

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

American Council of Life Insurers PAC

ADDRESS (number and street)

101 Constitution Avenue, NW

Suite 700 West

Check if different than previously reported. (ACC)

Washington

DC

20001

2133

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00147066

3. IS THIS REPORT

NEW (N) OR

X

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

X

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

05

01

2004

through

05

31

2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Richard I. Klein

Signature of Treasurer

Electronically Filed by Richard I. Klein

Date

01

27

2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
 American Council of Life Insurers PAC

Report Covering the Period: From: ^M05 ^D01 ^Y2004 To: ^M05 ^D31 ^Y2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2004 ^Y		30780.03
(b) Cash on Hand at Beginning of Reporting Period	26148.12	
(c) Total Receipts (from Line 19)	47515.65	179843.52
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	75664.77	210623.55
<hr/>		
7. Total Disbursements (from Line 31)	35663.45	170622.23
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40001.32	40001.32
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	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**

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Page 3

Write or Type Committee Name

American Council of Life Insurers PAC

Report Covering the Period: From: ^M05 ⁻01 ⁻2004 To: ^M05 ⁻31 ⁻2004

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)	10498.10	
(ii) Unitemized	1017.55	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	11515.65	43918.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	36000.00	125500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	47515.65	169418.75
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	10424.77
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 Transfer (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))	47515.65	179843.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	47515.65	179843.52

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	15.50	36.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	15.50	36.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33582.95	164525.73
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	1065.00	1065.00
(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))..... ▶	1065.00	1065.00
29. Other Disbursements.....	1000.00	4995.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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 ActMty (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))..	35663.45	170622.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	35663.45	170622.23

DETAILED SUMMARY PAGE
of Disbursements

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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)	47515.65	169418.75
34. Total Contribution Refunds (from Line 28(d))	1065.00	1065.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46450.65	168353.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15.50	36.50
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15.50	36.50

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

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

FOR LINE NUMBER: PAGE 6 / 28

(check only one)

11a 11b 11c 12
13 14 15 16 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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Ms. Angela J. Amet		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19080
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.08
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.40	

Full Name (Last, First, Middle Initial) B. Mr. Michael J. Bartholomew		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19082
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Allen R. Castka		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 1001 Pennsylvania Avenue, NW		Transaction ID: R19085
City Washington	State DC	Zip Code 20004-2599
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	150.08
TOTAL This Period (last page this line number only)	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Mr. Eugene Choate		Date of Receipt M / D / Y 05 / 14 / 2004
Mailing Address 821 Stone Edge Court		Transaction ID: R19063
City Marietta	State GA	Zip Code 30068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Bankers Fidelity Life Insurance Company	Occupation President	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Mr. C. Bryan Cox		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19069
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.96
Name of Employer American Council of Life Insurers	Occupation Senior Legislative Director	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 234.80	

Full Name (Last, First, Middle Initial) C. Ms. Linda H. Cunningham		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19080
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 90.30
Name of Employer American Council of Life Insurers	Occupation Director, Conference Development	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 451.50	

SUBTOTAL of Receipts This Page (optional)	1637.26
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 / 28

(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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Ms. Joanne S. Daly		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19091
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer American Council of Life Insurers	Occupation Asst PAC Treasurer	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. Nancy S. Davenport		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Ave, NW Suite 700		Transaction ID: R19092
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer American Council of Life Insurers	Occupation Sr. Counsel & Director, NE Region	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Kimberly Dorgan		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19094
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 285.62
Name of Employer American Council of Life Insurers	Occupation Senior Vice President, Federal Relatio	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1328.10	

SUBTOTAL of Receipts This Page (optional)	▶	465.62
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 28

(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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Mr. J. Bruce Ferguson		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19096
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 87.08
Name of Employer American Council of Life Insurers	Occupation Senior Vice President, State Relations	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 435.40	

Full Name (Last, First, Middle Initial) B. Mr. John P. Gemi		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Ave, NW Suite 700		Transaction ID: R19097
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 91.66
Name of Employer American Council of Life Insurers	Occupation Senior Legislative Director	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 458.30	

