

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 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)  
**RG A Reinsurance Company Federal PAC**

Full Name (Last, First, Middle Initial)  
**A. Brendan J Galligan**

Mailing Address 16600 Swingley Ridge

City Chesterfield State MO Zip Code 63017

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

Name of Employer RGA Reinsurance Company Occupation EVP, Alternative Distribution

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.04**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR117531513676**

Amount of Each Receipt this Period  
**230.76**

P/R Deduction (\$115.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**B. Kathryn S Cox**

Mailing Address 16600 Swingley Ridge

City Chesterfield State MO Zip Code 63017

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

Name of Employer RGA Reinsurance Company Occupation VP, Head of Business Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.52**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR117531913676**

Amount of Each Receipt this Period  
**115.38**

P/R Deduction (\$57.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)  
**C. Wayne D Adams**

Mailing Address 16600 Swingley Ridge

City Chesterfield State MO Zip Code 63017

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

Name of Employer RGA Reinsurance Company Occupation Sr VP, Long Term Care

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.52**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR117533613676**

Amount of Each Receipt this Period  
**115.38**

P/R Deduction (\$57.69 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>461.52</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	