

U.S. Fed.
FEDERAL ELECTION
COMMISSION MAIL ROOM

ALLMERICA FEDERAL POLITICAL ACTION COMMITTEE
440 Lincoln Street
Worcester, Massachusetts 01653

AUG 2 1 23 PM '99

John F. O'Brien, Chairman
John L. McDonough, Treasurer
John F. Kelly, Assistant Treasurer
Elaine D. Marcoux, Assistant Treasurer
David C. Portney, Assistant Treasurer

J. Barry May, Member of the Finance Committee
Richard M. Reilly, Member of the Finance Committee
Robert P. Restrepo, Jr., Member of the Finance Committee

July 29, 1999

Federal Election Commission
999 E Street, N.W.
Washington DC 20463

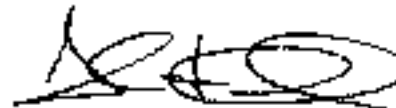
Re: First Allmerica Financial Life Insurance Company
Federal Political Action Committee
FEC #C 001-69516

Gentlemen:

Enclosed please find FEC Form 3X, completed on behalf of the above-captioned PAC, for the period from January 1, 1999 through June 30, 1999.

It would be appreciated if acknowledgment of receipt of this Report is made by signing and returning to us a copy of this letter in the enclosed self-addressed envelope.

Sincerely yours,



John L. McDonough
Treasurer

JLM:edm
Enclosures

Certified Mail
Return Receipt Requested
pac/letters.fec

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 11

For Other Than An Authorized Committee
(Summary Page)

REGISTERED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1. NAME OF COMMITTEE (in full) FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)	2. FEC REGISTRATION NUMBER C00189516
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 440 LINCOLN STREET	3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)
CITY, STATE, and ZIP CODE WORCESTER MA 01653	

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____ (election type) election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01/01/1999</u> through <u>06/30/1999</u>		
6. (a) Cash on Hand, January 1, <u>1999</u>		10029.74
(b) Cash on Hand at Beginning of Reporting Period	10029.74	
(c) Total Receipts (from line 19)	9634.50	9634.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	19664.24	19664.24
7. Total Disbursements (from line 20)	8755.38	8755.38
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10908.86	10908.86
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0.00	
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 <p style="text-align: center;">John McDonough</p>		
Signature of Treasurer 		Date 07/28/1999

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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FEC FORM 3X
(revised 8/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
(PAGE 2, FEC FORM 3X)**

(revised 1/1/91)

NAME OF COMMITTEE FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)		REPORT COVERING PERIOD FROM 01/01/1999 TO: 08/30/1999	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	7805.00	7805.00	11.a.i.
ii. Unitemized	0.00	0.00	11.a.ii.
iii. Total (add i and ii)*	7805.00	7805.00	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions (add a iii, b and c)*	7805.00	7805.00	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	2000.00	2000.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	29.50	29.50	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)*	9834.50	9834.50	19.
20. Total Federal Receipts (subtract line 18 from line 19)*	9834.50	9834.50	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	5.38	5.38	21.b.
c. Total Operating Expenditures (add a i, a ii, and b)*	5.38	5.38	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	8750.00	8750.00	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds (add a, b, and c)*	0.00	0.00	28.d.
29. Other Disbursements	0.00	0.00	29.
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)*	8755.38	8755.38	30.
31. Total Federal Disbursements (subtract line 21 a ii from line 30)*	8755.38	8755.38	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	7805.00	7805.00	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	7805.00	7805.00	34.
35. Total Federal Operating Expenditures (add 21 a i and 21 b)*	5.38	5.38	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures (subtract line 36 from 35)*	5.38	5.38	37.

