Image# 201810259131041960		PAGE 1 / 261
	EPORT OF RECEIPTS ND DISBURSEMENTS Other Than An Authorized Committee	Office Use Only
1. NAME OF <b>TYI</b> COMMITTEE (in full)	<b>PE OR PRINT</b> ▼ Example: If typing, over the lines.	type 12FE4M5
Massachusetts Mutual Li	e Insurance Company Political Action	on Committee
ADDRESS (number and street)	295 State Street	
Check if different than previously reported. (ACC)	Springfield	MA 01111-0001 -
2. FEC IDENTIFICATION NUME	ER ▼ CITY ▲	STATE ▲ ZIP CODE ▲
C C00118943	3. IS THIS NEV REPORT X (N)	V AMENDED (A)
(Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year	Report Due On: Apr 20 (M3) Jun Apr 20 (M4) Jul (c) 12-Day PRE-Election Report for the: Convention (120	20 (M5)       Aug 20 (M8)       Nov 20 (M11) (Non-Election Year Only)         20 (M6)       Sep 20 (M9)       Dec 20 (M12) (Non-Election Year Only)         20 (M7)       Oct 20 (M10)       Jan 31 (YE)         X       General (12G)       Runoff (12R)         Special (12S)       in the State of       State of
Report (Non-election Year Only) (MY)	POST-Election Report for the:	Runoff (30R) Special (30S)
L (TER)	Election on	b / Y Y Y Y in the State of
5. Covering Period	01 / Y Y Y Y 01 2018 through	10 / Y Y Y Y Y 10 17 2018
Type or Print Name of Treasurer	eport and to the best of my knowledge and beli Morris, Maureen H., , Ms., aureen H., , Ms., [Electronically Fi	M M / D D / Y Y Y Y
NOTE: Submission of false, erroneous	, or incomplete information may subject the person	signing this Report to the penalties of 52 U.S.C. § 30109
Office Use Only		FEC FORM 3X Rev. 05/2016

10/25/2018 16 : 38

x

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

Massachusetts Mutual Life Insurance Company Political Action Committee

R	Report Covering the Period: From:	10 / Y Y Y Y 10 01 2018 To	b: 10 / D D / Y Y Y Y 10 17 2018
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		98617.43
	(b) Cash on Hand at Beginning of Reporting Period	11714.03	
	(c) Total Receipts (from Line 19)	60723.49	774316.22
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	72437.52	872933.65
7.	Total Disbursements (from Line 31)	68063.58	868559.71
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4373.94	4373.94
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

### Massachusetts Mutual Life Insurance Company Political Action Committee

R	eport Covering the Period: From:	/ 01 / 2018 To	10 / D D / Y Y Y Y 10 17 2018
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	· · · · · · · · · · · · · · · · · · ·	I	
	(a) Individuals/Persons Other		
	Than Political Committees	11510.70	
	(i) Itemized (use Schedule A)	41510.70	493834.25
	(ii) Unitemized	12957.08	237393.43
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	54467.78	731227.68
	(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)	54467.78	731227.68
12.	Transfers From Affiliated/Other	0.00	0.00
	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
11	Loan Repayments Received	0.00	0.00
	Offsets To Operating Expenditures		
10.	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	255.71	4207.80
16.	Refunds of Contributions Made	47. 47. 48.	
	to Federal Candidates and Other		
	Political Committees	6000.00	38500.00
17.	Other Federal Receipts		
	(Dividends, Interest, etc.)	0.00	380.74
18.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
		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
10			
19.	Total Receipts (add Lines 11(d),	60702 40	774316.22
	12, 13, 14, 15, 16, 17, and 18(c))▶	60723.49	//4310.22
20.	Total Federal Receipts		
	(subtract Line 18(c) from Line 19)▶	60723.49	774316.22

- 9

Page 3

- 7

I

#### DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	63.58	4737.04
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party	63.58	4737.04
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	68000.00	863500.00
Independent Expenditures		
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	216.67
(b) Bolitical Barty Committees		
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
(such as PACs) (d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	216.67
Other Disbursements (Including		
Non-Federal Donations)	0.00	106.00
<ul><li>Federal Election Activity (52 U.S.C. § 30101)</li><li>(a) Allocated Federal Election Activity (from Schedule H6)</li></ul>	(20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid		
<ul><li>Entirely With Federal Funds</li><li>(c) Total Federal Election Activity (add</li></ul>	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	68063.58	868559.71
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	68063.58	868559.71
		000339.71

### DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Total Contributions (other than loans) (from Line 11(d), page 3)</li> </ol>	54467.78	731227.68
<ol> <li>Total Contribution Refunds (from Line 28(d))</li> </ol>	0.00	216.67
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54467.78	731011.01
<ol> <li>Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))</li> </ol>	63.58	4737.04
<ol> <li>Offsets to Operating Expenditures (from Line 15, page 3)</li> </ol>	255.71	4207.80
<ol> <li>Net Operating Expenditures (subtract Line 37 from Line 36)</li> </ol>	- 192.13	529.24

FOR LINE NUMBER:

PAGE 6 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any p the name and address of any political committee	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Ins	surance Company Political Actior	n Committee
Full Name of Individual (Last, First, Middle         Diemer, James, , ,         Mailing Address 130 PUTTENHAM CROSSI         City         POOLER         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         SELF         Receipt For:         Primary       General         Other (specify) ▼		Date of Receipt
Full Name of Individual (Last, First, Middle         B. Baker, Joshua, Lofton, ,         Mailing Address 1580 SOUTHPOINTE DR         City         HOOVER         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         SELF         Receipt For:         Primary       General         Other (specify) ▼	Initial) or Full Organization Name          State       Zip Code         AL       35244-6729         C       Occupation (for Individual)         Insurance Agent       Aggregate Year-to-Date ▼         Ag60.00       360.00	Date of Receipt
Full Name of Individual (Last, First, Middle         C.       Huang, Victor, Ping, ,         Mailing Address 881 MEADOW VIEW DR         City         RICHMOND         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         SELF         Receipt For:         Primary       General         Other (specify)	Initial) or Full Organization Name          State       Zip Code         C       94806-6110         C       Occupation (for Individual)         Insurance Agent       Aggregate Year-to-Date ▼         480.00       480.00	Date of Receipt
	er only)	280.00

