

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
 American Council of Life Insurers PAC

ADDRESS (number and street) 101 Constitution Avenue, NW
 Suite 700 West
 Washington DC 20001 - 2133
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00147066

3. IS THIS REPORT NEW (N) OR X AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
X Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on _____ in the State of _____

(d) 30-Day Post-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on _____ in the State of _____

5. Covering Period 03 01 2003 through 03 31 2003

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Richard I. Klein

Signature of Treasurer Electronically Filed by Richard I. Klein Date 02 06 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Council of Life Insurers PAC

Report Covering the Period: From: ^H03 ^{: :}01 ^{Y (Y)}2003 To: ^H03 ^{: :}31 ^{Y (Y)}2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^{Y (Y)} 2003		61278.63
(b) Cash on Hand at Beginning of Reporting Period	57130.92	
(c) Total Receipts (from Line 19)	7265.63	19467.92
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	64396.55	80746.55
7. Total Disbursements (from Line 31)	38530.00	54880.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	25866.55	25866.55
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. 02/2003)

Page 3

Write or Type Committee Name

American Council of Life Insurers PAC

Report Covering the Period: From: ^M03 ⁻01 ⁻2003^Y To: ^M03 ⁻31 ⁻2003^Y

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1630.78	
(ii) Unitemized	619.13	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	2249.91	6919.15
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5000.00	12500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7249.91	19419.15
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	15.72	48.77
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7265.63	19467.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7265.63	19467.92

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	30.00	30.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	30.00	30.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38500.00	53850.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	1000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	38530.00	54880.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	38530.00	54880.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	7249.91	19419.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7249.91	19419.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30.00	30.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	30.00	30.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 / 21	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Ms. Angela J. Amet		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17444
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 96.62
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 289.86	

Full Name (Last, First, Middle Initial) B. Ms. Linda H. Cunningham		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17442
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 87.54
Name of Employer American Council of Life Insurers	Occupation Director, Conference Development	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 282.63	

Full Name (Last, First, Middle Initial) C. Ms. Joanne S. Day		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17445
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer American Council of Life Insurers	Occupation Asst PAC Treasurer	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	▶	334.16
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 21	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Ms. Kimberly Dorgan		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17447
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 260.42
Name of Employer American Council of Life Insurers	Occupation Senior Vice President, Federal Relatio	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 781.26	

Full Name (Last, First, Middle Initial) B. Mr. J. Bruce Ferguson		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17441
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.20
Name of Employer American Council of Life Insurers	Occupation Senior Vice President, State Relations	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.61	

Full Name (Last, First, Middle Initial) C. Ms. Jeanne E. Hoanlcke		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17446
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 238.34
Name of Employer American Council of Life Insurers	Occupation Senior Vice President & Deputy General	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 715.01	

SUBTOTAL of Receipts This Page (optional)	▶	578.96
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 21	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Mr. Gary E. Hughes		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17448
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.84
Name of Employer American Council of Life Insurers	Occupation Senior Vice President & General Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 797.51	

Full Name (Last, First, Middle Initial) B. Mr. David M. Leifer		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17440
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Mr. Donald G. Preston		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17443
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.58
Name of Employer American Council of Life Insurers	Occupation Managing Director, Reinsurance	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 288.67	

SUBTOTAL of Receipts This Page (optional)	▶	436.40
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 21	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Mr. Robert Schellhas		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R17449
City State Zip Code Washington DC 20001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 281.26
Name of Employer American Council of Life Insurers	Occupation Vice President, Federal Relations	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 562.52	

SUBTOTAL of Receipts This Page (optional)	▶	281.26
TOTAL This Period (last page this line number only)	▶	1630.78

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 10 / 21		
	(check only one)				
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16		

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Mutual of Omaha Companies PAC		Date of Receipt M / D / Y 03 / 11 / 2003
Mailing Address Mutual of Omaha Plaza		Transaction ID: R17370
City Omaha	State NE	Zip Code 68175
FEC ID number of contributing federal political committee. C C00094581		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	5000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 / 21	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Prudential Securities		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 113D Connecticut Avenue, NW 11th Floor		Transaction ID: R17463
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.40
Name of Employer	Occupation	Account Interest
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4.50	

