

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

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

FOR LINE NUMBER: PAGE 40 OF 356

(check only one)

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

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

A. **HERNANDEZ, Carlos, , ,**Mailing Address **8600 SW 84TH AVENUE**

City
MIAMI

State
FL

Zip Code
33143-6912

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

12 / 31 / 2019

Transaction ID : **PR1541766168555**

Amount of Each Receipt this Period

66.57

☐ Memo Item

P/R Deduction (\$33.28 Semi-Monthly)

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

B. **HERNANDEZ, Margee, Dinaris, ,**Mailing Address **1200 ALHAMBRA CIR**

City
CORAL GABLES

State
FL

Zip Code
33134-3532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 31 / 2019

Transaction ID : **PR1541766468555**

Amount of Each Receipt this Period

41.57

☐ Memo Item

P/R Deduction (\$20.78 Semi-Monthly)

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

C. **Sweeney, Brian, S, MR.,**Mailing Address **161 Cornerstone Dr**

City
South Windsor

State
CT

Zip Code
06074-6302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Massachusetts Mutual Life Insurance Co

Occupation (for Individual)
Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

311.58

Date of Receipt

12 / 31 / 2019

Transaction ID : **PR1554644268555**

Amount of Each Receipt this Period

34.62

☐ Memo Item

P/R Deduction (\$11.54 Bi-Weekly)

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

142.76

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