

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Pacific Life Insurance Company Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="95326.53"/>	<input type="text" value="95326.53"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="61540.79"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="19836.47"/>	<input type="text" value="192550.73"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="81377.26"/>	<input type="text" value="287877.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="50500.00"/>	<input type="text" value="257000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="30877.26"/>	<input type="text" value="30877.26"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Pacific Life Insurance Company Political Action Committee

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18130.64	136490.76
(ii) Unitemized	1705.83	50059.97
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19836.47	186550.73
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	19836.47	186550.73
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	6000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	19836.47	192550.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19836.47	192550.73

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50500.00	257000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	50500.00	257000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50500.00	257000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	19836.47	186550.73
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19836.47	186550.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 97
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. David Schaffer		Date of Receipt MM / DD / YYYY 09 / 12 / 2012
Mailing Address 1211 E Cumberland Ave Unite 1102		Transaction ID : 11108909
City Tampa	State FL	Zip Code 33602-4249
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Pacific Life	Occupation Wholesaler	Check
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MS. JUNE G ARCE		Date of Receipt MM / DD / YYYY 09 / 30 / 2012
Mailing Address 20050 EMERALD MEADOW DR		Transaction ID : PR10362106078
City WALNUT	State CA	Zip Code 91789
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Pacific Life	Occupation DIR MKTG COMPL	P/R Deduction (\$60.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) C. MS. JULIE E TRASK		Date of Receipt MM / DD / YYYY 09 / 30 / 2012
Mailing Address 181 S CRAIG DR		Transaction ID : PR10362126078
City ORANGE	State CA	Zip Code 92869
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Pacific Life	Occupation DIR CUSTOMER SERVICE	P/R Deduction (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. DEWEY P BUSHAW		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 Transaction ID : PR10362306078
Mailing Address 29132 ALFIERI ST		Amount of Each Receipt this Period 175.00
City LAGUNA NIGUEL	State CA	Zip Code 92677
FEC ID number of contributing federal political committee.	C	
Name of Employer Pacific Life	Occupation EXEC VP RSD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1551.00	
		P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial) B. MR. EDWARD R BYRD		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 Transaction ID : PR10362326078
Mailing Address 17520 PAGE CT		Amount of Each Receipt this Period 25.00
City YORBA LINDA	State CA	Zip Code 92886
FEC ID number of contributing federal political committee.	C	
Name of Employer Pacific Life	Occupation SR VP & CHF ACTG OFCR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
		P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial) C. MR. JOSEPH E CELENTANO		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 Transaction ID : PR10362386078
Mailing Address 26661 CAMPESINO		Amount of Each Receipt this Period 100.00
City MISSION VIEJO	State CA	Zip Code 92691
FEC ID number of contributing federal political committee.	C	
Name of Employer Pacific Life	Occupation SR VP & CHIEF RISK OFCR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
		P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. LAURIE A CHURCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 21851 NEWLAND ST SPC 246
 City HUNTINGTON BEACH State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation STRCT STTLMNTS CONS (G)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362426078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

B. MS. KATHLEEN A CLUNE
 Full Name (Last, First, Middle Initial)
 Mailing Address 858 S BLUEBIRD CIR
 City ANAHEIM State CA Zip Code 92807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP ASST TREASURER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362466078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MR. DENNIS M CORBETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 15136 TOURAIN WAY
 City IRVINE State CA Zip Code 92604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP TAX COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362516078
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 165.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. PAUL J CROXTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 GRAND MIRAMAR DR
 City HENDERSON State NV Zip Code 89011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP FIELD WHOLESALING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362556078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MS. DEBRA CUNNINGHAM HONERKAMP
 Full Name (Last, First, Middle Initial)
 Mailing Address 2712 LIGHTHOUSE LN
 City CORONA DEL MAR State CA Zip Code 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP RE ASSET MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362566078
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$150.00 Monthly)

C. MR. MICHAEL R CURRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 12162 WICKLOW LN
 City NAPLES State FL Zip Code 34120
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP FIELD WHOLESALING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362576078
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 300.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. STEPHANIE J CURRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 417 GARFIELD PARK AVE
 City SANTA ROSA State CA Zip Code 95409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP RET & RESOURCES GRP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362596078
 Amount of Each Receipt this Period 90.00
 P/R Deduction (\$90.00 Monthly)

B. MS. DIANE W DALES
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 CLERMONT
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP CREDIT ANALYSIS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362606078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

C. MS. LINDA D LARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8315 ROAD R NW
 City QUINCY State WA Zip Code 98848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP LEGAL & REG COMPL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1110.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362626078
 Amount of Each Receipt this Period 125.00
 P/R Deduction (\$125.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	265.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. MARK R FALK
Full Name (Last, First, Middle Initial)

Mailing Address 64 SUMMERSTONE

City	State	Zip Code
IRVINE	CA	92614

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP STRATEGIC PROGRAMS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1125.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10362716078

Amount of Each Receipt this Period

125.00

P/R Deduction (\$125.00 Monthly)

B. MR. PETER S FIEK
Full Name (Last, First, Middle Initial)

Mailing Address 22 ARCADE

City	State	Zip Code
IRVINE	CA	92603

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP PORTFOLIO MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10362776078

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. MR. DAVID R FINEAR
Full Name (Last, First, Middle Initial)

Mailing Address 718 K THANGA DR

City	State	Zip Code
CORONA DEL MAR	CA	92625

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP RE INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10362786078

Amount of Each Receipt this Period

35.00

P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. MARTHA A GATES
Full Name (Last, First, Middle Initial)
Mailing Address 31411 MONTEREY ST
City LAGUNA BEACH State CA Zip Code 92651
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation SR VP OPERATIONS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3749.94

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362866078
Amount of Each Receipt this Period 416.66
P/R Deduction (\$416.66 Monthly)

B. MR. FRANK J GOETZ
Full Name (Last, First, Middle Initial)
Mailing Address 7 SOVENTE
City IRVINE State CA Zip Code 92606
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP RISK SELECTION
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 630.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362906078
Amount of Each Receipt this Period 70.00
P/R Deduction (\$70.00 Monthly)

C. MS. MILDA C GOODMAN
Full Name (Last, First, Middle Initial)
Mailing Address 310 ALISO AVE
City NEWPORT BEACH State CA Zip Code 92663
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP ADV & PUB RLNS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362926078
Amount of Each Receipt this Period 50.00
P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 536.66
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. LORENE C GORDON
Full Name (Last, First, Middle Initial)
Mailing Address 37 LANTANA

City ALISO VIEJO	State CA	Zip Code 92656
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation VP OPERATIONS
----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10362936078

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

B. MS. C MARLA GRAHAM
Full Name (Last, First, Middle Initial)
Mailing Address 23672 BRASILIA ST

City MISSION VIEJO	State CA	Zip Code 92691
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation APPLIC DEV MGR
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10362946078

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

C. MR. ADRIAN S GRIGGS
Full Name (Last, First, Middle Initial)
Mailing Address 8766 CANARY AVE

City FOUNTAIN VALLEY	State CA	Zip Code 92708
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation EVP & CHIEF FIN OFCR
----------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10362966078

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. IRENE L JACOBSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6052 SAN YSIDRO CIR
 City BUENA PARK State CA Zip Code 90620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation ACCOUNT MGMT SPEC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10362996078
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$30.00 Monthly)

B. MS. BRENDA K HARDWIG
 Full Name (Last, First, Middle Initial)
 Mailing Address 13112 EARLHAM ST
 City SANTA ANA State CA Zip Code 92705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation COMMUNITY RELTNS COORD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363036078
 Amount of Each Receipt this Period 0.00
 P/R Deduction (\$0.00 Monthly)

C. MR. ROBERT G HASKELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1880 N EL CAMINO REAL
 City SAN CLEMENTE State CA Zip Code 92672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SVP BRAND MGMT & PA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3749.94

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363066078
 Amount of Each Receipt this Period 416.66
 P/R Deduction (\$416.66 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 446.66
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. DALE E HAWLEY
Full Name (Last, First, Middle Initial)

Mailing Address 2702 SAN JOAQUIN HILLS RD

City	State	Zip Code
CORONA DEL MAR	CA	92625

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **666.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10363076078

Amount of Each Receipt this Period

74.00

P/R Deduction (\$74.00 Monthly)

B. MR. ROBERT J HEMSTEAD
Full Name (Last, First, Middle Initial)

Mailing Address 5613 DAISY ST

City	State	Zip Code
SIMI VALLEY	CA	93063

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP & VALUATION ACTUARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10363106078

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

C. MR. KEVIN A HENDRA
Full Name (Last, First, Middle Initial)

Mailing Address 58 VIAGGIO LN

City	State	Zip Code
FOOTHILL RANCH	CA	92610

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP TAX

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10363116078

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	149.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 16 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. HOWARD T HIRAKAWA
 Full Name (Last, First, Middle Initial)
 Mailing Address 23972 GOLDENEYE DR
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP INV ADVISOR OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363166078
 Amount of Each Receipt this Period 125.00
 P/R Deduction (\$125.00 Monthly)

