA District: 14											
SUBT	OTAL of Disbursements This Page (optional).				····· ►	6000.00						
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IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page			nly one) 22 X 23 26 27
	y information copied from such Reports and State for commercial purposes, other than using the na				any pe	rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) New York Life Insurance Company	y Politica	Il Action Cor	mmitt	ee	
Α.	Full Name (Last, First, Middle Initial) Maloney For Congress Mailing Address 24 E. 93rd Street 4B					Date of Disbursement
	City New York	State NY	Zip Code 10128			FEC Identification Number
	Purpose of Disbursement Contribution Candidate Name				11 gory/	C C00273169 Transaction ID : 12167160 Amount of Each Disbursement this Period
	Maloney, Carolyn, B., , Office Sought: Senate President State: NY District: 12	ment For: 2 Primary Other (spec	General		pe	Contribution Memo Item
В.	Full Name (Last, First, Middle Initial) Maloney For Congress Mailing Address 24 E. 93rd Street 4B					Date of Disbursement
	City New York Purpose of Disbursement Contribution Candidate Name Maloney, Carolyn, B., , Office Sought: Senate President State: NY District: 12	State NY ment For: 2 Primary Other (spec	x General	Cate	11 gory/ pe	FEC Identification Number C C00273169 Transaction ID : 12167161 Amount of Each Disbursement this Period 5000.00 Contribution Memo Item
C.	Full Name (Last, First, Middle Initial) Kuster For Congress Inc. Mailing Address PO Box 1498					Date of Disbursement
	City Concord Purpose of Disbursement Contribution Candidate Name Kuster, Ann, McLane, ,	State NH	Zip Code 03302	Cate	11 gory/ pe	FEC Identification Number C C00462861 Transaction ID : 12167162 Amount of Each Disbursement this Period
	Office Sought: House Disburse Senate President State: NH District: 02	ement For: 2 Primary Other (spec	General			Contribution Memo Item
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			Summary Page			210 28a	22 28b	· ·	23 28c	20	\vdash	30b		
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)	D												
	New York Life Insurance Compan	y Politica	al Action Con	nmit	tee	e								
Α.	Full Name (Last, First, Middle Initial) Bob Corker For Senate 2018 Inc						Date of	Dist		_				
	Mailing Address 1015 Stonebridge Park Dr						07	/	31			017		
	City Franklin	State TN	Zip Code 37069				FEC Ide	entifi	cation	Numb	er			
	Purpose of Disbursement Contribution			C)11		-		43046 ction	2 I D : 12	6716	3		
	Candidate Name Corker, Robert, P., , Jr.			Cate	egor ype	ry/						t this Period		
		ement For: 2 Primary	2018 General				L.			,		5000.00		
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в.	Full Name (Last, First, Middle Initial)						Date of	f Dist	oursei	ment				
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	Mailing Address 1015 Stonebridge Park Dr						07		3′	1	2	2017		
	City Franklin	State TN	Zip Code 37069				FEC Ide	entifi	cation	Numb	er			
	Purpose of Disbursement Contribution			C)11		U		13046	- 1	0740			
	Candidate Name			Cate		ry/				Disburs		4 t this Period		
	Corker, Robert, P., , Jr. Office Sought: House Disburse	ement For:	2018	1	ype							5000.00		
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C.	Full Name (Last, First, Middle Initial) Mccaskill For Missouri						Date of	f Dist	oursei	ment				
	Mailing Address PO Box 300077						07	/	D 31			017		
	City St Louis	State MO	Zip Code 63130				FEC Ide	entifi	cation	Numb	er			
	Purpose of Disbursement Contribution			0)11		U		43130	- 1				
	Candidate Name McCaskill, Claire, , ,			Cate		ry/				ID : 12 Disburs		5 t this Period		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee NAME OF COMMITTEE (in Full) NAME OF COMMITTEE (in Full) New York Life Insurance Company Political Action Committee Full Name (Last, First, Middle Initial) A. Mccaskill For Missouri Maling Address PD Box 300077 City State: Zip Code Contribution 011 Condisting Name Data of Disbursement Contribution 011 Condisting Name Disbursement For: 2018 Contribution 011 State: Mode Initial) Full Name (Last, First, Middle Initial) Disbursement For: 2018 Full Name (Last, First, Middle Initial) Disbursement For: 2018 Full Name (Last, First, Middle Initial) District: Full Name (Last, First, Middle Initial) Contribution B. Ellison For Congress Disbursement For: 2018 Maling Address PO Box 6072 State: Office Sought: Primary Purpose of Disbursement Other (specify) Maling Address PO Box 97386 Dibursement For: 2018 <t< td=""><td>-</td><td>_</td><td></td><td></td><td></td><td>\square</td><td></td><td></td><td></td><td></td><td> </td><td></td><td></td></t<>	-	_				\square							