FOR LINE NUMBER:

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IT.			Use separate schedule(s)	(check only one)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★     11a     11b     11c     12       13     14     15     16     17					
	y information copied from such Reports and St for commercial purposes, other than using the			rson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
$\left \right\rangle$	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Committee					
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	Organization Name						
Α.	Brown, Justin, , MR., Mailing Address 4644 28th Rd S Apt C			Date of Receipt					
				10 10 Y Y Y Y 10 10 2018					
	City	State	Zip Code	Transaction ID : 78752838					
	Arlington	VA	22206-4131	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		250.00					
	Name of Employer (for Individual)	000	upation (for Individual)	Memo Item					
	MASSACHUSETTS MUTUAL LIFE INS.		P Government Relations						
	Receipt For:	Aggregate	Year-to-Date V	-					
	Primary General	00 0							
	Other (specify) <b>v</b>		250.00						
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	Organization Name						
В.	Johnson, Terrill, B., ,			Date of Receipt					
	Mailing Address 4519 37TH AVE	10 13 2018							
	City	State	Zip Code	Transaction ID : 78760086					
	ROCK ISLAND	IL	61201-7107	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		38.60					
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item					
	Receipt For:		Year-to-Date ▼	-					
	Primary General Other (specify) ▼		, 222.95						
<u> </u>	Full Name of Individual (Last, First, Middle Init Grate-Pyos, Mary, C., ,	ial) or Full O	Organization Name	Date of Receipt					
	Mailing Address 5906 OAK RIDGE CT			10 13 2018					
	City	State	Zip Code	Transaction ID : 78760087					
	BURKE	VA	22015-2435	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		29.40					
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Other (specify)								
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		<b>r</b>	318.00					

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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IT.			Use separate schedule(s)				(check only one)				
			for each category of the Detailed Summary Page		<b>X</b> 11a 13	11b	11c	12 16	17		
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	statements ma name and a	ay not be sold or used by any p address of any political committe	persor	n for the	purpose of	f soliciting	contribut	tions		
	NAME OF COMMITTEE (In Full)										
$\langle \rangle$	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	n Co	ommitte	ee					
Α.	Full Name of Individual (Last, First, Middle Ini Van Order, Douglas, Wayne, ,	tial) or Full C	Organization Name		Date of	Receipt					
	Mailing Address 1524 WOODGROVE WAY	iling Address 1524 WOODGROVE WAY						2018	Y		
	City ROSEVILLE	State CA	Zip Code 95661-4024			action ID : of Each F					
	FEC ID number of contributing federal political committee.	С						131.2	25		
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Me	emo Item					
	Receipt For:		Year-to-Date ▼								
	Other (specify) ▼		737.50	]							
В.	Full Name of Individual (Last, First, Middle Ini Young, Sylvia, C., ,	tial) or Full C	Organization Name		Date of	Receipt					
	Mailing Address 9211 63RD PL W	ng Address 9211 63RD PL W			<sup>M</sup> 10	/ D 13	D / Y	2018	Y		
	City	State WA	Zip Code	+		action ID :					
	MUKILTEO	VVA	98275-3531	_	Amount	of Each F	Receipt thi	s Period			
	FEC ID number of contributing federal political committee.	С			Ľ.	-	-	90.0	00		
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent		Me	emo Item					
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify)		, 620.00								
с.	Full Name of Individual (Last, First, Middle Ini Alfonso, Ricardo, M., ,	tial) or Full C	Organization Name		Date of	Receipt					
	Mailing Address 11 KENSINGTON DR				<sup>M</sup> 10	/ D 17		2018	Y		
	City NORTH BARRINGTON	State IL	Zip Code 60010-6960			action ID of Each F			8		
FEC ID number of contributing federal political committee.		С			<u> </u>	y .	, y	555.	57		
	Name of Employer (for Individual) SELF		upation (for Individual) neral Agent		M	emo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1388.87	]	P/R Ded	uction (\$55	55.57 Mont	thly)			
s	UBTOTAL of Receipts This Page (optional)					, , , , , , , , , , , , , , , , , , ,	- y	776.8	32		