B. MS. CAROL A JENSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8554 202ND STREET SW
 City EDMONDS State WA Zip Code 98026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation NATL SLS MGR M CHANNEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363246078
 Amount of Each Receipt this Period 250.00
 P/R Deduction (\$250.00 Monthly)

C. MR. JEFF R JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 SAND OAKS RD.
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP CORP FIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363256078
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 435.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. MARK J JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1812 LEADBURN RD
 City TOWSON State MD Zip Code 21204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP FIELD WHOLESALING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363276078
 Amount of Each Receipt this Period 175.00
 P/R Deduction (\$175.00 Monthly)

B. MS. LORI A JOHNSTONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 GRAY STONE WAY
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP SPECIALTY INVESTMENTS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363296078
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$30.00 Monthly)

C. MS. SUZANNE T KAMPA
 Full Name (Last, First, Middle Initial)
 Mailing Address 5531 STANFORD AVE
 City GARDEN GROVE State CA Zip Code 92845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation IT AUDIT CONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363326078
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 265.00
TOTAL This Period (last page this line number only).....▶

**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 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. BRIAN D KLEMENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 24611 BENJAMIN CIR
 City State Zip Code
 DANA POINT CA 92629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life VP & CORPORATE CONTROLLER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 09 / 30 / 2012
Transaction ID : PR10363376078
 Amount of Each Receipt this Period
 40.00
 P/R Deduction (\$40.00 Monthly)

B. MR. JOHN P KONTOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 6307 CAMINO MARINERO
 City State Zip Code
 SAN CLEMENTE CA 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life VP INSTITUTIONAL MARKETS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1350.00

Date of Receipt
 09 / 30 / 2012
Transaction ID : PR10363426078
 Amount of Each Receipt this Period
 150.00
 P/R Deduction (\$150.00 Monthly)

C. MR. FLETCHER C LARSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 709 AVENIDA MIROLA
 City State Zip Code
 PALOS VERDES EST CA 90274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life REGIONAL VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3600.00

Date of Receipt
 09 / 30 / 2012
Transaction ID : PR10363476078
 Amount of Each Receipt this Period
 400.00
 P/R Deduction (\$400.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 590.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. TERESA M LORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 16432 CAMINO CANADA LN
 City HUNTINGTON BEACH State CA Zip Code 92649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR SYSTEMS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363546078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

B. MS. LAURENE E MAC ELWEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1033 SECRETARIAT CIR
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP FUND COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363566078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

C. MS. STEPHANIE J BABKOW
 Full Name (Last, First, Middle Initial)
 Mailing Address 9901 OCEANCREST DR
 City HUNTINGTON BEACH State CA Zip Code 92646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP NB SVCS & FIELD FIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363586078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. DESMOND G MARSH
 Full Name (Last, First, Middle Initial)
 Mailing Address 74 SETON RD
 City IRVINE State CA Zip Code 92612
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP ANNUITY APPS ADMIN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363596078
 Amount of Each Receipt this Period 150.00
 P/R Deduction (\$150.00 Monthly)

B. MR. THOMAS J MAYS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7406 PALOMA DR
 City HUNTINGTON BEACH State CA Zip Code 92648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP GOVT RELNS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363606078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

C. MS. GAIL H MC INTOSH
 Full Name (Last, First, Middle Initial)
 Mailing Address 622 18TH ST
 City HUNTINGTON BEACH State CA Zip Code 92648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363616078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 240.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 21 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. ROBERT B MC KIBBIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 416 W 68TH ST
 City KANSAS CITY State MO Zip Code 64113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP FIELD WHOLESALING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363626078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

B. MS. JULIA C MC KINNEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3615 PASEO DEL CAMPO
 City PALOS VERDES EST State CA Zip Code 90274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363636078
 Amount of Each Receipt this Period 0.00
 P/R Deduction (\$0.00 Monthly)

C. MR. MORGAN C MC KNIGHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1217 HIGHCREST DR
 City BURLESON State TX Zip Code 76028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation APPLIC DEV CONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363646078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 22 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. HENRY M MC MILLAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4006 INLET ISLE DR
 City State Zip Code
 CORONA DEL MAR CA 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life SR VP & CHIEF RISK OFCR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10363666078
 Amount of Each Receipt this Period
 0.00
 P/R Deduction (\$0.00 Monthly)

B. MS. CAROLYN J MIDDLEBROOKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2024 E OCEAN BLVD
 City State Zip Code
 NEWPORT BEACH CA 92661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life VP & CHIEF LIFE UNDERWRITER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10363696078
 Amount of Each Receipt this Period
 40.00
 P/R Deduction (\$40.00 Monthly)

C. MR. JOSE T MISCOLTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 BRYCE CYN
 City State Zip Code
 ALISO VIEJO CA 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP INVESTMENT MKTG
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 585.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10363756078
 Amount of Each Receipt this Period
 65.00
 P/R Deduction (\$65.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. ELIZABETH A MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6412 N 159TH ST
 City OMAHA State NE Zip Code 68116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SYSTEMS ANALYSIS CONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363766078
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$45.00 Monthly)

B. MR. JAMES T MORRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 32141 COOK LN
 City SN JUAN CAPISTRANO State CA Zip Code 92675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3744.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363796078
 Amount of Each Receipt this Period 416.00
 P/R Deduction (\$416.00 Monthly)

C. MR. JOHN C MULVIHILL
 Full Name (Last, First, Middle Initial)
 Mailing Address 27382 VIA PRIORATO
 City SN JUAN CAPISTRANO State CA Zip Code 92675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP RE ASSET MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363806078
 Amount of Each Receipt this Period 0.00
 P/R Deduction (\$0.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 461.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 24 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. RICHARD P OLSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 24902 SUNSET PL E
 City LAGUNA HILLS State CA Zip Code 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DIR SECURITY SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10363936078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MS. JOYCE J PEAD
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 SUNRISE
 City IRVINE State CA Zip Code 92603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP TALENT ACQ & DEV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364006078
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$75.00 Monthly)

C. MS. ALYCE PETERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2908 VIA HIDALGO
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP MARKETING SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364026078
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. YVES F PINKOWITZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 20541 VIA EL TAJO
 City State Zip Code
 YORBA LINDA CA 92887
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life VP CORP FIN & REG RPTG
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 408.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364056078
 Amount of Each Receipt this Period
 46.00
 P/R Deduction (\$46.00 Monthly)

B. MR. THEODORE A PREMIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 MOLINO
 City State Zip Code
 NEWPORT BEACH CA 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life SR VP RE FINANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2175.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364086078
 Amount of Each Receipt this Period
 250.00
 P/R Deduction (\$250.00 Monthly)

C. MR. JOSEPH A PUM
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 BOLERO
 City State Zip Code
 MISSION VIEJO CA 92692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life INTERNAL AUDIT DIR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364096078
 Amount of Each Receipt this Period
 75.00
 P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	371.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. JAMES R RICE
Full Name (Last, First, Middle Initial)
Mailing Address 11 STILLWATER
City IRVINE State CA Zip Code 92603
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation VP M FINANCIAL DISTRIBUTION
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1250.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364146078
Amount of Each Receipt this Period 150.00
P/R Deduction (\$150.00 Monthly)

B. MR. THOMAS M RONCE
Full Name (Last, First, Middle Initial)
Mailing Address 19 GLEN ELLEN
City IRVINE State CA Zip Code 92602
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation VP & TAX COUNSEL
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 270.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364206078
Amount of Each Receipt this Period 30.00
P/R Deduction (\$30.00 Monthly)

C. MR. RICHARD J SCHINDLER
Full Name (Last, First, Middle Initial)
Mailing Address 28472 AVENIDA PLACIDA
City SN JUAN CAPISTRANO State CA Zip Code 92675
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation SR VP LIFE CHF MKTG OFCR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 3375.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364266078
Amount of Each Receipt this Period 400.00
P/R Deduction (\$400.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... 580.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. KIMBERLY K SCHULTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 28392 CALLE PINON
 City State Zip Code
 SN JUAN CAPISTRANO CA 92675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life SR WHOLESALER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364306078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

B. MS. CATHY L SCHWARTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 87 PELICAN CT
 City State Zip Code
 NEWPORT BEACH CA 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP CREDIT ANALYSIS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364316078
 Amount of Each Receipt this Period
 100.00
 P/R Deduction (\$100.00 Monthly)

C. MR. ALAN L SCHWITZGEBEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 18612 MORONGO ST
 City State Zip Code
 FOUNTAIN VALLEY CA 92708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life HR BUS PARTNER CONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364326078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. SONJA V SCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 30 CANYONWOOD

City IRVINE	State CA	Zip Code 92620
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation AVP COMPENSATION
----------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10364336078

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

B. MR. BRADLEY W SHERRELL
Full Name (Last, First, Middle Initial)

Mailing Address 2315 VIA ZAFIRO

City SAN CLEMENTE	State CA	Zip Code 92673
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation AVP TECH OFFICE
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10364356078

