

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

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

FOR LINE NUMBER: PAGE 7 OF 153

(check only one)

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

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NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

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

A. Bass, Steven, Lane, ,

Mailing Address 16519 OBSIDIAN DR

City  
HOUSTON

State  
TX

Zip Code  
77095-4981

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 07 / 2019

Transaction ID : 80261065

Amount of Each Receipt this Period

66.65

☐ Memo Item

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

B. Phan, Jonathan, , ,

Mailing Address 3520 FROSTLEAF COURT

City  
FAIRFAX

State  
VA

Zip Code  
22033-2300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
General Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 07 / 2019

Transaction ID : 80261066

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Warshaw, Scott, , ,

Mailing Address 408 REGATTA DR

City  
PHILADELPHIA

State  
PA

Zip Code  
19146-5247

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

322.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 08 / 2019

Transaction ID : 80261075

Amount of Each Receipt this Period

55.55

☐ Memo Item

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

172.20

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