Full Name (Last, First, Middle Initial) B. Sun Trust Bank		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 445 11th Street, NW		Transaction ID: R17462
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4.85
Name of Employer	Occupation	Account Interest
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 15.65	

Full Name (Last, First, Middle Initial) C. SunTrust Bank		Date of Receipt M / D / Y 03 / 31 / 2003
Mailing Address 445 11th Street, NW		Transaction ID: R17460
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.47
Name of Employer	Occupation	Account Interest
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 28.62	

SUBTOTAL of Receipts This Page (optional)	▶	15.72
TOTAL This Period (last page this line number only)	▶	15.72

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. SunTrust Bank		Transaction ID: D935B Date of Disbursement 03 / 31 / 2003
Mailing Address 445 11th Street, NW		Amount of Each Disbursement this Period 30.00
City Washington	State DC	
Zip Code 20004		
Purpose of Disbursement Bank Charges-Stop Payment Fee	Category/ Type	
Candidate Name		
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	30.00
TOTAL This Period (last page this line number only)	▶	30.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 13 / 21			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. A Lot of People Supporting Tom Daschle		Transaction ID: D9028	
Mailing Address P O Box 1656		Date of Disbursement 03 / 25 / 2003	
City Sioux Falls	State SD	Zip Code 57101	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Contr.		Category/ Type	
Candidate Name Tom A. Daschle			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: SD	District		

Full Name (Last, First, Middle Initial) B. Bill Thomas Campaign Committee		Transaction ID: D9037	
Mailing Address PO Box 395		Date of Disbursement 03 / 25 / 2003	
City Bakersfield	State CA	Zip Code 93302	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Contr. William M. Thomas (CA-21-R)		Category/ Type	
Candidate Name Bill M. Thomas			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: CA	District 22		

Full Name (Last, First, Middle Initial) C. Bill Thomas Campaign Committee		Transaction ID: D9065	
Mailing Address PO Box 395		Date of Disbursement 03 / 31 / 2003	
City Bakersfield	State CA	Zip Code 93302	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Contr. William M. Thomas (CA-21-R)		Category/ Type	
Candidate Name Bill M. Thomas			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: CA	District 22		

SUBTOTAL of Disbursements This Page (optional)	▶	7000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 14 / 21	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Brown-Waite for Congress		Transaction ID: D9069 Date of Disbursement 03 / 31 / 2003	
Mailing Address P.O. Box 178		Amount of Each Disbursement this Period 2000.00	
City Brooksville	State FL	Zip Code 34601	Category/ Type
Purpose of Disbursement Contr.		Candidate Name Ginny Brown-Waite	
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: FL	District: D5		

Full Name (Last, First, Middle Initial) B. Crowley for Congress		Transaction ID: D9044 Date of Disbursement 03 / 25 / 2003	
Mailing Address 84-56 Grand Avenue		Amount of Each Disbursement this Period 1000.00	
City Elmhurst	State NY	Zip Code 11873	Category/ Type
Purpose of Disbursement Contr.		Candidate Name Joseph Crowley	
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: NY	District: D7		

Full Name (Last, First, Middle Initial) C. Ellen Tauscher for Congress		Transaction ID: D9041 Date of Disbursement 03 / 25 / 2003	
Mailing Address 503 Capitol Court, NE Suite 101		Amount of Each Disbursement this Period 1000.00	
City Washington	State DC	Zip Code 20002	Category/ Type
Purpose of Disbursement Contr.		Candidate Name Ellen O. Tauscher	
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: CA	District: 10		

SUBTOTAL of Disbursements This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 15 / 21	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. ACLI		Transaction ID: D906D Date of Disbursement 03 / 11 / 2003		
Mailing Address 101 Constitution Ave, NW Suite 700 West		Amount of Each Disbursement this Period 180.97		
City Washington	State DC			Zip Code 20001
Purpose of Disbursement In-Kind				Category/ Type
Candidate Name Evan Bayh				
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼			
State: IN	District			