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

C. MS. CAROL R SUDBECK
Full Name (Last, First, Middle Initial)

Mailing Address 11 SOMMET

City NEWPORT COAST	State CA	Zip Code 92657
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation SR VP HR & FACILITIES
----------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3744.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10364506078

Amount of Each Receipt this Period

416.00

P/R Deduction (\$416.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	511.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. ALICE P TERLECKY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2130 CAMINO LAUREL
 City SAN CLEMENTE State CA Zip Code 92673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP CLIENT SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364576078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

B. MR. JOHN G TORELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 355 S LORETTA DR
 City ORANGE State CA Zip Code 92869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP ACCTG & RPTG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 810.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364586078
 Amount of Each Receipt this Period 90.00
 P/R Deduction (\$90.00 Monthly)

C. MR. STEPHEN J TORETTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 22862 ORENSE
 City MISSION VIEJO State CA Zip Code 92691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364596078
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 190.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. KHANH T TRAN
Full Name (Last, First, Middle Initial)

Mailing Address 47 VERNAL SPG

City	State	Zip Code
IRVINE	CA	92603

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3749.94

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364606078

Amount of Each Receipt this Period
416.66

P/R Deduction (\$416.66 Monthly)

B. MR. EDDIE D TUNG
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 10386

City	State	Zip Code
NEWPORT BEACH	CA	92658

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP REGULATORY PROD ACCTG

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
705.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364626078

Amount of Each Receipt this Period
80.00

P/R Deduction (\$80.00 Monthly)

C. MS. CATHRYN L VAN WEY
Full Name (Last, First, Middle Initial)

Mailing Address 41974 CARSON CT

City	State	Zip Code
MURRIETA	CA	92562

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP NATL ACCTS & BD SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364636078

Amount of Each Receipt this Period
50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	546.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. MELANIE G WAGNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1842 MOORPARK DR
 City BREA State CA Zip Code 92821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DIR HR & PR SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364646078
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$30.00 Monthly)

B. MR. JOHN M WALDECK
 Full Name (Last, First, Middle Initial)
 Mailing Address 67 LAURELHURST DR
 City LADERA RANCH State CA Zip Code 92694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP RE UWG & CONST SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2025.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364656078
 Amount of Each Receipt this Period 250.00
 P/R Deduction (\$250.00 Monthly)

C. MS. NAOMI D WHEELER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1827 MAIN ST
 City HUNTINGTON BEACH State CA Zip Code 92648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP FINANCIAL ANALYSIS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10364736078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 305.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. JOHN WHITE
Full Name (Last, First, Middle Initial)

Mailing Address 28532 VIA PRIMAVERA

City SN JUAN CAPISTRANO State CA Zip Code 92675

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation VP SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364746078

Amount of Each Receipt this Period
 120.00

P/R Deduction (\$120.00 Monthly)

B. MR. ALAN D WUEST
Full Name (Last, First, Middle Initial)

Mailing Address 4473 AUGUSTA DR

City OCEANSIDE State CA Zip Code 92057

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation AVP OPERATIONS SUPPORT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364806078

Amount of Each Receipt this Period
 40.00

P/R Deduction (\$40.00 Monthly)

C. MS. ROBIN S YONIS
Full Name (Last, First, Middle Initial)

Mailing Address 8 CASTLEBAR

City IRVINE State CA Zip Code 92618

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation VP & FUND ADVISOR COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10364826078

Amount of Each Receipt this Period
 50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. MICHAEL A BELL
Full Name (Last, First, Middle Initial)

Mailing Address 2 PRECIPICE

City LAGUNA NIGUEL State CA Zip Code 92677

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation EVP LIFE INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **3150.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : PR10365146078

Amount of Each Receipt this Period
350.00

P/R Deduction (\$350.00 Monthly)

B. MR. PAUL V LIGEROS
Full Name (Last, First, Middle Initial)

Mailing Address 44 RABANO

City RCHO STA MARGARITA State CA Zip Code 92688

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation PROD & COMPETITION CONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : PR10365206078

Amount of Each Receipt this Period
30.00

P/R Deduction (\$30.00 Monthly)

C. MR. REED J LLOYD
Full Name (Last, First, Middle Initial)

Mailing Address 84 NORTHWOODS RD

City NORTH GRANBY State CT Zip Code 06060

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation FVP RETIREMENT STRATEGIES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : PR10365216078

Amount of Each Receipt this Period
75.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **455.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. REX A OLSON
Full Name (Last, First, Middle Initial)

Mailing Address 1963 PORT LAURENT PL

City NEWPORT BEACH State CA Zip Code 92660

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation VP&SR MANAGING DIR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10365226078

Amount of Each Receipt this Period 50.00

P/R Deduction (\$50.00 Monthly)

B. MR. SAMUEL TANG
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 4586

City MISSION VIEJO State CA Zip Code 92690

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation PRINCIPAL PAC TRIGUARD COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10365236078

Amount of Each Receipt this Period 50.00

P/R Deduction (\$50.00 Monthly)

C. MS. CAROLYN DEAN
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3051

City DANA POINT State CA Zip Code 92629

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation ACCOUNTING DIR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10365346078

Amount of Each Receipt this Period 40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. CAROL E RUMSEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 25221 SPINDLEWOOD
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DIR COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10365456078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

B. MR. PHILIP A TEETER
 Full Name (Last, First, Middle Initial)
 Mailing Address 31422 ALTA LOMA DR
 City LAGUNA BEACH State CA Zip Code 92651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR VP TECH & OPS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1605.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10365476078
 Amount of Each Receipt this Period 180.00
 P/R Deduction (\$180.00 Monthly)

C. MR. LOREN M DOLLET
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 JUPITER HLS
 City NEWPORT BEACH State CA Zip Code 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation EXEC VP GEN COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10365556078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 230.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. TENNYSON S OYLER
Full Name (Last, First, Middle Initial)
Mailing Address 52 PEONY
City IRVINE State CA Zip Code 92618
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation VP BRAND MGMT & PUBLIC AFFAIRS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **675.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : PR10365616078
Amount of Each Receipt this Period **75.00**
P/R Deduction (\$75.00 Monthly)

B. MS. VALERIE MORRIS
Full Name (Last, First, Middle Initial)
Mailing Address 48 W YALE LOOP
City IRVINE State CA Zip Code 92604
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation VP HR PRGMS & SVCS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **900.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : PR10365686078
Amount of Each Receipt this Period **100.00**
P/R Deduction (\$100.00 Monthly)

C. MS. PATRICIA S DOUGLASS
Full Name (Last, First, Middle Initial)
Mailing Address 640 SAINT JAMES RD
City NEWPORT BEACH State CA Zip Code 92663
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation VP GOVT RELNS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **2535.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : PR10365736078
Amount of Each Receipt this Period **285.00**
P/R Deduction (\$285.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **460.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. WILLIAM D BURKE
Full Name (Last, First, Middle Initial)

Mailing Address 2216 NELDA WAY

City	State	Zip Code
ALAMO	CA	94507

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	REGIONAL VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10365786078

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B. MR. SILAS K DUNN
Full Name (Last, First, Middle Initial)

Mailing Address 14 ELDERWOOD

City	State	Zip Code
IRVINE	CA	92614

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP PSD COMPLIANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10365846078

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

C. MS. CHRISTINA Q HE
Full Name (Last, First, Middle Initial)

Mailing Address 16625 SONORA STREET

City	State	Zip Code
TUSTIN	CA	92782

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	VP INVESTMENT MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10365876078

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 38 OF 97
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)
A. MR. ERIC B MILLS

Mailing Address 25202 LA ESTRADA DR

City LAGUNA NIGUEL	State CA	Zip Code 92677
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation VP ADVANCE DESIGN
----------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10365956078

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)
B. MR. JOHN F O'DONNELL

Mailing Address 30 BRIAN RD

City BRIDGEWATER	State MA	Zip Code 02324
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation NATL SLS MGR KEY ACCT MKTG
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10365966078

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)
C. MR. EVAN P OHS

Mailing Address 120 34TH AVE E

City SEATTLE	State WA	Zip Code 98112
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation REGIONAL VP
----------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10365976078

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. JULIET A PINKERTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5874 GARRISON RD
 City FRANKLIN State TN Zip Code 37064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DIVISIONAL VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10365996078
 Amount of Each Receipt this Period 250.00
 P/R Deduction (\$250.00 Monthly)

B. MR. PHILLIP L SALEMNO
 Full Name (Last, First, Middle Initial)
 Mailing Address 47 BETSY LN
 City AMBLER State PA Zip Code 19002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation MARKETING CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366036078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MR. RICHARD A TAUBE
 Full Name (Last, First, Middle Initial)
 Mailing Address 24081 NUTHATCH LN
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP INSTITUTIONAL SALES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 765.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366046078
 Amount of Each Receipt this Period 85.00
 P/R Deduction (\$85.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 360.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. TRAVIS R MC KAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 OXFORD AVE
 City CLARENDON HILLS State IL Zip Code 60514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR WHOLESALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366066078
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$100.00 Monthly)

