

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

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

FOR LINE NUMBER: PAGE 274 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. CHAMBERS, Craig, Douglas, ,

Mailing Address 32565 SW JULIETTE DR

City
WILSONVILLE

State
OR

Zip Code
97070-7402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID : PR791183168555

Amount of Each Receipt this Period

79.88

☐ Memo Item

P/R Deduction (\$39.94 Semi-Monthly)

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

B. SHAUGHNESSY, Thomas, E., ,

Mailing Address 4404 S ORANGE AVE # 74011

City
BROKEN ARROW

State
OK

Zip Code
74011-1191

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 ▼

1000.00

Date of Receipt

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

Transaction ID : PR791185168555

Amount of Each Receipt this Period

83.12

☐ Memo Item

P/R Deduction (\$41.56 Semi-Monthly)

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

C. Benson, Matthew, William, ,

Mailing Address 368 LAKEMONT CIR

City
FRANKLIN

State
TN

Zip Code
37067-5839

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 : PR791188568555

Amount of Each Receipt this Period

25.00

☐ Memo Item

P/R Deduction (\$25.00 Monthly)

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

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

188.00