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

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			Use separate schedule(s)	(check only one)					
ITEMIZED REC	JEIF I 3		for each category of the Detailed Summary Page	★ 11a 13	11b	11c	12 16	17	
			y not be sold or used by any pe ddress of any political committee			soliciting	contribu	tions	
	TTEE (In Full)								
Massachuse	tts Mutual Life Insura	ance Co	mpany Political Action	Committ	ee				
Full Name of Indiv WOODS, MICH	idual (Last, First, Middle Initia AEL, , ,	l) or Full Or	rganization Name	Date o	f Receipt				
	202 ROSETTE WAY			10 <sup>M</sup>	/ D 17	) / Y	ү ү 2018	Y	
City MARIETTA		State GA	Zip Code 30062-4765		saction ID :				
			50002-4705	Amoun	t of Each F	leceipt th	is Period		
FEC ID number of federal political cor	0	С				-	47.	52	
Name of Employer SELF	r (for Individual)		ipation (for Individual) rance Agent	М	emo Item				
Receipt For:		Aggregate	Year-to-Date ▼						
Primary	General			P/R Ded	luction (\$23	.76 Bi-W€	ekly)		
Other (specif	ý) <b>V</b>		204.97						
Full Name of Indiv B. Wietsma, Eric	idual (Last, First, Middle Initia , H, MR.,	l) or Full Or	rganization Name	Date o	f Receipt				
Mailing Address 3	Valley View Dr			10 17 2018					
City		State	Zip Code	Trans	action ID :	PR11204	7456251	8	
Wilbraham		MA	01095-2363	Amoun	t of Each F	leceipt th	is Period		
FEC ID number of federal political cor	0	С		26.92					
Name of Employer Massachusetts Mut	r (for Individual) ual Life Insurance Co		upation (for Individual) d of Retirement Operations	м	emo Item				
Receipt For:			Year-to-Date ▼	_					
Primary	General	Ayyreyale		P/R Deduction (\$26.92 Bi-Weekly)					
Other (specif	ý) <b>v</b>		565.32						
Full Name of Indiv C. Scanlon, Sus	idual (Last, First, Middle Initia an, J, MS.,	l) or Full Or	rganization Name	Date o	f Receipt				
Mailing Address 2	3 Judith Dr			10 <sup>M</sup>	/ D [ 17		ү 2018	Y	
City		State	Zip Code	Trans	saction ID :	PR1120	47496251	8	
Manchester		CT	06040-6517	Amoun	t of Each F	leceipt th	is Period		
FEC ID number of federal political cor	J	С				,	38.	89	
Name of Employer	(for Individual)	Occu	pation (for Individual)	м	lemo Item				
	S MUTUAL LIFE INS.		President - Compliance						
Receipt For:		Aggregate	Year-to-Date ▼						
Primary	General			P/R Dec	duction (\$38	.89 Bi-We	eekly)		
Other (specif	ý)		816.69						
SUBTOTAL of Rece	ipts This Page (optional)		▶		y .		113.	33	
TOTAL This Period	(last page this line number on	ıly)	••••••						

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IT.			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a		11b	11c 15	12	Г	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe Iddress of any political committee	rson for the	purp	ose of a	soliciting	contri	butio	ns
	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Mutual Life Insur	rance Co	mpany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Initi TODD, ANDREW, W, ,	al) or Full O	organization Name	Date of	of Red	ceipt				
	Mailing Address 9997 DELL RD			M 10	/	D D 17	/ Y	2018	ү ү 3	1
	City EDEN PRAIRIE	State MN	Zip Code 55347-3524			<b>on ID : F</b> Each Re				
	FEC ID number of contributing federal political committee.	С				y	-95-	20	08.32	
	Name of Employer (for Individual) SELF		upation (for Individual) ırance Agent		lemo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2083.37	P/R Dec	ductio	on (\$104	.16 Bi-W	/eekly)		
в.	Full Name of Individual (Last, First, Middle Initi SHEN, RONG, , ,	al) or Full O	organization Name	Date o	of Red	ceipt				
	Mailing Address 2275 BAYLEAF DR		10 / D D / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR11556						
	SAN RAMON	CA	94582-5878	Amount of Each Receipt th					od	
	FEC ID number of contributing federal political committee.	С				,		2	25.00	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		1emo	Item				
	Receipt For:	P/R Dec	ductio	n (\$12.5	i0 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initi Taylor, Kelly, A, MS.,	al) or Full O	organization Name	Date o	of Red	ceipt				
	Mailing Address 9 Bluebird Dr			M 10	M = M / D = D / Y = Y = Y					
	City Enfield	State CT	Zip Code 06082-5703			<b>on ID : I</b> Each Re				
	FEC ID number of contributing federal political committee.					, .	, <u>,</u>	1	15.38	
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co			upation (for Individual) /el Management Director		/lemo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.98	P/R De	ductic	on (\$15.3	38 Bi-We	ekly)		
	UBTOTAL of Receipts This Page (optional)		F	F	-	5	5	24	18.70	-
ΙĨ	OTAL This Period (last page this line number of	only)	••••••			,			-	- I.

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17			Use separate schedule(s)	(check only one)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17				
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions				
<u>,</u>	NAME OF COMMITTEE (In Full)							
$\left \right\rangle$	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee				
Α.	Full Name of Individual (Last, First, Middle Initi Carmon, Timothy, , MR.,	al) or Full O	Drganization Name	Date of Receipt				
	Mailing Address 61 Rainbow Trl			10 / Y Y Y Y 10 17 2018				
	City South Windsor	State CT	Zip Code 06074-2953	Transaction ID : PR1233812062518 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		38.47				
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		cupation (for Individual) e President - Risk Management	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 807.87	P/R Deduction (\$38.47 Bi-Weekly)				
B.	Full Name of Individual (Last, First, Middle Initi SCIACCA, Anthony, , MR.,	al) or Full O	Drganization Name	Date of Receipt				
	Mailing Address 5619 Challisford Ln			10 D D / Y Y Y Y 10 17 2018				
	City	State	Zip Code	Transaction ID : PR1264218162518				
	Charlotte	NC	28226-2627	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		134.62				
	Name of Employer (for Individual) Barings LLC		cupation (for Individual) maging Director	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2827.02	P/R Deduction (\$134.62 Bi-Weekly)				
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi GACEVICH, Kenneth, MI, MR.,	al) or Full O	Drganization Name	Date of Receipt				
	Mailing Address 6515 Greenway Bend Dr			10 17 / Y Y Y Y 10 17 2018				
	City Charlotte	State NC	Zip Code 28226-5561	Transaction ID : PR1264219262518				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period				
Name of Employer (for Individual) Barings LLC			cupation (for Individual) naging Director	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1186.50	P/R Deduction (\$56.50 Bi-Weekly)				
⊢	UBTOTAL of Receipts This Page (optional)			229.59				