B. MS. KATHARINE B YOUNG
 Full Name (Last, First, Middle Initial)
 Mailing Address 18647 SANTA ISADORA ST
 City FOUNTAIN VALLEY State CA Zip Code 92708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP VALUATION & RISK MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366106078
 Amount of Each Receipt this Period 110.00
 P/R Deduction (\$110.00 Monthly)

C. MR. DALE W PATRICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 11975 LAMBERT
 City TUSTIN State CA Zip Code 92782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP PORTFOLIO MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366146078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. CHRISTOPHER VAN MIERLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 EL VUELO
 City SAN CLEMENTE State CA Zip Code 92672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SVP RSD SALES CHF MKTG OFCR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4175.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366156078
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$75.00 Monthly)

B. MR. DOUGLAS J URATA
 Full Name (Last, First, Middle Initial)
 Mailing Address 28202 MILLWOOD RD
 City TRABUCO CANYON State CA Zip Code 92679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR MKTG ANA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366166078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MR. MICHAEL S ROBB
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 CLIFFHOUSE BLF
 City NEWPORT COAST State CA Zip Code 92657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation EXEC VP RE INVEST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366196078
 Amount of Each Receipt this Period 0.00
 P/R Deduction (\$0.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MR. WILLIAM B ARMSTRONG		Date of Receipt
Mailing Address 2910 PORTADA AVE		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
HENDERSON	NV	89074
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : PR10366226078
Name of Employer	Occupation	Amount of Each Receipt this Period
Pacific Life	FVP FIELD WHOLESALING	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	P/R Deduction (\$25.00 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR. RICHARD M WILKES		Date of Receipt
Mailing Address 7124 HAWKSBEARD DR		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
WESTERVILLE	OH	43082
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : PR10366276078
Name of Employer	Occupation	Amount of Each Receipt this Period
Pacific Life	SR WHOLESALER	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	P/R Deduction (\$100.00 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="900.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR. RICHARD S BANNO		Date of Receipt
Mailing Address 26666 WHITE OAKS DR		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
LAGUNA HILLS	CA	92653
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : PR10366286078
Name of Employer	Occupation	Amount of Each Receipt this Period
Pacific Life	AVP CAPITAL MKTS	<input type="text" value="75.00"/>
Receipt For:	Aggregate Year-to-Date ▼	P/R Deduction (\$75.00 Monthly)
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="675.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. THOMAS C BILELLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 17812 BIGELOW PARK
 City TUSTIN State CA Zip Code 92780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366296078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

B. MR. STEPHEN M BOLLINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 17345 FLAME TREE CIR
 City FOUNTAIN VALLEY State CA Zip Code 92708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP E-COMMERCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366306078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

C. MS. MARY ANN BROWN
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 WEYMOUTH PL
 City LAGUNA BEACH State CA Zip Code 92651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation EVP CORPORATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3749.94

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366316078
 Amount of Each Receipt this Period 416.66
 P/R Deduction (\$416.66 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 491.66
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. LORI K CARRASCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2742 PORTOLA DR
 City COSTA MESA State CA Zip Code 92626
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation ASST CORP SECRETARY CONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366326078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

B. MR. SIMON S FENG
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 CANDELA
 City IRVINE State CA Zip Code 92620
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP BUS & TECH INTEG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366356078
 Amount of Each Receipt this Period 200.00
 P/R Deduction (\$200.00 Monthly)

C. MR. THOMAS GIBBONS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1970 PARK NEWPORT
 City NEWPORT BEACH State CA Zip Code 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SVP TAX
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2925.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366366078
 Amount of Each Receipt this Period 330.00
 P/R Deduction (\$330.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 570.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. MARY M HAWKINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 6182 S 177TH ST
 City OMAHA State NE Zip Code 68135
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP OPS BUS SOLUTNS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366396078
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$60.00 Monthly)

B. MR. MARK A KARPE
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 AUTUMNLEAF
 City IRVINE State CA Zip Code 92614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DIR COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366416078
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$30.00 Monthly)

C. MR. GREGORY L KEELING
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 1/2 HELIOTROPE AVE
 City CORONA DEL MAR State CA Zip Code 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366426078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 140.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. JOSEPH W KRUM
Full Name (Last, First, Middle Initial)
Mailing Address 43 LEMANS
City NEWPORT COAST State CA Zip Code 92657
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation VP CORPORATE FINANCE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366446078
Amount of Each Receipt this Period 25.00
P/R Deduction (\$25.00 Monthly)

B. MS. DARCY L LEWIS
Full Name (Last, First, Middle Initial)
Mailing Address 2740 DOMINGO RD
City FULLERTON State CA Zip Code 92835
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP CREDIT ANALYSIS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366456078
Amount of Each Receipt this Period 25.00
P/R Deduction (\$25.00 Monthly)

C. MR. STEPHAN P MITCHELL
Full Name (Last, First, Middle Initial)
Mailing Address 18111 THEODORA DR
City TUSTIN State CA Zip Code 92780
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation PRODUCT SPEC DIR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366466078
Amount of Each Receipt this Period 40.00
P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 47 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. CHAD A ROSS
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 TERRACE LN
 City State Zip Code
 SAN MARCOS CA 92069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life DIR BROKER DEALER SVCS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10366496078
 Amount of Each Receipt this Period
 30.00
 P/R Deduction (\$30.00 Monthly)

B. MR. DAVID K ROSUCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 SAINT JOHN DR
 City State Zip Code
 HAWTHORN WOODS IL 60047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life REGIONAL VP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10366506078
 Amount of Each Receipt this Period
 30.00
 P/R Deduction (\$30.00 Monthly)

C. MS. PATRICIA A SANDBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 FLINT AVE
 City State Zip Code
 LONG BEACH CA 90814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP COUNSEL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10366526078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. ELIZABETH H SKINNER
Full Name (Last, First, Middle Initial)

Mailing Address 57 CORAL LK

City IRVINE State CA Zip Code 92614

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation AVP TECHNOLOGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : PR10366556078

Amount of Each Receipt this Period
30.00

P/R Deduction (\$30.00 Monthly)

B. MS. CHERYL L TOBIN
Full Name (Last, First, Middle Initial)

Mailing Address 24426 PEACOCK ST

City LAKE FOREST State CA Zip Code 92630

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation AVP COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : PR10366576078

Amount of Each Receipt this Period
25.00

P/R Deduction (\$25.00 Monthly)

C. MS. CATHLEEN H PULFORD
Full Name (Last, First, Middle Initial)

Mailing Address 33742 PEQUITO DR

City DANA POINT State CA Zip Code 92629

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation REG RPTG & ANA CONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012

Transaction ID : PR10366616078

Amount of Each Receipt this Period
25.00

P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **80.00**

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

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

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

FOR LINE NUMBER: PAGE 49 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. DENNIS L BAHLMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6052 MEADOW VIEW CT
 City JOHNSTON State IA Zip Code 50131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP RISK SELECTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366626078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MR. KEVIN W BERWALD
 Full Name (Last, First, Middle Initial)
 Mailing Address 17601 PARKE LN
 City GROSE ILE State MI Zip Code 48138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP FIELD WHOLESALING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366636078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MR. GEORGE A PAULIK
 Full Name (Last, First, Middle Initial)
 Mailing Address 2990 WINDSTONE CIR
 City MARIETTA State GA Zip Code 30062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR FVP-NCM FI
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366656078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 50 OF 97
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. JEFF J BRADSHAW
Full Name (Last, First, Middle Initial)
Mailing Address 22081 OAK GRV
City MISSION VIEJO State CA Zip Code 92692
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation VP CORP DEV
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366676078
Amount of Each Receipt this Period 50.00
P/R Deduction (\$50.00 Monthly)

B. MS. DEBORAH K JOHNSON
Full Name (Last, First, Middle Initial)
Mailing Address 3019 SAN ANSELIN AVE
City LONG BEACH State CA Zip Code 90808
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation SYSTEMS ANALYSIS SUPR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366686078
Amount of Each Receipt this Period 50.00
P/R Deduction (\$50.00 Monthly)

C. MS. KAREN M BROWN
Full Name (Last, First, Middle Initial)
Mailing Address 1230 FOWLER CREEK RD
City SONOMA State CA Zip Code 95476
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP MODEL OFC ANN TECH
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 420.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366696078
Amount of Each Receipt this Period 50.00
P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... 150.00
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 51 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. KENNETH W COX
 Full Name (Last, First, Middle Initial)
 Mailing Address 12182 DEWAR DR
 City RIVERSIDE State CA Zip Code 92505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation IT DELIVERY MGR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366706078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MR. STEVEN R ELDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 385 25TH AVE
 City MILTON State WA Zip Code 98354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR WHOLESALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366726078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

