

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 26
(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)

PROTECTIVE LIFE CORPORATION FEDERAL PAC

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

A. WELLS, PAUL, , ,

Mailing Address 4030 HIGHLAND RIDGE ROAD

City
BIRMINGHAMState
ALZip Code
35242FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PROTECTIVE LIFE INSURANCE COMPANYOccupation (for Individual)
SVP AND CFO LAD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2020

Transaction ID : B003170S000069L11A1

Amount of Each Receipt this Period

64.79

☐ Memo Item
 PAYROLL DEDUCTION

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

B. WELLS, PAUL, , ,

Mailing Address 4030 HIGHLAND RIDGE ROAD

City
BIRMINGHAMState
ALZip Code
35242FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PROTECTIVE LIFE INSURANCE COMPANYOccupation (for Individual)
SVP AND CFO LAD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2020

Transaction ID : B003175S000068L11A1

Amount of Each Receipt this Period

64.79

☐ Memo Item
 PAYROLL DEDUCTION

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

C. WILLIAMS, LUCINDA, , ,

Mailing Address 3309 LANE PARKE CT

City
BIRMINGHAMState
ALZip Code
35223FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PROTECTIVE LIFE INSURANCE COMPANYOccupation (for Individual)
SVP, CUSTOMER EXPERIENCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1249.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2020

Transaction ID : B003170S000070L11A1

Amount of Each Receipt this Period

208.33

☐ Memo Item
 PAYROLL DEDUCTION

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

337.91

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