Full Name (Last, First, Middle Initial) C. Mr. Morris Goff		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19089
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.08
Name of Employer American Council of Life Insurers	Occupation Assistant Vice President, Tax	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.40	

SUBTOTAL of Receipts This Page (optional)	▶	243.82
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 10 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Mr. Gary E. Hughes		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19103
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 265.84
Name of Employer American Council of Life Insurers	Occupation Senior Vice President & General Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1329.20	

Full Name (Last, First, Middle Initial) B. Michael J. Hunter		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19104
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer American Council of Life Insurers	Occupation Executive Vice President & COO	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. Frank Keating		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19107
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer American Council of Life Insurers	Occupation President & CEO	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	765.84
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 28

(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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Mr. Richard I. Klein		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700		Transaction ID: R19108
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer American Council of Life Insurers	Occupation Treasurer	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Ms. Linda L. Larsen		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19110
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer American Council of Life Insurers	Occupation Vice President, Annuities	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. David M. Laffer		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19111
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.18
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.80	

SUBTOTAL of Receipts This Page (optional)	▶	224.18
TOTAL This Period (last page this line number only)	▶	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 28

(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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Daniel J. Mahoney		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19113
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 179.16
Name of Employer American Council of Life Insurers	Occupation Sr. Vice President, Public Affairs and	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 895.80	

Full Name (Last, First, Middle Initial) B. Mr. John W. Mangen, CEBS		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 285D SW Montgomery Drive		Transaction ID: R19114
City Portland	State OR	Zip Code 97201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer American Council of Life Insurers	Occupation Director, Pacific Region	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Brandi Nelson		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19116
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	329.16
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 13 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Mr. L. John Pearson		Date of Receipt M / D / Y Y Y Y 05 / 12 / 2004
Mailing Address 10075 Red Run Boulevard		Transaction ID: R19056
City Owings Mills	State MD	Zip Code 21117-4871
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Baltimore Life Insurance Company	Occupation President & CEO	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. Donald G. Preston		Date of Receipt M / D / Y Y Y Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19119
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.00
Name of Employer American Council of Life Insurers	Occupation Managing Director, Reinsurance	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) C. Ms. Kathryn A. Ricard		Date of Receipt M / D / Y Y Y Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700		Transaction ID: R19122
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer American Council of Life Insurers	Occupation Vice President, Retirement & Pensions	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1155.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 28

(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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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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Mr. Arthur F. Ryan		Date of Receipt M / D / Y 05 / 26 / 2004
Mailing Address 10 Oak Forest Lane		Transaction ID: R19077
City Mendham	State NJ	Zip Code 07845-2800
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer The Prudential Insurance Company of Am	Occupation Chr of the Bd & CEO	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Ms. Theresa Soroka		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19129
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.50
Name of Employer American Council of Life Insurers	Occupation Senior Counsel	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 302.50	

Full Name (Last, First, Middle Initial) C. Mr. Kristopher W. Waeteman		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700		Transaction ID: R19131
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 58.68
Name of Employer American Council of Life Insurers	Occupation Programmer & Project Manager	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 283.30	

SUBTOTAL of Receipts This Page (optional)	5117.18
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 28

(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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Ms. Joann Waiters		Date of Receipt M / D / Y 05 / 17 / 2004
Mailing Address 5325 Massachusetts Avenue		Transaction ID: R19064
City Bethesda	State MD	Zip Code 20816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer American Council of Life Insurers	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. David R. Werthworth		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19132
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer American Council of Life Insurers	Occupation	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Dabra K. West		Date of Receipt M / D / Y 05 / 28 / 2004
Mailing Address 101 Constitution Avenue, NW Suite 700 West		Transaction ID: R19133
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer American Council of Life Insurers	Occupation	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	410.00
TOTAL This Period (last page this line number only)	10498.10