C. MR. STEPHEN K ENG
 Full Name (Last, First, Middle Initial)
 Mailing Address 324 TURTLE CREST DR
 City IRVINE State CA Zip Code 92603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DIR RISK MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366736078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 52 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. CHARLENE A GRANT
 Full Name (Last, First, Middle Initial)
 Mailing Address 3311 SEAVIEW AVE
 City State Zip Code
 CORONA DEL MAR CA 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP COUNSEL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 315.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10366756078
 Amount of Each Receipt this Period
 35.00
 P/R Deduction (\$35.00 Monthly)

B. MR. DAVID C HONERKAMP
 Full Name (Last, First, Middle Initial)
 Mailing Address 2712 LIGHTHOUSE LN
 City State Zip Code
 CORONA DEL MAR CA 92625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP RE ACQUISITIONS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10366766078
 Amount of Each Receipt this Period
 50.00
 P/R Deduction (\$50.00 Monthly)

C. MS. KRISTINA L KENNEDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 CAMARIN ST
 City State Zip Code
 FOOTHILL RANCH CA 92610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life VP ACTUARIAL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10366786078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 53 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. LINDA L KOTOWICZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 795 TREPANNY LN
 City WAYNE State PA Zip Code 19087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP M MKTG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366796078
 Amount of Each Receipt this Period 60.00
 P/R Deduction (\$60.00 Monthly)

B. MS. SHARON E PACHECO
 Full Name (Last, First, Middle Initial)
 Mailing Address 21611 BLUEJAY ST
 City TRABUCO CANYON State CA Zip Code 92679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP CHIEF COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366826078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

C. MS. DAWN M TRAUTMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 REGATTA WAY
 City SEAL BEACH State CA Zip Code 90740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR VP IT & STRATEGIC PLNG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 945.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366866078
 Amount of Each Receipt this Period 105.00
 P/R Deduction (\$105.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 54 OF 97
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. WILLIAM K VINSON
Full Name (Last, First, Middle Initial)
Mailing Address 2111 OWENS DRIVE
City FULLERTON State CA Zip Code 92833
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation ACTUARIAL CONSULTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366876078
Amount of Each Receipt this Period 24.00
P/R Deduction (\$24.00 Monthly)

B. MR. JEFFREY R WILT
Full Name (Last, First, Middle Initial)
Mailing Address 1 BAILEY DR
City GLENWOOD State NJ Zip Code 07418
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation REGIONAL VP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 495.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366886078
Amount of Each Receipt this Period 55.00
P/R Deduction (\$55.00 Monthly)

C. MR. STUART A HOLLAND
Full Name (Last, First, Middle Initial)
Mailing Address 4931 CAREFREE TRAIL
City PARKER State CO Zip Code 80134
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation SR FVP-NCM IP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10366916078
Amount of Each Receipt this Period 75.00
P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 154.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. BRANDON J CAGE
Full Name (Last, First, Middle Initial)
Mailing Address 27 SKYWOOD ST
City LADERA RANCH State CA Zip Code 92694
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP COUNSEL
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : PR10366956078
Amount of Each Receipt this Period **40.00**
P/R Deduction (\$40.00 Monthly)

B. MR. LARRY D GARDNER
Full Name (Last, First, Middle Initial)
Mailing Address 214 S 202ND ST
City ELKHORN State NE Zip Code 68022
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation COMPLIANCE MANAGER, NE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **225.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : PR10366996078
Amount of Each Receipt this Period **25.00**
P/R Deduction (\$25.00 Monthly)

C. MS. ADRIANNE M GEORGANTAS
Full Name (Last, First, Middle Initial)
Mailing Address 28373 BOULDER DR
City TRABUCO CANYON State CA Zip Code 92679
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation SR FLD SVCS PROJ ANA
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : PR10367006078
Amount of Each Receipt this Period **40.00**
P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **105.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. DAVID L GOLDSTEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 12324 CANTURA ST
 City STUDIO CITY State CA Zip Code 91604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP COLI UNIT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10367016078
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$30.00 Monthly)

B. MR. CHIN H KIM
 Full Name (Last, First, Middle Initial)
 Mailing Address 24 TAOS
 City RCHO STA MARGARITA State CA Zip Code 92688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP ADVANCED MRKTG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10367026078
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$80.00 Monthly)

C. MR. WAYNE K LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10158 NADINE ST
 City TEMPLE CITY State CA Zip Code 91780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DATABASE MGMT CONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10367046078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. RONALD C SEXTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2800 KELLER DR APT 50
 City TUSTIN State CA Zip Code 92782
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR DATABASE ADMINISTR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : PR10367096078
 Amount of Each Receipt this Period **25.00**
 P/R Deduction (\$25.00 Monthly)

B. MR. KEITH C WERSCHKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 25252 NORTHRUP DR
 City LAGUNA HILLS State CA Zip Code 92653
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP AGGREGATE RISK MGMT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **450.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : PR10367126078
 Amount of Each Receipt this Period **50.00**
 P/R Deduction (\$50.00 Monthly)

C. MR. JIM Y CHU
 Full Name (Last, First, Middle Initial)
 Mailing Address 22931 GALAXY LN
 City LAKE FOREST State CA Zip Code 92630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP PRICING & DESIGN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **900.00**

Date of Receipt **09 / 30 / 2012**
Transaction ID : PR10367146078
 Amount of Each Receipt this Period **100.00**
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **175.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. ROBERT J HUNT
Full Name (Last, First, Middle Initial)
Mailing Address 20130 NE 28TH PL

City SAMMAMISH	State WA	Zip Code 98074
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation SR WHOLESALER
----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10367166078

Amount of Each Receipt this Period

40.00

P/R Deduction (\$40.00 Monthly)

B. MR. STEVEN H GOLDBERG
Full Name (Last, First, Middle Initial)
Mailing Address 11 TWIN FLOWER ST

City LADERA RANCH	State CA	Zip Code 92694
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation PRODUCT MGMT DIR
----------------------------------	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10367186078

Amount of Each Receipt this Period

75.00

P/R Deduction (\$75.00 Monthly)

C. MR. JASON T TODD
Full Name (Last, First, Middle Initial)
Mailing Address 59 LAURELHURST DR

City LADERA RANCH	State CA	Zip Code 92694
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation AVP CREDIT ANALYSIS
----------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10371996078

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. ROBERT J AVELLINO
Full Name (Last, First, Middle Initial)
Mailing Address 3 PHEASANT DR.
City MT. LAUREL State NJ Zip Code 08054
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation SR WHOLESALER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10614786078
Amount of Each Receipt this Period 25.00
P/R Deduction (\$25.00 Monthly)

B. MR. CARLETON J MUENCH
Full Name (Last, First, Middle Initial)
Mailing Address 111 NORTHERN PINE LOOP
City ALISO VIEJO State CA Zip Code 92656
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP INVESTMENT OVERSIGHT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 405.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10614836078
Amount of Each Receipt this Period 45.00
P/R Deduction (\$45.00 Monthly)

C. MR. PATRICK J O'BRIEN
Full Name (Last, First, Middle Initial)
Mailing Address 1112 LAS POSAS
City SAN CLEMENTE State CA Zip Code 92673
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP SPECIALIZED MRKTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR10614846078
Amount of Each Receipt this Period 35.00
P/R Deduction (\$35.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 105.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. TIM N SHAHEEN
Full Name (Last, First, Middle Initial)

Mailing Address 27621 HOMESTEAD RD

City	State	Zip Code
LAGUNA NIGUEL	CA	92677

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	AVP BUS INTEL & ILLUS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10614876078

Amount of Each Receipt this Period

2012	09	30	450.00
------	----	----	--------

P/R Deduction (\$50.00 Monthly)

B. MR. MATTHEW WELLS
Full Name (Last, First, Middle Initial)

Mailing Address 120 BONITA DR

City	State	Zip Code
HOMWOOD	AL	35209

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	SR WHOLESALER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10614926078

Amount of Each Receipt this Period

2012	09	30	150.00
------	----	----	--------

P/R Deduction (\$150.00 Monthly)

C. MR. MICHAEL J DONNELLY
Full Name (Last, First, Middle Initial)

Mailing Address 16 GARDEN TER

City	State	Zip Code
WALPOLE	MA	02081

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	SR WHOLESALER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR10667996078

Amount of Each Receipt this Period

2012	09	30	25.00
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P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 61 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. JAMES P LEASURE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2427 PORT WHITBY PL
 City State Zip Code
 NEWPORT BEACH CA 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP&SR MANAGING DIR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR10668016078
 Amount of Each Receipt this Period
 30.00
 P/R Deduction (\$30.00 Monthly)

B. MR. JAMES F SHERIDAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 9584 ROBIN AVE
 City State Zip Code
 FOUNTAIN VALLEY CA 92708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life DIR ACG/AIRCRAFT SVCS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR11084696078
 Amount of Each Receipt this Period
 40.00
 P/R Deduction (\$40.00 Monthly)