Full Name (Last, First, Middle Initial) B. Evan Bayh Committee		Transaction ID: D906I Date of Disbursement 03 / 31 / 2003		
Mailing Address P.O. Box 40977		Amount of Each Disbursement this Period 1810.03		
City Indianapolis	State IN			Zip Code 46240
Purpose of Disbursement Contr.				Category/ Type
Candidate Name Evan Bayh				
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼			
State: IN	District			

Full Name (Last, First, Middle Initial) C. The Freedom Project		Transaction ID: D9072 Date of Disbursement 03 / 31 / 2003		
Mailing Address 111 C Street, SE		Amount of Each Disbursement this Period -1000.00		
City Washington	State DC			Zip Code 20003
Purpose of Disbursement				Category/ Type
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2003 Primary General <input checked="" type="checkbox"/> Other (specify) ▼	Returned (Uncashed) Check #5931 dated 1/29/2003		
State:	District	Other		

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 16 / 21			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Friends for Harry Reid		Transaction ID: D9022 Date of Disbursement 03 / 25 / 2003	
Mailing Address PO Box 85223			
City Las Vegas	State NV	Zip Code 89185	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Contr.		Category/ Type	
Candidate Name Harry Reid			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: NV	District		

Full Name (Last, First, Middle Initial) B. Friends of Blanche Lincoln		Transaction ID: D9026 Date of Disbursement 03 / 25 / 2003	
Mailing Address PO Box 3107 PO Box 118			
City Little Rock	State AR	Zip Code 72203	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contr.		Category/ Type	
Candidate Name Blanche Lambert Lincoln			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: AR	District		

Full Name (Last, First, Middle Initial) C. Friends of Chris Dodd 2004		Transaction ID: D9046 Date of Disbursement 03 / 25 / 2003	
Mailing Address PO Box 270701			
City West Hartford	State CT	Zip Code 06127	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Contr.		Category/ Type	
Candidate Name Christopher J. Dodd			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: CT	District		

SUBTOTAL of Disbursements This Page (optional)	▶	5500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 17 / 21			
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Friends of Jeb Hensarling			Transaction ID: D9068 Date of Disbursement 03 / 31 / 2003		
Mailing Address P.O. Box 2776					
City Arlington	State VA	Zip Code 22202	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contr.		Category/ Type			
Candidate Name Jeb Hensarling					
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼				
State: TX District: D5					

Full Name (Last, First, Middle Initial) B. Friends of Mary Landrieu			Transaction ID: D9033 Date of Disbursement 03 / 25 / 2003		
Mailing Address 503 Capitol Court, NE Suite 100					
City Washington	State DC	Zip Code 20002	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contr. Debt Retirement		Category/ Type			
Candidate Name Mary L. Landrieu					
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary General Other (specify) ▼				
State: LA District:					

Full Name (Last, First, Middle Initial) C. Friends of Roy Blunt			Transaction ID: D9021 Date of Disbursement 03 / 25 / 2003		
Mailing Address PO Box 27B					
City Strafford	State MO	Zip Code 65757	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Contr.		Category/ Type			
Candidate Name Roy Blunt					
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼				
State: MO District: D7					

SUBTOTAL of Disbursements This Page (optional)	▶	7000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 18 / 21	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Grassley Committee		Transaction ID: D904D Date of Disbursement 03 / 25 / 2003
Mailing Address 5327 Holmes Run Parkway		Amount of Each Disbursement this Period 2000.00
City Alexandria	State VA Zip Code 22904	
Purpose of Disbursement Contr.		
Candidate Name Chuck E. Grassley		
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Category/ Type
State: IA District		

Full Name (Last, First, Middle Initial) B. Hatch Election Committee		Transaction ID: D9015 Date of Disbursement 03 / 25 / 2003
Mailing Address 257 East 200 South Suite 950		Amount of Each Disbursement this Period 2000.00
City Salt Lake City	State UT Zip Code 84111	
Purpose of Disbursement Contr.		
Candidate Name Orin G. Hatch		
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Category/ Type
State: UT District		