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New York Life Insurance Company Political Action Committee Automa (Last, First, Middle Initial) A Mccaskill For Missouri Mailing Address PO Box 300077 City State: Office Sought: Propose of Disbursement Contribution Candidate Name Mailing Address PO Box 300077 City State: Mocaskill, Claire, , Office Sought: President State: Mailing Address PO Box 6072 City State: Mailing Address PO Box 9738 City Full Name (Last, First, Middle Initial) Chy State: Mailing Address PO Box 9738 City State: Mailing Address PO Box 97386 City State:													
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A. Mccaskill For Missouri Date of Disbursement Mailing Address PO Box 300077 Off City State Zip Code St.Louis MO 63130 Purpose of Disbursement Off C. C00431304 Candidate Name Office Sought: Y Senate Disbursement For: 2018 Office Sought: Y Senate Disbursement For: 2018 Amount of Each Disbursement State: MO Disbursement For: 2018 Contribution B. Ellison For Congress Date of Disbursement Contribution Minneagolis MN 55406 Purpose of Disbursement Contribution 011 Contribution Candidate Name Other (specify) State Mailing Address PO Box 6072 City City State Disbursement For: 2018 Minneagolis MN State Other (specify) Candidate Name Other (specify) Contribution Contribution Candidate Name Disbursement For: 2018 General Other (specify) State: NN Disbursement For: 2018 General Other (specify) <td></td> <td>· ·</td> <td>y Politica</td> <td>I Action Corr</td> <td>nmit</td> <td>tee</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>		· ·	y Politica	I Action Corr	nmit	tee							
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B. Ellison For Congress Date of Disbursement Mailing Address PO Box 6072 07 City State Zip Code Minneapolis 011 Purpose of Disbursement 011 Candidate Name 011 Ellison, Keith, Maurice, , 011 Office Sought: X House Disbursement For: 2018 1000.00 Office Sought: X House Disbursement For: 2018 0ther (specify) General 0ther (specify) Mailing Address PO Box 97396 Date of Disbursement this Period City State Zip Code Mailing Address PO Box 97396 Date of Disbursement City State Zip Code Raleigh NC 27624 Purpose of Disbursement 011 Candidate Name 011 Candidate Name 011 Candidate Name 011 Candidate Name Disbursement For: 2020 Y Y Primary General Office Sought: House Disbursement For: 2020 Y Primary General <td< td=""><td></td><td>State: MO District:</td><td></td><td></td><td></td><td></td><td></td><td>Me</td><td>mo item</td><td></td><td></td><td></td><td></td></td<>		State: MO District:						Me	mo item				
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	NAME OF COMMITTEE (In Full) New York Life Insurance Compan	y Politica	I Action Cor	nmit	tee								
Α.	Full Name (Last, First, Middle Initial) Steve Chabot For Congress Mailing Address 3030 Harrison Ave.						Date of	Disb /	ursei D 31	D /		y y 2017	Ŷ
	City Cincinnati	State OH	Zip Code 45211				FEC Ide	entific	ation	Num	ber		
	Purpose of Disbursement Contribution			less.	11		Tra		tion	ID : 12	-	-	
	Chabot, Steve, , ,	ement For: 2 Primary Other (spe	General		egory ype	/		mo Ite	(Contrib		nt this P 1000.00	-
В.	Full Name (Last, First, Middle Initial) Terri Sewell For Congress Mailing Address P.O. Box 1964						Date of	Disb	oursei 2 3	D /		y y 2017	Y
	City Birmingham Purpose of Disbursement Contribution Candidate Name Sewell, Terri, A., ,	State AL	Zip Code 35201	Cate)11 egory ype	/	Tra	C004	5897 tion l	6 D : 12	16717	76 nt this P	eriod
		ement For: Primary Other (spec	General				Me	mo Ite		Contrib		2000.00)
c.	Full Name (Last, First, Middle Initial) Friends Of Mia Love						Date of	Disb	D	D /		YYY	Y
	Mailing Address PO Box 255 City Riverton Purpose of Disbursement Contribution	State UT	Zip Code 84065		_	_	FEC Ide	entific C005		Numt	_	2017	
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\mathbb{N}	NAME OF COMMITTEE (In Full)													
	New York Life Insurance Compan	y Politica	al Action Co	mmit	ttee									
Α.	Full Name (Last, First, Middle Initial) Friends Of Dave Reichert						Date of Disbursement							
	Mailing Address PO Box 2032						07 2017 2017							
	City	State	Zip Code				FEC Identification Number							
	Issaquah Purpose of Disbursement	WA	98027				0 000007707							
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	Candidate Name			Cat	egor	v/	Transaction ID : 12167183 Amount of Each Disbursement this Period							
	Reichert, Dave, , ,				ype	<i>.</i> .								