C. MR. DAVID J VAN DE WATER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6433 PALOMINO WAY
 City State Zip Code
 WEST LINN OR 97068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life MARKETING CONSULTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR11106896078
 Amount of Each Receipt this Period
 50.00
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 120.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. ANN E FARLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4014 ALADDIN DR
 City HUNTINGTON BEACH State CA Zip Code 92649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP PRODUCT DEV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR11323356078
 Amount of Each Receipt this Period 45.00
 P/R Deduction (\$45.00 Monthly)

B. MS. ANN M DELANEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 GRENADA ST
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation PROJECT MGMT CONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR12361936078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

C. MR. ROGER D BOND
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 SAN TROPEZ CT.
 City LAGUNA BEACH State CA Zip Code 92651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation INTERNAL AUDIT CONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR15598896078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 63 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. ANDREW OLEKSIW
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 SKY RANCH RD
 City LADERA RANCH State CA Zip Code 92694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SVP CORP DEVELPMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR15598906078
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$30.00 Monthly)

B. MS. RAE A MCKEATING
 Full Name (Last, First, Middle Initial)
 Mailing Address 25842 DANA BLF W
 City CAPISTRANO BEACH State CA Zip Code 92624
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR22130716078
 Amount of Each Receipt this Period 70.00
 P/R Deduction (\$70.00 Monthly)

C. MR. CHRISTOPHER S DALLAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 EARLYMORN
 City IRVINE State CA Zip Code 92614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR22130736078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. EDWIN J FERRELL
Full Name (Last, First, Middle Initial)

Mailing Address 34 CASTLEROCK

City	State	Zip Code
IRVINE	CA	92603

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	VP INVSTMT MGMT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR22130756078

Amount of Each Receipt this Period

100.00

P/R Deduction (\$100.00 Monthly)

B. MS. JENELLE J FRANKLIN
Full Name (Last, First, Middle Initial)

Mailing Address 6131 COSTA DEL REY

City	State	Zip Code
LONG BEACH	CA	90803

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	IT AUDIT CONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR22130766078

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. MR. DONAL P HANLEY
Full Name (Last, First, Middle Initial)

Mailing Address 591 S MARENGO AVE UNIT 7

City	State	Zip Code
PASADENA	CA	91106

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Pacific Life	VP LEGAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR22130776078

Amount of Each Receipt this Period

26.00

P/R Deduction (\$26.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	151.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. NANCY A HILL
Full Name (Last, First, Middle Initial)
Mailing Address 9 AMBERWICKE

City DOVE CANYON	State CA	Zip Code 92679
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation AVP COMPLIANCE
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR22130786078

Amount of Each Receipt this Period

45.00

P/R Deduction (\$45.00 Monthly)

B. MS. JENNIFER L KRUMM
Full Name (Last, First, Middle Initial)
Mailing Address 22 AMBROISE

City NEWPORT COAST	State CA	Zip Code 92657
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation AVP FIN & DERIVATIVE RPTG
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **585.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR22130806078

Amount of Each Receipt this Period

65.00

P/R Deduction (\$65.00 Monthly)

C. MS. SUSAN M KEELING
Full Name (Last, First, Middle Initial)
Mailing Address 406 1/2 HELIOTROPE AVE

City CORONA DEL MAR	State CA	Zip Code 92625
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation AVP INV MGT ACCTG & RPTG
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **490.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR22130826078

Amount of Each Receipt this Period

0.00

P/R Deduction (\$0.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	110.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. GUY M MOCKELMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4227 N BRANCH DR
 City OMAHA State NE Zip Code 68116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation CHANNEL SALES TRAINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR22130836078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

B. MR. TIMOTHY C MYERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 23819 CLAYMORE WAY
 City VALENCIA State CA Zip Code 91354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation CORP TAX DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR22130866078
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$100.00 Monthly)

C. MR. SCOTT P ROBINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 LAKE PINES DR
 City BRIGHTON State MI Zip Code 48114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR WHOLESALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR22130886078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. JAY C HAMILTON
Full Name (Last, First, Middle Initial)
Mailing Address 14 ARGOS
City LAGUNA NIGUEL State CA Zip Code 92677
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation VP CONTRACTS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR22336356078
Amount of Each Receipt this Period 60.00
P/R Deduction (\$60.00 Monthly)

B. MR. SHEPHEARD M JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 18030 BROOKHURST ST.
City FOUNTAIN VALLEY State CA Zip Code 92708
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP INTERNAL AUDIT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR22336366078
Amount of Each Receipt this Period 25.00
P/R Deduction (\$25.00 Monthly)

C. MR. MICHAEL L ADAMS
Full Name (Last, First, Middle Initial)
Mailing Address 42 MERIDIAN DR
City ALISO VIEJO State CA Zip Code 92656
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation FVP M MARKETING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR23430886078
Amount of Each Receipt this Period 25.00
P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 110.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. RICHARD J MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2628 RYCROFT CT
 City CHESTERFIELD State MO Zip Code 63017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP IND PROD CHANNEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR31736846078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MR. DOUGLAS P JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 59 AUGUSTA
 City COTO DE CAZA State CA Zip Code 92679
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP PROD MGMT & SALES SPPT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR32777126078
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$100.00 Monthly)

C. MR. PATRICK M ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 RUE DU CHATEAU
 City ALISO VIEJO State CA Zip Code 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation ACCOUNTING DIR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677826078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 200.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. WILLIAM D BELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 12123 COURSER AVE
 City LA MIRADA State CA Zip Code 90638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DIR ADVANCED DESIGNS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677846078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

B. MS. MARIAN C BLACKSHEAR
 Full Name (Last, First, Middle Initial)
 Mailing Address 5528 BELLFLOWER BLVD
 City LAKEWOOD State CA Zip Code 90713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SYSTEMS ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677856078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

C. MS. KATHRYN N HENSLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 24372 ENCORVADO LN
 City MISSION VIEJO State CA Zip Code 92691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR PARALEGAL ANA I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677876078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 70 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. DANIEL E KOMOROSKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 OSPREY AVE
 City ALISO VIEJO State CA Zip Code 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP LIFE REINSURANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677886078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MR. DEAN R LAGERBORG
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 BRISA FRESCA
 City RCHO STA MARGARITA State CA Zip Code 92688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DIR CS ACCESS & SVC MGMT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677896078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MS. ADRIENNE MOUCH
 Full Name (Last, First, Middle Initial)
 Mailing Address 2524 W WATROUS AVE
 City TAMPA State FL Zip Code 33629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation REGIONAL VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677906078
 Amount of Each Receipt this Period 100.00
 P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 71 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial) A. MS. KAREN L MOYER		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 Transaction ID : PR33677916078
Mailing Address 4821 SUNNYBROOK AVE		Amount of Each Receipt this Period 30.00
City BUENA PARK	State CA	Zip Code 90621
FEC ID number of contributing federal political committee. C		P/R Deduction (\$30.00 Monthly)
Name of Employer Pacific Life	Occupation SR SYSTEMS ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. MR. BRIAN D PEAD		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 Transaction ID : PR33677946078
Mailing Address 25 SUNRISE		Amount of Each Receipt this Period 50.00
City IRVINE	State CA	Zip Code 92603
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Monthly)
Name of Employer Pacific Life	Occupation AVP APPL ARCH & INTEG.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) C. MR. JEFFREY S PHILLIPS		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 Transaction ID : PR33677956078
Mailing Address 14932 PENFIELD CIR		Amount of Each Receipt this Period 50.00
City HUNTINGTON BEACH	State CA	Zip Code 92647
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Monthly)
Name of Employer Pacific Life	Occupation PROJECT MGMT CONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 72 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. CHRISTOPHER L RATCHFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2807 FOUNDERS BRIDGE RD
 City MIDLOTHIAN State VA Zip Code 23113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP FIELD WHOLESALING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677966078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MR. JON W RUELLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 FULMAR LN
 City ALISO VIEJO State CA Zip Code 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR BUS ANA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677976078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MR. PARAG S SHAH
 Full Name (Last, First, Middle Initial)
 Mailing Address 24972 FOOTPATH LN
 City LAGUNA NIGUEL State CA Zip Code 92677
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP PRODUCT DESIGN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677986078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. KARI S TURIGLIATTO
 Full Name (Last, First, Middle Initial)
 Mailing Address 253 NIETO AVE
 City LONG BEACH State CA Zip Code 90803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33677996078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

B. MS. MARTHA A WIEDMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 11201 BARDON HILL DRIVE
 City BAKERSFIELD State CA Zip Code 93312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation PSD COMPLIANCE CONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33678006078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MS. DEIDRE B WILSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 24215 SPARKLING SPRING LN
 City LAKE FOREST State CA Zip Code 92630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SUPR LITIGATION & COMPL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33678016078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 90.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 74 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. JAMES P WITKOWSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 5620 FOXTAIL LOOP
 City CARLSBAD State CA Zip Code 92010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation CHANNEL MKTG DIR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR33678026078
 Amount of Each Receipt this Period 70.00
 P/R Deduction (\$70.00 Monthly)