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ıт.			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c	12	Г	17			
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for the	purpose of	soliciting	, contri	ibutio	ons			
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee							
Α.	Full Name of Individual (Last, First, Middle Initi ZOLTY, Carolyn, , MS.,	al) or Full O	Organization Name	Date of Receipt								
	Mailing Address 111 Argyle Ave			M M / D D / Y Y Y Y 10 17 2018								
	City West Hartford	State CT	Zip Code 06107-1704		saction ID : It of Each F							
	FEC ID number of contributing federal political committee.	С						9.62				
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director		lemo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 202.02	P/R Dec	duction (\$9.6	32 Bi-Wee	ekly)					
в.	Full Name of Individual (Last, First, Middle Initi VELASTEGUI, JEFF, T, ,	al) or Full O	Organization Name	Date of Receipt								
	Mailing Address 69 BANKSIDE DR			10	/ D 17	) / Y	2018	Y Y	]			
	City	State	Zip Code	Trans	saction ID :	PR12642	259962	518				
	CENTERPORT	NY	11721-1738	Amoun	t of Each F	Receipt th	is Peri	od				
	FEC ID number of contributing federal political committee.	С					1(	00.00	)			
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 445.00	P/R Deduction (\$50.00 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi NISSEN, NEIL, A, ,	al) or Full O	Organization Name	Date o	f Receipt							
	Mailing Address 21522 48TH AVE			10 <sup>M</sup>	/ D 17		2018					
	City OAKLAND GARDENS	State NY	Zip Code 11364-1314		saction ID : it of Each F							
	FEC ID number of contributing federal political committee.	С			. <u>,</u> ,			25.00	,			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		lemo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Dec	duction (\$12	.50 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)		•••••		,	, ,	13	34.62				
т	OTAL This Period (last page this line number of	nly)	••••••									

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### SCHEDULE A (FEC Form 3X) \_\_\_\_\_

FOR LINE NUMBER:

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IТ	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
11			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
	y information copied from such Reports and S for commercial purposes, other than using the			rson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	irance Co	mpany Political Action	Committee								
Α.	Full Name of Individual (Last, First, Middle Ini RANA, PARTH, , ,	tial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 25510 SINGING RAIN			10 17 2018								
	City SAN ANTONIO	State TX	Zip Code 78260-6269	Transaction ID : PR1285664362518 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		25.00								
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 237.50	P/R Deduction (\$12.50 Bi-Weekly)								
B.	Full Name of Individual (Last, First, Middle Ini DEKEUSTER, JASON, , ,	tial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 2551 38TH AVENUE NE			10 17 Y Y Y 10 17								
		State MN	Zip Code	Transaction ID : PR1285669062518								
	MINNEAPOLIS	IVIIN	55421-5005	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		25.00								
	Name of Employer (for Individual) SELF		upation (for Individual) ırance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Ini Wallace, Amanda, H, MS.,	tial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 60 Carriage Dr			10 17 Y Y Y Y 2018								
	City Tolland	State CT	Zip Code 06084-2910	Transaction ID : PR1285750062518								
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) d of Direct to Consumer	Memo Item								
	Receipt For:		Year-to-Date V	-								
	Other (specify)		525.00	P/R Deduction (\$25.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•	75.00								

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

FOR LINE NUMBER:

