

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

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

FOR LINE NUMBER: PAGE 156 OF 582

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ryan, Thomas B., , Mr.,

Mailing Address 1303 Meadow Lane

City
Berwyn

State
PA

Zip Code
19312-1971

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life Insurance Company

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.37

Date of Receipt

11 / 30 / 2017

Transaction ID : PR2122217874

Amount of Each Receipt this Period

41.67

☐ Memo Item

P/R Deduction (\$41.67 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mathas, Thomas E., , Mr.,

Mailing Address 1336 Cornwall Place

City
Norfolk

State
VA

Zip Code
23508-1108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life Insurance Company

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.50

Date of Receipt

11 / 30 / 2017

Transaction ID : PR2122817874

Amount of Each Receipt this Period

62.50

☐ Memo Item

P/R Deduction (\$62.50 Monthly)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hale, Joseph L., , Mr.,

Mailing Address 233 Crestview Avenue

City
Vinton

State
VA

Zip Code
24179-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life Insurance Company

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

11 / 30 / 2017

Transaction ID : PR2122917874

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Monthly)

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

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

129.17