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

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

FOR LINE NUMBER: PAGE 16 / 28

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	17

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Allianz Life Insurance Company PAC		Date of Receipt M / D / Y 05 / 19 / 2004
Mailing Address 591 Redwood Highway #4000		Transaction ID: R19076
City Mill Valley	State CA	Zip Code 94041
FEC ID number of contributing federal political committee. C C00095109		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Allstate Insurance PAC		Date of Receipt M / D / Y 05 / 12 / 2004
Mailing Address 2775 Sanders Road Suite A4		Transaction ID: R19051
City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C C00040253		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Fortis PAC		Date of Receipt M / D / Y 05 / 13 / 2004
Mailing Address P.O. Box 3050		Transaction ID: R19069
City Milwaukee	State WI	Zip Code 53201-3050
FEC ID number of contributing federal political committee. C C00185694		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 17 / 28

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
13	14	15	16		

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Lincoln Insurance Group PAC		Date of Receipt M / D / Y 05 / 12 / 2004
Mailing Address P.O. Box 82825		Transaction ID: R19052
City Lincoln	State NE	Zip Code 68501
FEC ID number of contributing federal political committee. C C00390534		Amount of Each Receipt this Period 3500.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	

Full Name (Last, First, Middle Initial) B. Modern Woodmen of America PAC		Date of Receipt M / D / Y 05 / 07 / 2004
Mailing Address 1701 First Avenue		Transaction ID: R19049
City Rock Island	State IL	Zip Code 61201
FEC ID number of contributing federal political committee. C CD0184382		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. New York Life PAC		Date of Receipt M / D / Y 05 / 03 / 2004
Mailing Address 51 Madison Avenue		Transaction ID: R19048
City New York	State NY	Zip Code 10010
FEC ID number of contributing federal political committee. C CD0158851		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	11500.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 28

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
			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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. Phoenix Companies PAC		Date of Receipt M / D / Y 05 / 17 / 2004
Mailing Address One American Row		Transaction ID: R19065
City	State	Zip Code
Hartford	CT	06115
FEC ID number of contributing federal political committee. C C00168203		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Protective Life Corp. PAC		Date of Receipt M / D / Y 05 / 25 / 2004
Mailing Address P. O. Box 2606		Transaction ID: R19078
City	State	Zip Code
Birmingham	AL	35202-2606
FEC ID number of contributing federal political committee. C C00161414		Amount of Each Receipt this Period 4000.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Thivent Financial PAC		Date of Receipt M / D / Y 05 / 17 / 2004
Mailing Address P.O. Box 1892		Transaction ID: R19088
City	State	Zip Code
Appleton	WI	54912
FEC ID number of contributing federal political committee. C C00121319		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Check
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	12000.00
TOTAL This Period (last page this line number only)	▶	36000.00

**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)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
	27		28a		28b		28c		29		30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial) A. SunTrust Bank		Transaction ID: D9535 Date of Disbursement 05 / 04 / 2004	
Mailing Address 445 11th Street, NW		Amount of Each Disbursement this Period 6.50	
City Washington State DC Zip Code 20004	Purpose of Disbursement Bank Charges Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. SunTrust Bank		Transaction ID: D9534 Date of Disbursement 05 / 21 / 2004	
Mailing Address 445 11th Street, NW		Amount of Each Disbursement this Period 2.50	
City Washington State DC Zip Code 20004	Purpose of Disbursement Bank Charges Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. SunTrust Bank		Transaction ID: D9536 Date of Disbursement 05 / 21 / 2004	
Mailing Address 445 11th Street, NW		Amount of Each Disbursement this Period 6.50	
City Washington State DC Zip Code 20004	Purpose of Disbursement Bank Charges Candidate Name	Category/ Type	
Office Sought: House Senate President State: District	Disbursement For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	15.50
TOTAL This Period (last page this line number only)	15.50

**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)

PAGE 20 / 28

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial)
A. America's Foundation PAC

Mailing Address 128 North Columbus Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Contr. America's Foundation PAC (PA-R)

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D9511
Date of Disbursement
05 / 25 / 2004

Amount of Each Disbursement this Period
2500.00

Full Name (Last, First, Middle Initial)
B. Ben Nelson for US Senate

Mailing Address 426 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contr.