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261

City       State       Zip Code       Transaction ID : PR12857516251         Maine of EC ID number of contributing tederal political committee.       C				Use separate schedule(s)	(check only one)							
my information copied from such Reports and Statements may not be solid ruled by any person for the purposes of soliding contribution from such committee         NAME OF COMMITTEE (in Full)         NAME OF COMMITTEE (in Full)         Mailing Address 224 Main St         City         Mailing Address 224 Main St         City         Name of Employer (for Individual)         Massachusetts Mutual Life Insurance Company Political Committee         PGL Number of contributing federal political committee.         City       State         Name of Employer (for Individual)         Address 172 Snall St         City       Aggregate Year-to-Date ▼         PR Deduction (\$38.62 Bi-Weekly)         Pill Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. ODDonnell, Aletthea, , MS.,         Mailing Address 172 Snall St         City         Marest	IIEIVI											
Massachusetts Mutual Life Insurance Company Political Action Committee         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A, Kwassman, Stuart, , MR.,         Mailing Address 224 Main St         City         Name of Employer (for Individual)         Massachusetts Mutual Life Insurance Co         ASP & Actuary         Precipt For         Primary         General         Other (specify) ▼         Built Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. O'Donnell, Alterba , NS.,         Mailing Address 172 Snell St         City         Suffering Indering Primary         General         O'Donnell, Alterba , NS.,         Mailing Address 172 Snell St         City         Aggregate Year-to-Date ▼         Primary       General         O'Donnell, Alterba , NS.,         Mailing Address 65 Rosewood Dr         City       Aggregate Year-to-Date ▼         Primary       General         O'ther (specify) ▼         Aggregate Year-to-Date ▼         Primary       General         O'ther (specify) ▼         City       Aggregate Year-to-Date ▼         Name of Indivi					on for the purpose	of soliciting contribution						
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         A. Kwassman, Stuart, , MR.,       Mailing Address 224 Main St       0       17       2016         City       State       Zip Code       Transaction ID : PR128575146251         Newington       C       06111-1405       Transaction ID : PR128575146251         Newington       C       06111-1405       Amount of Each Receipt His Period         PEC ID number of contributing tedral political committee.       Occupation (for Individual)       Massachusets Mutual Life Insurance Co       Aggregate Year-to-Date ▼       P/R Deduction (\$9.62 Bi-Weekly)         Pull Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Roceipt       Date of Roceipt         B. O'Donnell, Alethea, , MS.,       Mailing Address 172 Snell St       Transaction ID : PR128573532853         City       Maing Address 172 Snell St       Occupation (for Individual)         MASSACHUSETT MUTUNL LIFE INS.       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         Priceipt For:       Printary       General       Occupation (for Individual)         MASSACHUSETT MUTUNL LIFE INS.       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt His Period <td< td=""><td></td><td>ME OF COMMITTEE (In Full)</td><td></td><td></td><td></td><td></td><td></td></td<>		ME OF COMMITTEE (In Full)										
A.       Kwassman, Stuart, , MR.,         Mailing Address 224 Main St       City         Oity       State       Zip Code         Newington       CT       06111-1405         FEC ID number of contributing federal political committee.       Occupation (for Individual)       Accupation (for Individual)         Massachusets Mutaul Life Insurance Co       Aggregate Year-to-Date ▼       P/R Deduction (\$3.62 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B.       O'Donnell, Alethea, , MS.,       Mailing Address 172 Snell St         City       State       Zip Code         Pare of Engloyer (for Individual)       Occupation (for Individual)       Transaction ID: PR128575326251         Mailing Address 172 Snell St       C       Transaction ID: PR128575326251         City       State       Zip Code       Transaction ID: PR128575326251         Annount of Each Receipt His Period       Mae of Individual)       Mae of Individual)       Transaction ID: PR128575326251         Maing Address 63 Rosewood Dr       Occupation (for Individual)       Mae of Receipt His Period       Immode tech         Print Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt His Period       Immode tech         Receipt For:       Print Organ	∕ Ma	assachusetts Mutual Life Insura	ance Co	ompany Political Action C	ommittee							
City       State       Zip Code       Transaction ID : PR12857514257         Mewington       C       0611-1405       Amount of Each Receipt this Period         FEC ID number of contributing       C       0       9         Massachusetts Mutual Life Insurance Co       Aggregate Year-to-Date ▼       PrR Deduction (\$9.62 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       10       17       2018         City       State       Zip Code       0       Memo Item       9         Other (specify) ▼       C       202.02       PrR Deduction (\$9.62 Bi-Weekly)       0       0       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10       10 </td <td></td> <td></td> <td>l) or Full O</td> <td>Organization Name</td> <td>Date of Receipt</td> <td></td> <td></td>			l) or Full O	Organization Name	Date of Receipt							
Newington       CT       06111-1405       Amount of Each Receipt this Period         FEC ID number of contributing [ederal political committee.       Q       Aggregate Year-to-Date ▼       P/R Deduction (\$9.62 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Q       Date of Receipt Amount of Each Receipt this Period         City       Amount of Contributing [ederal political committee.       Q       Date of Receipt Amount of Each Receipt this Period         Receipt For:       Malling Address 172 Snell St       City       State       Zip Code         Amne of Employer (for Individual)       AvP Compliance       Amount of Each Receipt this Period         Receipt For:       Primary       General       Occupation (for Individual)         MASSACHUSETTS MUTUAL LIFE INS.       AvP Compliance       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       P/R Deduction (\$26.95 Bi-Weekly)         City       State       Zip Code       Memo Item         Malling Address 66 Rosewood Dr       City       State       Zip Code         State       Zip Code       GO78-2014       Amount of Each Receipt His Period         FeC ID number of contributing federal political committee.       C       Go78-2014       Amount of Each Receipt His Period <t< td=""><td>Mai</td><td>ing Address 224 Main St</td><td></td><td></td><td colspan="8"></td></t<>	Mai	ing Address 224 Main St										
FEC. ID number of contributing federal political committee.       C       And the Each Receipt file Period         Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co Receipt For: Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$9.62 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. O'Donnell, Alethea, , MS., Mailing Address 172 Snell St       Date of Encloper         City MassachusetTr3 MUTUAL LIFE INS. Receipt For: Primary General       Occupation (for Individual) AVP Compliance       Aggregate Year-to-Date ▼         P/R Deduction (\$26.95 Bi-Weekly)       Date of Receipt       Tansaction ID : PR 128375326251 Amount of Each Receipt IS Period         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS. Name of Employer (for Individual) Massachuset (contributing federal political committee.       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       P/R Deduction (\$26.95 Bi-Weekly)       P/R Deduction (\$26.95 Bi-Weekly)         City Suffield       State       Zip Code CT       Occupation (for Individual) MassACHUSETTS MUTUAL LIFE INS. Receipt For: Primary General       Occupation (for Individual) SVP Chief Compliance Off & Dep Gen C Receipt For: Primary General       Memo Item         Mailing Address 6s Rosewood Dr       SyP Chief Compliance Off & Dep Gen C Receipt For: Primary General       Aggregate Year-to-Date ▼ <t< td=""><td></td><td></td><td></td><td></td><td>Transaction ID</td><td>: PR1285751462518</td><td>1</td></t<>					Transaction ID	: PR1285751462518	1					
rederal political committee.       V         Name of Employer (for Individual)       Occupation (for Individual)         Massachusetts Mutual Life Insurance Co       AvyP & Actuary         Receipt For:       Other (specify) ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. O'Donnell, Alethea, , MS.,       Mailing Address 172 Snell St         City       State       Zip Code         Amherst       Ma       01002-2556         FELI Number of contributing federal political committee.       C         Massach-USETTS MUTUAL LIFE INS.       AvP Compliance         Receipt For:       Occupation (for Individual)         MASSACH-USETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼         Primary       General       Occupation (for Individual)         MASSACH-USETTS MUTUAL LIFE INS.       App Compliance         Receipt For:       C       Aggregate Year-to-Date ▼         Primary       General       Occupation (for Individual)         MASSACH-USETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼         Name of Employer (for Individual)       Accept for       Tansaction ID : PR128575396251         Affield       C       Under State       Zip Code         Namort of Exployer (for Individual)	Nev	wington	СТ	06111-1405	Amount of Each	Receipt this Period						
Massachusetts Mutual Life Insurance Co       AVP & Actuary         Receipt For:		5	С			9.6	2					
Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$9.62 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. O'Donnell, Alethea, , MS.,       Mailing Address 172 Snell St       Date of Receipt         City       State       Zip Code       Tansaction ID - BR128575336251         Amberst       MA       01002-2556       Amount of Each Receipt this Period         PEC ID number of contributing tederal political committee.       C       C       Memo Item         NAmes of Employer (for Individual) AMSSACHUSETTS MUTULAL LIFE INS.       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       P/R Deduction (\$26.95 Bi-Weekly)         C. Lucido, Bradley, , MR.,       Aggregate Year-to-Date ▼       Date of Receipt         Mailing Address 66 Rosewood Dr       C       10       17       2018         City       State       Zip Code       Tansaction ID : PR128575396251       Amount of Each Receipt this Period         Mailing Address 66 Rosewood Dr       C       Each Receipt (for Individual)       SVP Chief Compliance Off & Dep Gen C         Name of Employer (for Individual)       C       C       Memo Item       96         Name of Employer (for Individual)       Svcc	Nan	ne of Employer (for Individual)	Осси	upation (for Individual)	Memo Item							
Primary       General       Pggregate real-to-bate ▼       P/R Deduction (\$9.62 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. O'Donnell, Alethea, , MS.,       Mailing Address 172 Snell St       Date of Receipt         City       State       Zip Code         Amherst       MA       01002-2556         FEC ID number of contributing federal political committee.       C       26.         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         MASSACHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Lucido, Bradley, , MR.,       Mailing Address 65 Rosewood Dr       Transaction ID : PR128575396251         Mame of Employer (for Individual)       State       Zip Code         Mailing Address 65 Rosewood Dr       To 10 ' 2018       Transaction ID : PR128575396251         Mailing Address 65 Rosewood Dr       C       Memo Item       P/R Deduction (\$26.95 Bi-Weekly)         Mailing Address 65 Rosewood Dr       C       Memo Item       P/R 128575396251         Mame of Employer (for Individual)       SVP Chier Compliance Off & Dep Gen (C       PR 28575396251	Mas	sachusetts Mutual Life Insurance Co	AVF	> & Actuary								
Other (specify) ▼       202.02       Introduction (g3.02 Bitteekky)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Mailing Address 172 Snell St       10       17       2018         City       Max       01002-2556       Transaction ID - PR128575236251         Maxme of Employer (for Individual)       Occupation (for Individual)       AVP Compliance         MASSACHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       P/R Deduction (\$26.95 Bi-Weekly)         City       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         City       State       Zip Code         Suffield       CT       06078-2014         FEC ID number of contributing federal political committee.       C       10       17       2018         City       State       Zip Code       10       17       2018         City       State       Zip Code       10       10       17       2018         Maxing Address 66 Rosewood Dr       C       06078-2014       Faceipt this Period       10       17       2018         Receipt For:       Qif gregate Year-to-Date ▼       96	Rec	eipt For:	Aggregate	Year-to-Date V								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. O'Donnell, Alethea, , MS.,       Individual (Last, First, Middle Initial) or Full Organization Name         B. O'Donnell, Alethea, , MS.,       Mailing Address 172 Snell St         City       State       Zip Code         Amherst       MA       01002-2556         Amherst       MA       01002-2556         Name of Employer (for Individual)       Occupation (for Individual)         AXSSACHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼         Primary       General       Occupation Name         C. Lucido, Bradley, , MR.,       Malling Address 65 Rosewood Dr       P/R Deduction (\$26.95 Bi-Weekly)         City       State       Zip Code       Transaction ID : PR128575386251         Name of Employer (for Individual)       Occupation Name       Date of Receipt         City       State       Zip Code         Suffield       CT       06078-2014         FEC ID number of contributing federal political committee.       General         Name of Employer (for Individual)       SVP Chief Compliance Off & Dep Gen (         MassAcHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)         Pirmary       General       Other (specify)		Primary General			P/R Deduction (\$9	9.62 Bi-Weekly)						
B. O'Donnell, Alethea, , MS.,       Date of Receipt         Mailing Address 172 Snell St       01002-2556         City       State       01002-2556         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.       Occupation (for Individual) AVP Compliance       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)       P/R Deduction (\$26.95 Bi-Weekly)         City       State       Zip Code       Memo Item         Mailing Address 65 Rosewood Dr       C       06078-2014       Tansaction ID : PR128575396251         City       State       Zip Code       Memo Item         Suffield       C       06078-2014       Tansaction ID : PR128575396251         Receipt For:       Occupation (for Individual)       SVP Chief Compliance Off & Dep Gen C       Memo Item         Mailing Address 65 Rosewood Dr       C       06078-2014       Tansaction ID : PR128575396251       Amount of Each Receipt this Period         Mailing Address (5 Rosewood Dr       C       06078-2014       Memo Item       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)       P/R Deduction (\$96.15 Bi-Weekly)       P/R Deduction (\$96.15		Other (specify) ▼	L	202.02								
Mailing Address 172 Snell St         City         Amberst         MAI         Ditation Ditation Ditation         FEC ID number of contributing federal political committee.         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.         Receipt For:         Primary         General         Other (specify) ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         C.       Lucido, Bradley, , MR., Mailing Address 65 Rosewood Dr         City       State Suffield         City       State CT         Mailing Address 65 Rosewood Dr         City       State CT         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.         Aggregate Year-to-Date ▼         Primary       General <td< td=""><td></td><td></td><td>l) or Full O</td><td>Organization Name</td><td>Date of Receipt</td><td></td><td></td></td<>			l) or Full O	Organization Name	Date of Receipt							
City       State       Zip Code         Amherst       MA       01002-2556         FEC ID number of contributing federal political committee.       C       26.         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.       Occupation (for Individual) AVP Compliance       Memo Item         Primary       General       Occupation Name       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City       State       Zip Code         City       State       Zip Code         City       State       Zip Code         City       State       Zip Code         Suffield       C       2018         FEC ID number of contributing federal political committee.       Occupation (for Individual) SVP Chief Compliance Off & Dep Gen C         Name of Employer (for Individual)       Occupation (for Individual) SVP Chief Compliance Off & Dep Gen C       P/R Deduction (\$96.15 Bi-Weekly)         P/R Deduction (\$96.15 Bi-Weekly)       Question (\$96.15 Bi-Weekly)       P/R Deduction (\$96.15 Bi-Weekly)							v					
Anherst       MA       01002-2556       Immunit of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       26.         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.       Occupation (for Individual) AVP Compliance       P/R Deduction (\$26.95 Bi-Weekly)         Primary       General       0ther (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       10         City       State       Zip Code       10       17         Suffield       C       06078-2014       Fecipt this Period       96.         FEC ID number of contributing federal political committee.       C       06078-2014       P/R Deduction (\$96.15 Bi-Weekly)         MASSACHUSETTS MUTUAL LIFE INS.       SVP Chief Compliance Off & Dep Gen (Receipt for:       96.       Memo Item         Name of Employer (for Individual)       Occupation (for Individual)       SVP Chief Compliance Off & Dep Gen (Receipt for:       96.         Primary       General       Other (specify)       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)	man						T					
Amherst       MA       01002-2556         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.       Occupation (for Individual) AVP Compliance       Amount of Each Receipt this Period         Receipt For: Primary Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City Suffield       State CT       Zip Code O6078-2014       Date of Receipt         FEC ID number of contributing federal political committee.       Occupation (for Individual) SVP Chief Compliance Off & Dep Gen ( Receipt For: Primary Other (specify)       Occupation (for Individual) SVP Chief Compliance Off & Dep Gen ( Receipt For: Primary Other (specify)       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)	City		State	Zip Code	Transaction ID	: PR1285752362518						