Full Name (Last, First, Middle Initial) C. Judd Gregg Committee		Transaction ID: D9035 Date of Disbursement 03 / 25 / 2003
Mailing Address PO Box 1812		Amount of Each Disbursement this Period 2000.00
City Concord	State NH Zip Code 03302	
Purpose of Disbursement Contr.		
Candidate Name Judd Gregg		
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Category/ Type
State: NH District		

SUBTOTAL of Disbursements This Page (optional)	▶	6000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 19 / 21	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Moore for Congress		Transaction ID: D9042 Date of Disbursement 03 / 25 / 2003		
Mailing Address PO Box 75214		Amount of Each Disbursement this Period 1000.00		
City Washington	State DC			Zip Code 20013-5214
Purpose of Disbursement Contr.				Category/ Type
Candidate Name Dennis Moore				
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		State: KS District: D3	

Full Name (Last, First, Middle Initial) B. Nussle for Congress Committee		Transaction ID: D9049 Date of Disbursement 03 / 25 / 2003		
Mailing Address 223 West Main Street P.O. Box 324		Amount of Each Disbursement this Period 1000.00		
City Manchester	State IA			Zip Code 52057
Purpose of Disbursement Contr. James Allen Nussle (IA-2-R)				Category/ Type
Candidate Name Jim Nussle				
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		State: IA District: D1	

Full Name (Last, First, Middle Initial) C. Renzi for Congress		Transaction ID: D9066 Date of Disbursement 03 / 31 / 2003		
Mailing Address P.O. Box 2778		Amount of Each Disbursement this Period 1000.00		
City Arlington	State VA			Zip Code 22202
Purpose of Disbursement Contr.				Category/ Type
Candidate Name Rick Renzi				
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		State: AZ District: D1	

SUBTOTAL of Disbursements This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 20 / 21	
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Reynolds for Congress		Transaction ID: D9064 Date of Disbursement 03 / 31 / 2003	
Mailing Address 171 Sully's Trail Pittsford		Amount of Each Disbursement this Period 1000.00	
City New York	State NY	Zip Code 14534	Category/ Type
Purpose of Disbursement Contr. Thomas M. Reynolds (NY-27-R)		Candidate Name Thomas M. Reynolds	
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: NY	District: 28		

Full Name (Last, First, Middle Initial) B. Sam Brownback for Senate		Transaction ID: D9063 Date of Disbursement 03 / 31 / 2003	
Mailing Address P.O. Box 2008		Amount of Each Disbursement this Period 1000.00	
City Topeka	State KS	Zip Code 66601	Category/ Type
Purpose of Disbursement Contr.		Candidate Name Sam Brownback	
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: KS	District		

Full Name (Last, First, Middle Initial) C. Value in Electing Women Political Action Committee		Transaction ID: D9062 Date of Disbursement 03 / 31 / 2003	
Mailing Address 1200 Trinity Drive		Amount of Each Disbursement this Period 1000.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement Contr. VIEW PAC		Candidate Name	
Office Sought: <input type="checkbox"/> House Senate President	Disbursement For: 2003 <input checked="" type="checkbox"/> Primary General <input checked="" type="checkbox"/> Other (specify) ▼		
State:	District	Other	

SUBTOTAL of Disbursements This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Voinovich for Senate Committee		Transaction ID: D9019 Date of Disbursement 03 / 25 / 2003	
Mailing Address 865 Macon Alley		Amount of Each Disbursement this Period 1000.00	
City Columbus	State OH		Zip Code 43206
Purpose of Disbursement Contr.			Category/ Type
Candidate Name George V. Voinovich			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: OH District			

Full Name (Last, First, Middle Initial) B. Wally Herger for Congress Committee		Transaction ID: D9047 Date of Disbursement 03 / 25 / 2003	
Mailing Address PO Box 1500		Amount of Each Disbursement this Period 1000.00	
City Chico	State CA		Zip Code 05027
Purpose of Disbursement Contr.			Category/ Type
Candidate Name Wally Herger			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: CA District 02			

SUBTOTAL of Disbursements This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	38500.00