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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)
FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas J. Liro 183 Lebanon Hill Road Southbridge MA 01550 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Allmerica Financial Life Occupation: Project Manager Aggregate Year-to-Date > \$ 75.00	02/24/1999	75.00
Mark R. Colborn 56 So. Lenox Street Worcester MA 01602 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Allmerica Financial Life Ins. Co Occupation: Vice President Aggregate Year-to-Date > \$ 250.00	03/25/1999	250.00
James Matheson 44 Heather Ct. Jefferson MA 01522 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Allmerica Financial Life Ins. Co Occupation: Asst. Vice President Aggregate Year-to-Date > \$ 150.00	03/25/1999	150.00
Alan S. Perlin 35 Pilgrim Drive Norwood MA 02062 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hanover Insurance Company Occupation: Vice Pres. & Counsel Aggregate Year-to-Date > \$ 100.00	03/25/1999	100.00
Winifred Rice 43 Granite Street Uxbridge MA 01569 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Allmerica Financial Life Ins. Co Occupation: Vice President Aggregate Year-to-Date > \$ 250.00	03/25/1999	250.00
Gall L. Harrison 3801 No. Jefferson Arlington VA 22207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Allmerica Financial Corporation Occupation: Director Aggregate Year-to-Date > \$ 250.00	03/26/1999	250.00
Dennis Landry 75 Twinbrooke Drive Holden MA 01520 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hanover Insurance Company Occupation: Process Owner Aggregate Year-to-Date > \$ 180.00	03/26/1999	180.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)
FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Stepanoff 190 Bristol Road Wellesley MA 02481 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Allmerica Financial Life Ins. Co Occupation: Asst. Vice President Aggregate Year-to-Date > \$ 150.00	03/26/1999	150.00
Linda M. Boltin 19 Sagewood Cir. Holden MA 01520 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Allmerica Financial Life Ins. & Annuil Occupation: Vice President Aggregate Year-to-Date > \$ 100.00	03/27/1999	100.00
Gary S. Bulaucius 203 Heritage Lane Auburn MA 01501 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Hanover Insurance Company Occupation: Asst. Vice President Aggregate Year-to-Date > \$ 300.00	03/27/1999	300.00
Linda Holtin 119 Arrowhead Cir. Ashland MA 01721 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Allmerica Financial Life Ins. Co Occupation: Vice President Aggregate Year-to-Date > \$ 350.00	03/27/1999	350.00
John J. Joyce, Jr. 5 Indian Path No. Grafton MA 01536 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Allmerica Financial Life Ins. Co Occupation: 2nd Vice President Aggregate Year-to-Date > \$ 250.00	03/27/1999	250.00
Jane P. Wotak 33 Blackmer Downs Road N. Grovenordale CT 06255 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Allmerica Financial Life Ins. Co Occupation: Vice President Aggregate Year-to-Date > \$ 150.00	03/27/1999	150.00
Bernard J. Buonanno, Jr. 81 Amsterdam Avenue Warwick RI 02889 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	First Allmerica Financial Life Ins. Co Occupation: Asst. Vice President Aggregate Year-to-Date > \$ 275.00	03/29/1999	275.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
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NAME OF COMMITTEE (In Full)
FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard J. Litchfield 44 Briarwood Cir. Needham MA 02494	First Allmerica Financial Life Ins. Co	03/29/1999	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst. Treasurer	Aggregate Year-to-Date > \$ 100.00	
Mary C. Ritter 239 Newell Road Holden MA 01520	Hanover Insurance Company	03/28/1999	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Depl. Director	Aggregate Year-to-Date > \$ 100.00	
Jerome F. Wells 187 Mandon Road Sutton MA 01590	First Allmerica Financial Life Ins. Co	03/29/1999	225.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 225.00	
George M. Boyd 100 Wesson Terrace Northboro MA 01582	First Allmerica Financial Life Ins. Co	03/30/1999	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Counsel	Aggregate Year-to-Date > \$ 300.00	
M Howard Jacobson 46 Powder Hill Way Westboro MA 01581	Allmerica Financial Corporation	03/30/1999	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date > \$ 250.00	
John A. Bouvier 4 Cahvina Lane Sterling MA 01564	First Allmerica Financial Life Ins. Co	03/31/1999	25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Program Manager	Aggregate Year-to-Date > \$ 25.00	
Margaret L. Norton 37 Cobblestone Lane Worcester MA 01601	First Allmerica Financial Life Ins. Co	03/31/1999	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Process Owner	Aggregate Year-to-Date > \$ 75.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard A. Loff 30 Wiles Farm Road Northboro MA 01532	First Allmerica Financial Life Ins. Co	04/01/1999	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 200.00	
