

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

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

FOR LINE NUMBER: PAGE 191 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. HUTCHISON, Andrew, P., ,**

Mailing Address 3422 TAHITIAN CT

City  
GRANBURY

State  
TX

Zip Code  
76048-6120

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : PR2547247568555**

Amount of Each Receipt this Period

143.54

☐ Memo Item

P/R Deduction (\$71.77 Semi-Monthly)

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

**B. ZERBY, Bobbie, Lee, ,**

Mailing Address 3755 NORTHWOOD DR UNIT G

City  
CONCORD

State  
CA

Zip Code  
94520-4578

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : PR2547420468555**

Amount of Each Receipt this Period

300.00

☐ Memo Item

P/R Deduction (\$150.00 Semi-Monthly)

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

**C. SHANNON, Douglas, , ,**

Mailing Address 121 W NORTHGATE RD

City  
PEORIA

State  
IL

Zip Code  
61614-2142

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : PR2547438768555**

Amount of Each Receipt this Period

80.00

☐ Memo Item

P/R Deduction (\$40.00 Semi-Monthly)

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

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

523.54