		ement For:					2000.00							
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	Full Name (Last, First, Middle Initial)													
Β.	Strange For Senate						Date of Disbursement							
	Mailing Address P.O. Box 3670						07 31 2017							
	City	State AL	Zip Code 36109				FEC Identification Number							
	Montgomery Purpose of Disbursement		50108				C C00629451							
	Contribution			(011		Transaction ID : 12167184							
	Candidate Name			Cat	egor	y/	Amount of Each Disbursement this Period							
	Strange, Luther, J., , III			Т	ype		1000.00							
		ment For:	2017 General				1000.00							
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-	Full Name (Last, First, Middle Initial)		-	-			Date of Disbursement							
0.	Rooney For Congress													
	Mailing Address 610 S. Boulevard						07 31 2017							
	City	State	Zip Code				FEC Identification Number							
	Tampa Purpose of Disbursement	FL	33606			_	C C00618223							
	Contribution			C	011		Transaction ID : 12167185							
	Candidate Name			Cat	egor	v/	Amount of Each Disbursement this Period							
	Rooney, Francis, , ,				ype	, 								
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\square	NAME OF COMMITTEE (In Full)												
\backslash	New York Life Insurance Company	y Politica	al Action Cor	mmit	tee	•							
A.	Full Name (Last, First, Middle Initial) Drew Ferguson For Congress Inc.						Date of Disbursement						
	Mailing Address PO Box 387						07 31 2017						
	City West Point	State GA	Zip Code 31833				FEC Identification Number						
	Purpose of Disbursement Contribution			0)11		С сооботвав						
	Candidate Name			Cate	eaor	v/	Transaction ID : 12167188 Amount of Each Disbursement this Period						
	Ferguson, Anderson, Drew, , IV				ype	,	(500.00)						
	Senate X President	ment For: 2 Primary Other (spec	General				Contribution Memo Item						
	State: GA District: 03												
B.	Full Name (Last, First, Middle Initial) People For Ben						Date of Disbursement						
	Mailing Address PO Box 31129						07 31 2017						
	City Santa Fe Purpose of Disbursement	State NM	Zip Code 87594				FEC Identification Number						
	Contribution Candidate Name			C)11		C C00443689 Transaction ID : 12167189						
	Lujan, Ben, R., ,			Cate	egor ype	у/	Amount of Each Disbursement this Period						
		ment For:	2018		ypc		2500.00						
	Senate X	1	General				Contribution						
	State: NM District: 03	Other (spec	cify)				Memo Item						
c.	Full Name (Last, First, Middle Initial) Martin Heinrich For Senate						Date of Disbursement						
	Mailing Address P.O. Box 25763						07 / D D / Y Y Y Y 31 2017						
	City Albuquerque	State NM	Zip Code 87125				FEC Identification Number						
	Purpose of Disbursement Contribution			0)11	٦	C C00434563 Transaction ID : 12167190						
	Candidate Name Heinrich, Martin, Trevor, ,				egory ype	y/	Amount of Each Disbursement this Period						
		ment For: 2	2018		-		2500.00						
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NAME OF COMMITTEE (In Full) New York Life Insurance Compan	y Politica	al Action Com	mittee	
Full Name (Last, First, Middle Initial) A. Delbene For Congress Mailing Address PO Box 487				Date of Disbursement
City	State	Zip Code		
Bothell Purpose of Disbursement Contribution	WA	98041	011	FEC Identification Number
Candidate Name DelBene, Suzan, K., , Office Sought: x House Disburse	ement For:	2018	Category/ Type	Transaction ID : 12167194 Amount of Each Disbursement this Period 2500.00
Senate President State: WA District: 01		General		Contribution Memo Item
Full Name (Last, First, Middle Initial) B. Friends For Chris Stewart, Inc. Mailing Address P.O. Box 540370				Date of Disbursement
City North Salt Lake Purpose of Disbursement Contribution	State UT	Zip Code 84054	011	FEC Identification Number C C00506931 Transaction ID : 12167199
Candidate Name Stewart, Chris, , , Office Sought: Senate President	ement For: Primary Other (spe	General	Category/ Type	Amount of Each Disbursement this Period 2500.00 Contribution Memo Item
