

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)

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

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

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

A. Godwin, Jacob M., , Mr.,

Mailing Address 5511 Vista Way

City
Casper

State
WY

Zip Code
82601-6908

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life Insurance Company

Occupation (for Individual)
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

06 / 30 / 2019

Transaction ID : PR372186921550

Amount of Each Receipt this Period

115.38

☐ Memo Item

P/R Deduction (\$57.69 Bi-Weekly)

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

B. Koenig, Travis L., , Mr.,

Mailing Address 9991 N Blue Crossing Way

City
Tucson

State
AZ

Zip Code
85743-5213

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life Insurance Company

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

06 / 30 / 2019

Transaction ID : PR373037221550

Amount of Each Receipt this Period

83.33

☐ Memo Item

P/R Deduction (\$83.33 Monthly)

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

C. Gallina, Ronald, , Mr.,

Mailing Address 64 Elderwood Dr. N

City
St. James

State
NY

Zip Code
11780-3434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
New York Life Insurance Company

Occupation (for Individual)
Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.02

Date of Receipt

06 / 30 / 2019

Transaction ID : PR37521550

Amount of Each Receipt this Period

41.67

☐ Memo Item

P/R Deduction (\$41.67 Monthly)

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

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

240.38