

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

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

FOR LINE NUMBER: PAGE 181 OF 184

(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 ▼

300.00

Date of Receipt

04 / 30 / 2020

Transaction ID : PR9844223169

Amount of Each Receipt this Period

100.00

☐ Memo Item

P/R Deduction (\$100.00 Monthly)

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

B. 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 ▼

280.00

Date of Receipt

04 / 30 / 2020

Transaction ID : PR9854123169

Amount of Each Receipt this Period

70.00

☐ Memo Item

P/R Deduction (\$70.00 Monthly)

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

C. Miller, Jay P., , Mr.,

Mailing Address 5407 Landon Circle

City

Boynton Beach

State

FL

Zip Code

33437-1677

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 ▼

333.36

Date of Receipt

04 / 30 / 2020

Transaction ID : PR9855223169

Amount of Each Receipt this Period

83.34

☐ Memo Item

P/R Deduction (\$83.34 Monthly)

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

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

253.34