federal political committee.       26         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.       Occupation (for Individual) AVP Compliance         Receipt For: Primary General Other (specify) ▼       Aggregate Year-to-Date ▼         P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         C. Lucido, Bradley, , MR., Mailing Address 65 Rosewood Dr         City Suffield       State CT       Zip Code O6078-2014         FEC ID number of contributing federal political committee.       Occupation (for Individual) SVP Chief Compliance Off & Dep Gen ( Receipt For: Primary General Other (specify)       Occupation (for Individual) Aggregate Year-to-Date ▼         Primary Complexities       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)	Am	herst	MA	01002-2556								
MASSACHUSETTS MUTUAL LIFE INS.       AVP Compliance         Receipt For:       Avgregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Avgregate Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Lucido, Bradley, , MR.,       Date of Receipt         Mailing Address 65 Rosewood Dr       17         City       State       Zip Code         Suffield       CT       06078-2014         FEC ID number of contributing       C       96         Image: Receipt For:       SVP Chief Compliance Off & Dep Gen C         Name of Employer (for Individual)       Occupation (for Individual)         MASSACHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼         Primary       General       Aggregate Year-to-Date ▼         Primary       General       Occupation (for Individual)         MASSACHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)		5	С			26.9	5					
Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C.       Lucido, Bradley, , MR.,       Date of Receipt         Mailing Address 65 Rosewood Dr       06078-2014       Mount of Each Receipt this Period         City       State       Zip Code       Transaction ID : PR128575396251         Suffield       CT       06078-2014       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       Occupation (for Individual)         MASSACHUSETTS MUTUAL LIFE INS.       SVP Chief Compliance Off & Dep Gen (Primary General Other (specify)       Aggregate Year-to-Date ▼         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)	Nar MAS	ne of Employer (for Individual) SSACHUSETTS MUTUAL LIFE INS.		,	Memo Item							
Primary       General         Other (specify)       P/R Deduction (\$26.95 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C.       Lucido, Bradley, , MR.,         Mailing Address 65 Rosewood Dr       Initial)         City       State         Suffield       CT         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SVP Chief Compliance Off & Dep Gen C       P/R Deduction (\$96.15 Bi-Weekly)	Rec	eipt For:		· · ·	_							
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Lucido, Bradley, , MR.,       Date of Receipt         Mailing Address 65 Rosewood Dr       10       17       2018         City       State       Zip Code       Transaction ID : PR128575396251         Suffield       CT       06078-2014       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       96         Name of Employer (for Individual)       Occupation (for Individual)       Wemo Item         MASSACHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date        P/R Deduction (\$96.15 Bi-Weekly)         Primary       General       2019.15       P/R Deduction (\$96.15 Bi-Weekly)			, 1991 09410		P/R Deduction (\$26.95 Bi-Weekly)							
C.       Lucido, Bradley, , MR.,         Mailing Address 65 Rosewood Dr         City       State       Zip Code         Suffield       CT       06078-2014         FEC ID number of contributing federal political committee.       C       96.         Name of Employer (for Individual)       Occupation (for Individual)       96.         MASSACHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)         Primary       General       2019.15       P/R Deduction (\$96.15 Bi-Weekly)		Other (specify)		, 565.95								
Mailing Address 65 Rosewood Dr       Image: City       State       Zip Code       Transaction ID : PR128575396251         Suffield       CT       06078-2014       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       96.         Name of Employer (for Individual)       Occupation (for Individual)       96.         MASSACHUSETTS MUTUAL LIFE INS.       SVP Chief Compliance Off & Dep Gen C       Memo Item         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)			l) or Full O	Organization Name	Date of Receipt							
Suffield       CT       06078-2014       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       96.         Name of Employer (for Individual)       Occupation (for Individual)       96.         MASSACHUSETTS MUTUAL LIFE INS.       Occupation (for Individual)       Nemo Item         MASSACHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)         Primary       General       2019.15       P/R Deduction (\$96.15 Bi-Weekly)							Y					
FEC ID number of contributing federal political committee.       C       96.         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.       Occupation (for Individual) SVP Chief Compliance Off & Dep Gen C       Memo Item         Primary       General Other (specify)       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)	City		State	Zip Code	Transaction ID	) : PR1285753962518	\$					
federal political committee.       U       96.         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.       Occupation (for Individual) SVP Chief Compliance Off & Dep Gen C         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$96.15 Bi-Weekly)         Other (specify)       2019.15       P/R Deduction (\$96.15 Bi-Weekly)	Sut	field	СТ	06078-2014	Amount of Each	Receipt this Period						
Marie of Enipoyer (for individual)       Occupation (for individual)         MASSACHUSETTS MUTUAL LIFE INS.       SVP Chief Compliance Off & Dep Gen C         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       2019.15		0	С			96.1	5					
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       2019.15				1 ( )	Memo Item	I						
Primary General Other (specify) General Other (specify) P/R Deduction (\$96.15 Bi-Weekly)		oint For:	I									
Other (specify)			Aggregale		P/R Deduction (\$9	96.15 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)		Other (specify)	L	2019.15		<b>,</b> ,						
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IT.			Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	<b>×</b> 11		11b 14	11c 15	12	Г	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for t	he pu	irpose of	soliciting	contri	butio	ns	
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Comm	ittee	Ð					
Α.	Full Name of Individual (Last, First, Middle Initi PHILLIPS, John, , MR.,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 49 Mendon Rd			10 / Y Y Y Y 10 17 2018							
	City Sutton	State MA	Zip Code 01590-1135			tion ID : f Each R					
	FEC ID number of contributing federal political committee.	С						2	26.92		
	Name of Employer (for Individual) Barings LLC		upation (for Individual) aging Director		Merr	no Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.32	P/R I	Deduc	tion (\$26.	92 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi LONG, GEORGE, F, ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 23711 LEGEND CRST			M 1	м 0	/ D D D	/ Y	2018			
	City	State	Zip Code	Tra	insac	tion ID :	PR13154	56462	518		
	SAN ANTONIO	TX	78260-2600	Amo	ount o	f Each R	eceipt th	is Peri	od		
	FEC ID number of contributing federal political committee.	С				-yr- 1		2	25.00		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$12.50 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi Boudreau, Dean, T, MR.,	al) or Full O	rganization Name	Date	e of F	leceipt					
	Mailing Address 6 Cliffside Dr				0	/ D D 17	/ Y	2018		]	
	City Wilbraham	State MA	Zip Code 01095-1620			tion ID : f Each R					
	FEC ID number of contributing federal political committee.	С				y .		1	11.55		
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) eral Risk Consultant		Merr	no Item					
	Receipt For: Primary General Other (specify)	Aggregate	gregate Year-to-Date ▼ 242.55			tion (\$11.	.55 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•••••			y	y	6	63.47	_	
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Ar	y information copied from such Reports and S	tatements ma	ay not be sold or used by any pe	13 rson for th	le pur	pose of	15 soliciting	contribu	tions		
or	for commercial purposes, other than using the	name and a	address of any political committee	to solicit c	contrit	outions fr	om such	n commit	tee.		
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commi	ttee	9					
Α.	Full Name of Individual (Last, First, Middle Init HOLLITZ, SEAN, , ,	ial) or Full O	organization Name	Date of Receipt							
	Mailing Address 2406 29TH ST APT 3A			10		D D 17	/ Y	y y 2018	Y		
	City ASTORIA	State NY	Zip Code 11102-1640					1 <b>4996251</b> is Period			
	FEC ID number of contributing federal political committee.	С				-y		30.	36		
	Name of Employer (for Individual) SELF	Occi Brol	upation (for Individual) ker		Memo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 239.28	P/R De	educti	ion (\$15. <sup>-</sup>	18 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Init NUZUM, DEREK, Cole, ,	ial) or Full O	rganization Name			eceipt					
	Mailing Address 7 MEADOWLARK LN			10		D D 17	/ Y	2018	Ŷ		
	City FAIRMONT	State WV	Zip Code 26554-1244					5146251	-		
	FEC ID number of contributing federal political committee.	C						is Period 30.	_		
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Memo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 239.54	P/R De	educti	on (\$15.1	12 Bi-We	ekly)			
С.	Full Name of Individual (Last, First, Middle Init REINKE, CHRISTOPHER, MARK		organization Name	Date	of Re	eceipt					
	Mailing Address 1616 TREMONT RD			M 10		D D 17	/ Y	ү 2018	Y		
	City COLUMBUS	State OH	Zip Code 43212-1127					15516251 is Period			
	FEC ID number of contributing federal political committee.	С				y	. <u>9</u>	25.	00		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Mem	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R D	educt	ion (\$12.	50 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		▶	Ē		y	. ,	85.	60		

