

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

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

FOR LINE NUMBER: PAGE 47 OF 461

(check only one)

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

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)

New York Life Insurance Company Political Action Committee

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

A. King, Jeffery D., , Mr.,

Mailing Address 8037 Lea Court

City
Holland

State
OH

Zip Code
43528-8042

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 ▼

522.00

Date of Receipt

09 / 30 / 2019

Transaction ID : PR114322099

Amount of Each Receipt this Period

58.00

☐ Memo Item

P/R Deduction (\$58.00 Monthly)

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

B. Rudolph, Michael A., , Mr.,

Mailing Address 200 Morgan Circle

City
Oxford

State
OH

Zip Code
45056-9403

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 ▼

450.00

Date of Receipt

09 / 30 / 2019

Transaction ID : PR114422099

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

C. Bieber, Roderick J., , Mr.,

Mailing Address 485 Winthrop Lane

City
Saginaw

State
MI

Zip Code
48638-6260

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 ▼

585.00

Date of Receipt

09 / 30 / 2019

Transaction ID : PR114822099

Amount of Each Receipt this Period

65.00

☐ Memo Item

P/R Deduction (\$65.00 Monthly)

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

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

173.00