Jay Lussier 43 Loring Street Auburn MA 01501	First Allmerica Financial Life Ins. Co	04/03/1999	130.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 130.00	
Robert J. Murray 81 Atlantic Avenue Cohasset MA 02025	Allmerica Financial Corporation	04/07/1999	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date > \$ 250.00	
Susan H. Watson 7 Old Connecticut Path Westboro MA 01581	Hanover Insurance Company	04/07/1999	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 350.00	
Herbert M. Vamum 223 West Street Paxton MA 01612	Allmerica Financial Corporation	04/08/1999	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date > \$ 250.00	
Richard Rose 1 Beth Lee Drive Grafton MA 01518	First Allmerica Financial Life Ins. Co	04/10/1999	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Process Owner	Aggregate Year-to-Date > \$ 200.00	
Robert E. Bruce 63 Robert Road Stow MA 01775	First Allmerica Financial Life Ins. Co	04/11/1999	400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 400.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	7111
					FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)					
Full Name, Mailing Address, and ZIP Code Glenn E. King 62 Dover Road Whitinsville MA 01588		Name of Employer First Allmerica Financial Life Ins. Co		Date (month, day, year) 04/11/1999	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Asst. Vice President		Aggregate Year-to-Date > \$ 50.00	
Full Name, Mailing Address, and ZIP Code William J. Mangano, Jr. 25 Potter Hill Road Grafton MA 01519		Name of Employer First Allmerica Financial Life Ins. Co		Date (month, day, year) 04/12/1999	Amount of Each Receipt this Period 75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Dept. Director		Aggregate Year-to-Date > \$ 75.00	
Full Name, Mailing Address, and ZIP Code Daniel S. Mastrototaro 435 Shrewsbury Street Holden MA 01520		Name of Employer Allmerica Financial Life Ins. & Annuity		Date (month, day, year) 04/12/1999	Amount of Each Receipt this Period 90.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Asst. Vice President		Aggregate Year-to-Date > \$ 90.00	
Full Name, Mailing Address, and ZIP Code Charles O. Kingsbury, Jr. 7 Jefferson Drive Paxton MA 01812		Name of Employer First Allmerica Financial Life Ins. Co		Date (month, day, year) 04/19/1999	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President		Aggregate Year-to-Date > \$ 150.00	
Full Name, Mailing Address, and ZIP Code Thomas Albert 71 Hickory Drive Princeton MA 01541		Name of Employer First Allmerica Financial Life Ins. Co		Date (month, day, year) 04/22/1999	Amount of Each Receipt this Period 85.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Project Manager		Aggregate Year-to-Date > \$ 85.00	
Full Name, Mailing Address, and ZIP Code Van G. Leichter 8 Pandulum Street Hopkinton MA 01748		Name of Employer First Allmerica Financial Life Ins. Co		Date (month, day, year) 04/24/1999	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Assistant Vice President		Aggregate Year-to-Date > \$ 150.00	
Full Name, Mailing Address, and ZIP Code Timothy W. Still 3 Crane Circle Shrewsbury MA 01545		Name of Employer First Allmerica Financial Life Ins. Co		Date (month, day, year) 04/24/1999	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President		Aggregate Year-to-Date > \$ 150.00	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER
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NAME OF COMMITTEE (In Full)
FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Thigo 24 Danette Drive Grafton MA 01519	First Allmerica Financial Life Ins. Co	05/01/1999	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Systems Architect		
	Aggregate Year-to-Date > \$	75.00	
Stephen P. Rulman 86 Coolidge Circle Northboro MA 01532	First Allmerica Financial Life Ins. Co	05/08/1999	290.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$	290.00	
Judith M. Collins 5 Wheeler Avenue Worcester MA 01609	Allmerica Financial Life Ins. & Annu	05/07/1999	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst. Vice President		
	Aggregate Year-to-Date > \$	75.00	
Todd Bousquet 35 Reservoir Street Holden MA 01520	First Allmerica Financial Life Ins. Co	05/19/1999	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$	75.00	
Christopher Laucks 50 Trowbridge Lane Shrewsbury MA 01545	First Allmerica Financial Life Ins. Co	05/20/1999	80.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst. Vice President		
	Aggregate Year-to-Date > \$	80.00	
Henry P. St. Cyr 138 Justice Hill Road Sterling MA 01564	First Allmerica Financial Life Ins. Co	08/14/1999	375.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President		
	Aggregate Year-to-Date > \$	375.00	
Robert W. Luther 4 Davis Road Auburb MA 01501	First Allmerica Financial Life Ins. Co	08/19/1999	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Process Owner		
	Aggregate Year-to-Date > \$	100.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)

