

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

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

FOR LINE NUMBER: PAGE 362 OF 368

(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. Mersol, Joe M., , Mr.,

Mailing Address 9647 Struthers Road

City

New Middletwn

State

OH

Zip Code

44442-8781

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 ▼

400.00

Date of Receipt

08 / 31 / 2019

Transaction ID : PR9844221985

Amount of Each Receipt this Period

50.00

☐ Memo Item

P/R Deduction (\$50.00 Monthly)

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

B. Michaud, Eric A., , Mr.,

Mailing Address 34 Wilson Terrace

City

Waldwick

State

NJ

Zip Code

07463-1223

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

New York Life Insurance Company

Occupation (for Individual)

Corporate Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.90

Date of Receipt

08 / 31 / 2019

Transaction ID : PR9848621985

Amount of Each Receipt this Period

51.90

☐ Memo Item

P/R Deduction (\$17.30 Bi-Weekly)

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

c. Miller, Gary J., , Mr.,

Mailing Address 1211 E Nicolet Avenue

City

Phoenix

State

AZ

Zip Code

85020-5118

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 ▼

560.00

Date of Receipt

08 / 31 / 2019

Transaction ID : PR9854121985

Amount of Each Receipt this Period

70.00

☐ Memo Item

P/R Deduction (\$70.00 Monthly)

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

171.90

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