Candidate Name
Ben Nelson

Office Sought: House Senate President
State: NE District

Disbursement For: 2006 Primary General Other (specify) ▼

Category/
Type

Transaction ID: D9498
Date of Disbursement
05 / 11 / 2004

Amount of Each Disbursement this Period
2500.00

Full Name (Last, First, Middle Initial)
C. CHRIS PAC

Mailing Address 238 Massachusetts Avenue, NE
Suite 310

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contr. CHRIS PAC (DC-D)

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D9519
Date of Disbursement
05 / 25 / 2004

Amount of Each Disbursement this Period
2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **7500.00**

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)

PAGE 21 / 28

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial)
A. Castle Campaign Fund

Mailing Address P.O Box 133

City Wilmington State DE Zip Code 19899

Purpose of Disbursement
Contr.

Candidate Name
Michael N. Castle

Category/
Type

Office Sought: House Senate President
Disbursement For: 2004
 Primary General
Other (specify) ▼

State: DE District: D1

Transaction ID: D950D
Date of Disbursement

05 / 11 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. Chambliss for Senate

Mailing Address Post Office Box 12469

City Atlanta State GA Zip Code 30355

Purpose of Disbursement
Contr.

Candidate Name
Saxby Chambliss

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
Other (specify) ▼

State: GA District

Transaction ID: D9513
Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
C. Congressional Majority Committee

Mailing Address 555 13th Street, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Contr. Congressional Majority Co (DC-R)

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For:
 Primary General
Other (specify) ▼

State: District

Transaction ID: D9517
Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

2000.00

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)

PAGE 22 / 28

<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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial)
A. Crowley for Congress

Mailing Address PO Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement
Contr.

Candidate Name
Joseph Crowley

Office Sought: House
Senate
President
State: NY District: D7

Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D9496
Date of Disbursement

05 / 11 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. Ellen Tauscher for Congress

Mailing Address 20 Park Road
Suite E

City Burlingame State CA Zip Code 04010

Purpose of Disbursement
Contr.

Candidate Name
Ellen O. Tauscher

Office Sought: House
Senate
President
State: CA District: 10

Disbursement For: 2004
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D9515
Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)
C. Friends of John Boehner

Mailing Address 7908-I Cincinnati Dayton Road

City West Chester State OH Zip Code 45069

Purpose of Disbursement
Contr.

Candidate Name
John A. Boehner

Office Sought: House
Senate
President
State: OH District: 08

Disbursement For: 2004
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D9512
Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

1000.00

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)

PAGE 23 / 28

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial)
A. Hooley for Congress

Mailing Address 320 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contr.

Candidate Name
Darlene Hooley

Office Sought: House
Senate
President
State: OR District: D5

Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D9497
Date of Disbursement

05 / 11 / 2004

Amount of Each Disbursement this Period

1832.95

Full Name (Last, First, Middle Initial)
B. Johnson for Congress Committee

Mailing Address P.O. Box 1086

City New Brighton State CT Zip Code 06050

Purpose of Disbursement
Contr.

Candidate Name
Nancy L. Johnson

Office Sought: House
Senate
President
State: CT District: D5

Disbursement For: 2004
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D951B
Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)
C. Linder for Congress

Mailing Address P. O. Box 4026

City Duluth State GA Zip Code 30098

Purpose of Disbursement
Contr.

Candidate Name
John Linder

Office Sought: House
Senate
President
State: GA District: D7

Disbursement For: 2004
 Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D951B
Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5332.95

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)

PAGE 24 / 28

<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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial)
A. Oxley for Congress

Mailing Address P.O. Box 2002

City Findlay State OH Zip Code 45839

Purpose of Disbursement
Contr.