State: UT District: 02 Full Name (Last, First, Middle Initial) C. Blumenauer For Congress		Convention2018	3	Date of Disbursement
Mailing Address 901 SE Oak Street, Suite 105				M M / D D / Y
City Portland Purpose of Disbursement	State OR	Zip Code 97214		FEC Identification Number
Contribution Candidate Name Blumenauer, Earl, , ,			011 Category/ Type	Transaction ID : 12167200 Amount of Each Disbursement this Period
Office Sought: Senate President State: OR District: 03	ement For: Primary Other (spe	General		Contribution Memo Item
SUBTOTAL of Disbursements This Page (optional)				10000.00
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)	Dulit									
	New York Life Insurance Compan	y Politica	a Action Cor	nmit	tee						
	Full Name (Last, First, Middle Initial)	Date of Disbursement									
А.	Lisa Blunt Rochester For Congres										
	Mailing Address PO Box 9767	07 31 2017									
	City	State	Zip Code 19809				FEC Identification Number				
	Wilmington	DE									
	Purpose of Disbursement Contribution					٦.	С соо590778				
	Candidate Name						Transaction ID : 12167201 Amount of Each Disbursement this Period				
	Rochester, Lisa, Blunt, ,				egory ype	7	Amount of Lach Dispursement this Period				
		ement For: 2	ent For: 2018				2500.00				
	Senate	Primary	General				Contribution				
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	Full Name (Last, First, Middle Initial)										
Β.	Heller For Senate	Date of Disbursement									
		M M / D D / Y Y Y Y									
	Mailing Address P.O. Box 371907	07 31 2017									
	City	State	Zip Code				FEC Identification Number				
	Las Vegas Purpose of Disbursement	NV	89137				C C00410837				
	Contribution			C)11	٦.	•				
	Candidate Name						Transaction ID : 12167203 Amount of Each Disbursement this Period				
	Heller, Dean, , ,				ype						
		X Senate Primary X Gener					1000.00				
	Y Senate President						Contribution				
	State: NV District:	Other (spec	city)				Memo Item				
-	Full Name (Last, First, Middle Initial)										
C.	Strange For Senate						Date of Disbursement				
	Mailing Address P.O. Box 3670										
	Maining Address F.O. Box 5070										
	City	State	Zip Code 36109				FEC Identification Number				
	Montgomery Purpose of Disbursement	AL				0 000620454					
	Contribution						C C00629451				
	Candidate Name	/	Transaction ID : 12167205 Amount of Each Disbursement this Period								
	Strange, Luther, J., , III		1500.00								
	Office Sought: House Disburse										
	X Senate	President X Other (specify) V									
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NAME OF COMMITTEE (In Full) New York Life Insurance Compan	y Politica	al Action Cor	nmitt	ee					
A. Thom Tillis Committee Mailing Address PO Box 97396	Date of Disbursement								
City			FEC Identification Number						
Raleigh Purpose of Disbursement Contribution	NC 27624			11	C C00545772				
Candidate Name Tillis, Thom, R., , Office Sought: House Disburse	ement For:	2020		gory/ pe	Transaction ID : 12167206 Amount of Each Disbursement this Period 3000.00				
State: NC District:					Contribution Memo Item				
Full Name (Last, First, Middle Initial) B. Friends Of Cheri Bustos	Full Name (Last, First, Middle Initial)								
Mailing Address 1050 17th St Nw Ste 590	Mailing Address 1050 17th St Nw Ste 590								
City Washington Purpose of Disbursement Contribution Candidate Name	State DC	Zip Code 20036		11 gory/	FEC Identification Number C C00498568 Transaction ID : 12167208				
Bustos, Cheri, , , Office Sought: x House Disburse	s, Cheri, , , pught: X House Disbursement For: 2018 Senate X Primary General				Amount of Each Disbursement this Period 5000.00 Contribution				
State: IL District: 17		, , , , , , , , , , , , , , , , , , ,			Memo Item				
Full Name (Last, First, Middle Initial) C. Yoder For Congress, Inc	Date of Disbursement								
Mailing Address PO Box 26742	07 31 2017								
CityStateZip CodeOverland ParkKS66225Purpose of Disbursement ContributionFunction				11	FEC Identification Number				