Full Name, Mailing Address, and ZIP Code James F. Ford 338 Goodale Street West Boylston MA 01583	Name of Employer First Allmerica Financial Life Ins. Co.	Date (month, day, year) 08/20/1999	Amount of Each Receipt this Period 100.00
	Occupation Associate Actuary		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 100.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

7605.00

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	10 / 11
			FOR LINE NUMBER 16

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NAME OF COMMITTEE (In Full)
FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)

Full Name, Mailing Address, and ZIP Code ALFONSE M D'AMATO 14 SOUTHARD DRIVE ISLAND PARK NY 11558	Name of Employer 	Date (month, day, year) 08/29/1999 Uncashed check of 3/17/98 added back to bank account	Amount of Each Receipt this Period 1000.00
	Occupation 		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code GRASSLEY COMMITTEE PO BOX 1000 DES MOINES IA 50304	Name of Employer 	Date (month, day, year) 08/29/1999 Uncashed check of 11/30/98 added back to bank account	Amount of Each Receipt this Period 1000.00
	Occupation 		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		

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SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	2000.00

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	11 / 11
					FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY FEDERAL PAC (ALLMERICA FEDERAL PAC)					
Full Name, Mailing Address, and ZIP Code GAYLORD KENT CONRAD PO BOX 812 BISMARCK ND 58501		Purpose of Disbursement (Senate - ND - 00) Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 02/08/1998	Amount of Each Disbursement This Period 2000.00
Full Name, Mailing Address, and ZIP Code SCOTT MCINNIS 3320 CRESTVIEW WAY GRAND JUNCTION CO 81508		Purpose of Disbursement (House - CO - 03) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 02/24/1998	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code RICHARD E NEAL 35 ATWATER TERRACE SPRINGFIELD MA 01103		Purpose of Disbursement (House - MA - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 03/09/1999	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code RANDEL FOR CONGRESS 2000 PO BOX 5577 MANHATTANVILLE STA NEW YORK NY 10027		Purpose of Disbursement (House - NY - 15) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 03/09/1999	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code DREIER FOR CONGRESS COMMITTEE PO BOX 1110 COVINA CA 91722		Purpose of Disbursement (House - CA - 28) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 03/23/1999	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code GERALD C 'JERRY' WELLER 1308 UNION STREET MORRIS IL 60450		Purpose of Disbursement (House - IL - 11) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 04/21/1999	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE 1130 CONNECTICUT AVE NW SUITE 1009 WASHINGTON DC 20038		Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 05/27/1999	Amount of Each Disbursement This Period 2500.00
Full Name, Mailing Address, and ZIP Code WEYGAND COMMITTEE P O BOX 7818 235 PROMENADE STREET WARWICK RI 02887		Purpose of Disbursement (House - RI - 02) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 08/21/1998	Amount of Each Disbursement This Period 250.00
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					8750.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

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and/or Date of Receipt

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8/2/99
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