B. MR. MICHAEL F MIRANNE
 Full Name (Last, First, Middle Initial)
 Mailing Address 153 SHUTE CIR
 City OLD HICKORY State TN Zip Code 37138
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP FIELD WHOLESALING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR34419156078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

C. MR. MATTHEW F WILHOIT
 Full Name (Last, First, Middle Initial)
 Mailing Address 31521 AGUACATE RD
 City SN JUAN CAPISTRANO State CA Zip Code 92675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation VP LEGAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR34659106078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 75 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. KEVIN RODDY
Full Name (Last, First, Middle Initial)

Mailing Address 23221 VIA DORADO

City COTO DE CAZA	State CA	Zip Code 92679
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation SR VP FINANCE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR38370896078

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

B. MR. WESLEY G AKINS
Full Name (Last, First, Middle Initial)

Mailing Address 9 BROOKDALE

City IRVINE	State CA	Zip Code 92604
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation SR BUS ANA
----------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR43582196078

Amount of Each Receipt this Period

25.00

P/R Deduction (\$25.00 Monthly)

C. MR. DANIEL J KUBICA
Full Name (Last, First, Middle Initial)

Mailing Address 26362 YOLANDA ST

City LAGUNA HILLS	State CA	Zip Code 92656
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life	Occupation DIR FLD FIN
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : PR43582266078

Amount of Each Receipt this Period

50.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 76 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. CARLA M MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 890 SHORES BLVD
 City State Zip Code
 ROCKWALL TX 75087
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life FIELD VICE PRES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR43582276078
 Amount of Each Receipt this Period
 50.00
 P/R Deduction (\$50.00 Monthly)

B. MR. RANDALL D MOODY
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 E. ELM ST.
 City State Zip Code
 BRECA CA 92821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life CONSTRUCTION SVCS MGR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR43582286078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

C. MR. JOSEPH J NICOLOSI
 Full Name (Last, First, Middle Initial)
 Mailing Address 5865 E ANDOVER DR
 City State Zip Code
 HANOVER PARK IL 60133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life FIELD VICE PRES
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR43582296078
 Amount of Each Receipt this Period
 50.00
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....	125.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 77 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. DEBRA A KRAJICEK
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 ELCANO DR
 City State Zip Code
 HOT SPRINGS VILLGE AR 71909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life SYS ADMIN SR (SR I)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR43582306078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

B. MR. CHRISTIAN J PHANCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 18710 ORIENTE DR
 City State Zip Code
 YORBA LINDA CA 92886
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP COUNSEL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR43582316078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

C. MR. SCOTT D REYNOLDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10140 MORNINGSTAR CIR
 City State Zip Code
 VILLA PARK CA 92861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP INFO SEC & BCP
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR43582326078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 78 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. VINCENT E SAMA
 Full Name (Last, First, Middle Initial)
 Mailing Address 39 SAMMIS ST
 City HUNTINGTON State NY Zip Code 11743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR WHOLESALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR43582336078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MS. LAURYN D SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 17870 NEWHOPE ST
 City FOUNTAIN VALLEY State CA Zip Code 92708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR PAYROLL TAX ANA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR43582346078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MR. VINCENT A SPERA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1616 LOOKOUT CIR
 City WAXHAW State NC Zip Code 28173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation FVP FIELD WHOLESALING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR43582356078
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. JOANNE T GAGNON
 Full Name (Last, First, Middle Initial)
 Mailing Address 359 PEARL ST
 City READING State MA Zip Code 01867
 Name of Employer Pacific Life Occupation FVP M MARKETING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 378.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR4823226078
 Amount of Each Receipt this Period 42.00
 P/R Deduction (\$42.00 Monthly)

B. MS. STACY J MARSH
 Full Name (Last, First, Middle Initial)
 Mailing Address 318 VIA PROMESA
 City SAN CLEMENTE State CA Zip Code 92673
 Name of Employer Pacific Life Occupation AVP COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR48232236078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MS. TERESA A OSBORN
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 ROSEBUD LN
 City COUNCIL BLUFFS State IA Zip Code 51503
 Name of Employer Pacific Life Occupation SUPR INFORCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR48232256078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 92.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. GARY D PENCE
Full Name (Last, First, Middle Initial)
Mailing Address 27691 BLOSSOM HILL RD
City LAGUNA NIGUEL State CA Zip Code 92677
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation ADVD DESIGN CONS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR48232266078
Amount of Each Receipt this Period 50.00
P/R Deduction (\$50.00 Monthly)

B. MR. DAVID T CHANG
Full Name (Last, First, Middle Initial)
Mailing Address 18 IROQUOIS CT
City IRVINE State CA Zip Code 92602
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP VA RISK MGMT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR59529256078
Amount of Each Receipt this Period 25.00
P/R Deduction (\$25.00 Monthly)

C. MR. JOHN F TRUJILLO
Full Name (Last, First, Middle Initial)
Mailing Address 3342 BIG DIPPER DR
City CORONA State CA Zip Code 92882
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP SYSTEMS ADMIN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR59529276078
Amount of Each Receipt this Period 25.00
P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. ROBERT V IPPOLITO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2222 GLEN MARY PL
 City State Zip Code
 DULUTH GA 30097
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life FVP MUTUAL FUNDS - EAST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR60750506078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

B. MR. CADE H CHERRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 ESTERO POINTE
 City State Zip Code
 ALISO VIEJO CA 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP STRATEGIC PLANNING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR61125886078
 Amount of Each Receipt this Period
 75.00
 P/R Deduction (\$75.00 Monthly)

C. MS. JENNIFER B COOK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1965 SHERINGTON PL APT K312
 City State Zip Code
 NEWPORT BEACH CA 92663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life SR. BROKER DEALER COORD
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR61125896078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. GARY L FALDE
Full Name (Last, First, Middle Initial)

Mailing Address 9212 SANTIAGO DR

City HUNTINGTON BEACH State CA Zip Code 92646

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation VP & CHIEF ACTUARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **675.00**

Date of Receipt **09 / 30 / 2012**

Transaction ID : PR61125906078

Amount of Each Receipt this Period **75.00**

P/R Deduction (\$75.00 Monthly)

B. MR. BRIAN W REEVES
Full Name (Last, First, Middle Initial)

Mailing Address 217 AVENUE B

City REDONDO BEACH State CA Zip Code 90277

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation AVP CORPORATE FINANCE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 30 / 2012**

Transaction ID : PR61125956078

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$30.00 Monthly)

C. MR. RALPH D SCHOCH
Full Name (Last, First, Middle Initial)

Mailing Address 3443 CROOKED CREEK DR

City DIAMOND BAR State CA Zip Code 91765

FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Life Occupation SR APPLIC DEVELOPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **09 / 30 / 2012**

Transaction ID : PR61125966078

Amount of Each Receipt this Period **30.00**

P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **135.00**

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

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

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

FOR LINE NUMBER: PAGE 83 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. REBECCA S WARWAR
 Full Name (Last, First, Middle Initial)
 Mailing Address 196 S SAGEWOOD ST
 City ORANGE State CA Zip Code 92869
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation DIR DC & MAINFRAME SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR61125976078
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$40.00 Monthly)

B. MR. WESLEY J FARNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 ELMBROOK
 City ALISO VIEJO State CA Zip Code 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR ACTUARIAL STAFF ANA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR67885046078
 Amount of Each Receipt this Period 30.00
 P/R Deduction (\$30.00 Monthly)

C. MR. TRISTAN L FONTUGNE
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 SCHUBERT CT
 City IRVINE State CA Zip Code 92617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation ACTUARIAL CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR67885056078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 84 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. MATTHEW L HANSBERGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5516 RIVER AVE
 City NEWPORT BEACH State CA Zip Code 92663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP IT OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR67885066078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MR. MATTHEW A LEVENE
 Full Name (Last, First, Middle Initial)
 Mailing Address 22131 CHERRYWOOD
 City MISSION VIEJO State CA Zip Code 92692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP CREDIT ANALYSIS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR67885076078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

C. MS. JILL PECKINGHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 COLONIAL WAY
 City ALISO VIEJO State CA Zip Code 92656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation ANNUITY PROJECT SVCS DIR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR67885096078
 Amount of Each Receipt this Period 75.00
 P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 175.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 97
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MS. JESSICA L RICE
 Full Name (Last, First, Middle Initial)
 Mailing Address 511 S 51ST AVE
 City OMAHA State NE Zip Code 68106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP INTERNAL WHOLESALING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR67885106078
 Amount of Each Receipt this Period 50.00
 P/R Deduction (\$50.00 Monthly)

B. MR. JEREMY M SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 MATHEWS ST APT 206
 City ROCHESTER State NY Zip Code 14607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation SR WHOLESALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR67885116078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