Candidate Name Yoder, Kevin, , ,		gory/ pe	Transaction ID : 12167212 Amount of Each Disbursement this Period						
Office Sought: Senate President State: KS District: 03	ement For: ; Primary Other (spe	General			Contribution Memo Item				
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)											
	New York Life Insurance Compan	y Politica	al Action Co	mmit	tee							
Α.	Full Name (Last, First, Middle Initial) Blaine For Congress		Date of Disbursement									
	Mailing Address PO Box 98											
	City St. Elizabeth	State Zip Code MO 65075					FEC Identification Number C C00458679					
	Purpose of Disbursement Contribution	011										
	Candidate Name		Category/			Transaction ID : 12167213 Amount of Each Disbursement this Period						
	Luetkemeyer, W. Blaine, , ,				ype							
	Office Sought: x House Disburse Senate President x	ement For: 2 Primary Other (spe	General				Contribution Memo Item					
	State: MO District: 03	_										
В.	Full Name (Last, First, Middle Initial) French Hill For Arkansas						Date of Disbursement					
	Mailing Address PO Box 7841		07 31 2017									
	City Little Rock	State AR	Zip Code 72217				FEC Identification Number					
	Purpose of Disbursement Contribution		(011		C C00551275 Transaction ID : 12167214						
	Candidate Name Hill, James, French, ,			Cate		y/	Amount of Each Disbursement this Period					
		ement For:	nent For: 2018 Primary General				2500.00					
	Senate X	1					Contribution					
	State: AR District: 02	Other (spe	cify)				Memo Item					
С.	Full Name (Last, First, Middle Initial) French Hill For Arkansas		Date of Disbursement									
	Mailing Address PO Box 7841		07 / D D / Y Y Y Y 2017									
	City Little Rock	State AR	Zip Code 72217				FEC Identification Number					
	Purpose of Disbursement Contribution		011			C C00551275 Transaction ID : 12167215						
	Candidate Name Hill, James, French, ,						Amount of Each Disbursement this Period					
	Office Sought: X House Disburse				5000.00							
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NAME OF COMMITTE	EE (In Full) Insurance Compan	y Politica	I Action Com	mit	tee				
	Full Name (Last, First, Middle Initial) Securities Industry and Financial Markets Association Political Action Committee						t / Y Y Y Y Y Y		
Mailing Address 1101 8th F	New York Avenue, NW loor	07 27 2017							
	Washington Purpose of Disbursement			_	_	FEC Identification Number			
Candidate Name	Check Voided Candidate Name Securities Industry and Financial Markets Association Politic			011 Category/ Type		Transaction ID : 12177062 Amount of Each Disbursement this Period			
Office Sought:	House Disburse Senate President	ment For: Primary General Other (specify) ▼			<u> </u>	Chec	– 5000.00 k Voided		
Full Name (Last, First B. Friends Of Chr	State: District: Full Name (Last, First, Middle Initial) • Friends Of Chris Murphy Mailing Address PO Box 127						Date of Disbursement		
Contribution As disclo Candidate Name Murphy, Christ Office Sought:	Cheshire CT 06410 Purpose of Disbursement Contribution As disclosed on April 20th 2014 Monthly Report Candidate Name Candidate Name Murphy, Christopher, S., , Disbursement For: 2018 Office Sought: House Disbursement For: 2018 x Senate x					011 Transaction ID : 12256435 Amount of Each Disbursement this Per 1000.00 Contribution As disclos			
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C. Friends Of Chr	Friends Of Chris Murphy Mailing Address PO Box 127						t 2017		
Redesignation of 3/28 Candidate Name Murphy, Christ Office Sought:	Cheshire CT 06410 Purpose of Disbursement Redesignation of 3/28/2014 above contribution Image: Contribution Candidate Name Image: Contribution Murphy, Christopher, S., , Image: Contribution Office Sought: House Y Senate President Image: Contribution					011 C C00492645 Category/ Type Transaction ID : 12256436 Amount of Each Disbursement this Perio 1000.00 Redesignation of 3/28/20 Memo Item			
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