Candidate Name
Michael G. Oxley

Category/
Type

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: OH District: D4

Transaction ID: D9521
Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)
B. PRYCE Project

Mailing Address 1155 21st Street, NW
Suite 330

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contr. Pryce Project (OH-R)

Candidate Name

Category/
Type

Office Sought: House
Senate
President

Disbursement For:
Primary General
Other (specify) ▼

State: District

Transaction ID: D9485
Date of Disbursement

05 / 11 / 2004

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)
C. Paul Ryan for Congress

Mailing Address 29 West Milwaukee Street
Suite 201

City Janesville State WI Zip Code 53545

Purpose of Disbursement
Contr.

Candidate Name
Paul Ryan

Category/
Type

Office Sought: House
Senate
President

Disbursement For: 2004
 Primary General
Other (specify) ▼

State: WI District: D1

Transaction ID: D9508
Date of Disbursement

05 / 19 / 2004

Amount of Each Disbursement this Period

1815.73

SUBTOTAL of Disbursements This Page (optional) ▶

6815.73

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)

PAGE 25 / 28

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial)
A. Paul Ryan for Congress

Mailing Address 529 14th Street, NW
Suite F11

City Washington State DC Zip Code 20045

Purpose of Disbursement
Contr.

Candidate Name
Paul Ryan

Category/
Type

Office Sought: House Senate President
Disbursement For: 2004
 Primary General
Other (specify) ▼

State: WI District: D1

Transaction ID: D9509
Date of Disbursement

05 / 19 / 2004

Amount of Each Disbursement this Period

184.27

Full Name (Last, First, Middle Initial)
B. Rangel for Congress

Mailing Address PO Box 5577
Manhattanville Sta

City New York State NY Zip Code 10027

Purpose of Disbursement
Contr.

Candidate Name
Charles B. Rangel

Category/
Type

Office Sought: House Senate President
Disbursement For: 2004
 Primary General
Other (specify) ▼

State: NY District: 15

Transaction ID: D9489
Date of Disbursement

05 / 11 / 2004

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)
C. Rely on Your Beliefs Fund

Mailing Address 1300 Pennsylvania Ave., NW
Suite 700

City Washington State DC Zip Code 20004

Purpose of Disbursement
Contr. Rely on Your Beliefs Fund (MO-R)

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For:
 Primary General
Other (specify) ▼

State: District

Transaction ID: D9520
Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

4684.27

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)

PAGE 26 / 28

<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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial)
A. Stephanie Tubbs Jones for US Congress

Transaction ID: D9514
Date of Disbursement

Mailing Address 3729 Silsby Rd

05 / 25 / 2004

City State Zip Code
University Heights OH 44118

Amount of Each Disbursement this Period

Purpose of Disbursement
Contr.

1250.00

Candidate Name
Stephanie Tubbs Jones

Category/
Type

Office Sought: House
Senate
President

Disbursement For: 2004
Primary General
Other (specify) ▼

State: OH District: 11

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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

33582.95

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial)
A. Mr. L. John Pearson

Mailing Address 10075 Red Run Boulevard

City Owings Mills State MD Zip Code 21117-4871

Purpose of Disbursement
Refund to Individual

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D9533
Date of Disbursement

05 / 21 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. Ms. Patricia Woods

Mailing Address P.O. Box 48

City Nampa State ID Zip Code 83653-0048

Purpose of Disbursement
Refund to Individual

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D9532
Date of Disbursement

05 / 04 / 2004

Amount of Each Disbursement this Period

65.00

SUBTOTAL of Disbursements This Page (optional) ▶

1065.00

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

1065.00

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Council of Life Insurers PAC

Full Name (Last, First, Middle Initial)
A. Oklahoma Victory 2004

Mailing Address P.O. Box 1072

City Oklahoma City State OK Zip Code 73101

Purpose of Disbursement
Contribution non-federal Oklahoma

Candidate Name

Office Sought: House
Senate
President
State: District

Disbursement For:
Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D9501
Date of Disbursement

05 / 11 / 2004

Amount of Each Disbursement this Period

1000.00

Leadership Council Subcmte
(OK-R)

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

1000.00