C. MR. KEVIN W STEINER
 Full Name (Last, First, Middle Initial)
 Mailing Address 211 DETROIT AVE
 City HUNTINGTON BEACH State CA Zip Code 92648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pacific Life Occupation AVP FUND COMPLIANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR67885126078
 Amount of Each Receipt this Period 25.00
 P/R Deduction (\$25.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 86 OF 97
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. ALEXANDER F MUNRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 HILLSBOROUGH
 City State Zip Code
 NEWPORT BEACH CA 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP ITS STRATEGIC SVCS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR68001206078
 Amount of Each Receipt this Period
 60.00
 P/R Deduction (\$60.00 Monthly)

B. MS. SARAH A JARVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 523 16TH ST
 City State Zip Code
 HUNTINGTON BEACH CA 92648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life DIR MKT CNDCT COMPLIANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR70145716078
 Amount of Each Receipt this Period
 25.00
 P/R Deduction (\$25.00 Monthly)

C. MS. KIM R CUNNINGHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 24601 OVERLAKE
 City State Zip Code
 LAKE FOREST CA 92630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Pacific Life AVP HR BUS PARTNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2012
Transaction ID : PR71312916078
 Amount of Each Receipt this Period
 50.00
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 135.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 87 OF 97
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Pacific Life Insurance Company Political Action Committee

A. MR. DAVID N FANGER
Full Name (Last, First, Middle Initial)
Mailing Address 166 WHITE CAP LN
City NEWPORT BEACH State CA Zip Code 92657
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP CORP DEV FIN ACTUARY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR71312926078
Amount of Each Receipt this Period 90.00
P/R Deduction (\$90.00 Monthly)

B. MR. JOSEPH KORDOVI
Full Name (Last, First, Middle Initial)
Mailing Address 11 SUNRIVER
City IRVINE State CA Zip Code 92614
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation AVP PRODUCT DESIGN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR71312976078
Amount of Each Receipt this Period 50.00
P/R Deduction (\$50.00 Monthly)

C. MR. RUSSELL S PROCTOR
Full Name (Last, First, Middle Initial)
Mailing Address 1011 E BALBOA BLVD
City NEWPORT BEACH State CA Zip Code 92661
FEC ID number of contributing federal political committee. **C**
Name of Employer Pacific Life Occupation DIR PENSION SALES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2012
Transaction ID : PR71426996078
Amount of Each Receipt this Period 50.00
P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	18130.64

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Diane Black For Congress

Mailing Address PO Box 1437

City Gallatin State TN Zip Code 37066

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Diane Black

Category/
Type

Office Sought: House
 Senate
 President
State: TN District: 06

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133025

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Dave Camp for Congress

Mailing Address 20 F Street, NW, Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement
Contribution

011

Candidate Name

David Camp

Category/
Type

Office Sought: House
 Senate
 President
State: MI District: 04

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133026

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Andre Carson For Congress

Mailing Address 499 S. Capitol Street, NW, Suite 4

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Andre Carson

Category/
Type

Office Sought: House
 Senate
 President
State: IN District: 07

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133027

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gerlach For Congress

Mailing Address 499 South Capitol Street, SW
Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

Rep. James Gerlach

Office Sought: House
 Senate
 President
State: PA District: 06

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 11133028

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Jeb Hensarling

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement
Contribution

Candidate Name

Rep. Jeb Hensarling

Office Sought: House
 Senate
 President
State: TX District: 05

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 11133029

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

C. Georgians For Isakson

Mailing Address 900 19th Street, NW, 8th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement
Contribution

Candidate Name

Sen. Johnny Isakson

Office Sought: House
 Senate
 President
State: GA District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 11133030

Amount of Each Disbursement this Period

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Larson for Congress

Mailing Address 501 3rd Street, NW
Suite 200

City Washington State DC Zip Code 20001

Purpose of Disbursement
Contribution

011

Candidate Name

John Larson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CT District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2012

Transaction ID : 11133032

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Richard E. Neal for Congress

Mailing Address 50 E Street, SE, Ste 1

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Richard Neal

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2012

Transaction ID : 11133033

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Devin Nunes Campaign Committee

Mailing Address PO Box 6545

City Visalia State CA Zip Code 93290

Purpose of Disbursement
Contribution

011

Candidate Name

Devin Nunes

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 22

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 17 / 2012

Transaction ID : 11133034

Amount of Each Disbursement this Period

4000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

11000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Erik Paulsen

Mailing Address P.O. Box 44369

City State Zip Code
Eden Prairie MN 55344

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Erik Paulsen

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MN District: 03

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133035

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. PAC TO THE FUTURE

Mailing Address 430 South Capitol Street, SE, 1st

City State Zip Code
Washington DC 20003

Purpose of Disbursement
Contribution

011

Candidate Name

PAC TO THE FUTURE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133036

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Price For Congress

Mailing Address P.O. Box 425

City State Zip Code
Roswell GA 30077

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Thomas Price M.D.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133037

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

5500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Searchlight Leadership Fund

Mailing Address 426 C Street, NE, Rear Building

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133038

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends of Jay Rockefeller

Mailing Address 110-B East Broad Street

City Falls Church State VA Zip Code 22046

Purpose of Disbursement
Contribution

011

Candidate Name

Jay Rockefeller

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WV District:

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133039

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. People for Enterprise Trade and Economic Growth PAC (PETE PAC)

Mailing Address 7804 Evening Lane

City Alexandria State VA Zip Code 22306

Purpose of Disbursement
Contribution

011

Candidate Name

People for Enterprise Trade and Economic Growth PAC (PETE PAC)

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133040

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

5500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Adrian Smith For Congress

Mailing Address 3321 Avenue I
Suite 6

City State Zip Code
Scottsbluff NE 69361

Purpose of Disbursement
Contribution

Candidate Name

Rep. Adrian Smith

Office Sought: House
 Senate
 President
State: NE District: 03

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133041

Amount of Each Disbursement this Period

3000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Mike Thompson for Congress

Mailing Address 236 Massachusetts Avenue, NE
Suite 603

City State Zip Code
Washington DC 20002

Purpose of Disbursement
Contribution

Candidate Name

Mike Thompson

Office Sought: House
 Senate
 President
State: CA District: 05

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133042

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. New Pioneers PAC

Mailing Address 228 S. Washington Street, Suite 11

City State Zip Code
Washington DC 22314

Purpose of Disbursement
Contribution

Candidate Name

New Pioneers PAC

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : 11133043

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gerlach For Congress

Mailing Address 499 South Capitol Street, SW
Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

Rep. James Gerlach

Office Sought: House
 Senate
 President
State: PA District: 06

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2012

Transaction ID : 11151057

Amount of Each Disbursement this Period

1800.00

Contribution

Full Name (Last, First, Middle Initial)

B. Majority Committee

Mailing Address 213 Ashby Street

City Alexandria State VA Zip Code 22305

Purpose of Disbursement
Contribution

Candidate Name

Majority Committee

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 11154494

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Menendez For Senate

Mailing Address 236 Massachusetts Avenue, NE
Suite 602

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

Sen. Robert Menendez

Office Sought: House
 Senate
 President
State: NJ District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 11154497

Amount of Each Disbursement this Period

2500.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5800.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO RE-ELECT LINDA SANCHEZ

Mailing Address P.O. Box

City Lakewood State CA Zip Code 90714

Purpose of Disbursement Contribution

011

Candidate Name

Linda Sanchez

Category/Type

Office Sought: House Senate President
State: CA District: 38

Disbursement For: 2012
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 11154500

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Stabenow for U.S. Senate

Mailing Address 328 Massachusetts Ave, NE Suite 4

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

011

Candidate Name

Debbie Stabenow

Category/Type

Office Sought: House Senate President
State: MI District:

Disbursement For: 2012
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 11154502

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Strickland For Congress 2012

Mailing Address 515 S. Figueroa Street, 16th Floor

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement Contribution

011

Candidate Name

Mr. Anthony Strickland

Category/Type

Office Sought: House Senate President
State: CA District: 26

Disbursement For: 2012
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2012

Transaction ID : 11154504

Amount of Each Disbursement this Period

2000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Juan Vargas For Congress

Mailing Address P.O. Box 636

City Annandale State VA Zip Code 22003

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Juan Vargas

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 51

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	2

Transaction ID : 11154509

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Contribution

Full Name (Last, First, Middle Initial)

B. Rangel for Congress

Mailing Address PO Box 5577
Manhattanville Station

City New York State NY Zip Code 10027

Purpose of Disbursement
Contribution

011

Candidate Name

Charles Rangel

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	2

Transaction ID : 11154525

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Contribution

Full Name (Last, First, Middle Initial)

C. Brady For Congress

Mailing Address P.O. Box 8277

City The Woodlands State TX Zip Code 77387

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Kevin Brady

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TX District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	2

Transaction ID : 11154526

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gutierrez For Congress

Mailing Address 5310 W. Cullom Ave

City Chicago State IL Zip Code 60641

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Luis Gutierrez

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 04

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 27 / 2012

Transaction ID : 11154527

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

2000.00

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

50500.00