

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

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

FOR LINE NUMBER: PAGE 18 OF 50

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Council of Life Insurers Political Action Committee

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

A. Kangas, Paul M., , ,

Mailing Address 101 Constitution Ave, NW
Suite 700City
WashingtonState
DCZip Code
20001-2133FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Council of Life InsurersOccupation (for Individual)
VP, Financial Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : PR259332266429

Amount of Each Receipt this Period

125.00

☐ Memo Item

P/R Deduction (\$62.50 Semi-Monthly)

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

B. Dolan, John F., , Mr.,

Mailing Address 101 Constitution Ave, NW
Suite 700 WestCity
WashingtonState
DCZip Code
20001-2133FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Council of Life InsurersOccupation (for Individual)
Vice President, Media Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : PR771365466429

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$20.00 Semi-Monthly)

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

C. Ferguson, J. Bruce, , Mr.,

Mailing Address 101 Constitution Avenue, NW
Suite 700 WestCity
WashingtonState
DCZip Code
20001-2133FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
American Council of Life InsurersOccupation (for Individual)
Senior Vice President, State Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2152.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : PR771373266429

Amount of Each Receipt this Period

358.76

☐ Memo Item

P/R Deduction (\$179.38 Semi-Monthly)

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

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

523.76