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
II EIVIIZED RECEIPIO		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Aassachusetts Mutual Life I	nsurance Co	mpany Political Action	Committee							
Full Name of Individual (Last, First, Midd BUSH, ALISHA, LYN, ,		rganization Name	Date of Receipt							
Mailing Address 16240 STONEWOLF BL			10 / Y Y Y Y 2018							
City NOBLESVILLE	State IN	Zip Code 46060-1292	Transaction ID : PR1334160762518           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
Full Name of Individual (Last, First, Midd B. PRINCE, Jeffrey, T, MR.,	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 33 Hillside Rd	State	Zip Code	10 / D D / Y Y Y Y 10 17 2018							
Northampton	MA	01060-2119	Transaction ID : PR1334223462518							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.66	P/R Deduction (\$38.46 Bi-Weekly)							
Full Name of Individual (Last, First, Midd C. Wellman, Philip, S, MR.,	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 150 N Beacon St			10 / D D / Y Y Y Y 10 17 2018							
City Hartford	State CT	Zip Code 06105-2247	Transaction ID : PR1342766162518           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		26.92							
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) & Chief Comp Officer Inst. Funds	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	al)		90.38							
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175			Use separate schedule(s)	(check onl	y one)	-						
116	MIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b 14	11c 15	12	17				
	r information copied from such Reports and St or commercial purposes, other than using the					soliciting						
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committ	ee							
Α.	Full Name of Individual (Last, First, Middle Initi TAYLOR, PATRICK, MICHAEL, ,	al) or Full O	rganization Name	Date o	Date of Receipt							
-	Mailing Address 26376 ROMANCE PT			10	10 17 2018 Transaction ID : PR1355586162518							
	City SAN ANTONIO	State TX	Zip Code 78260-8003		<b>action ID :</b> t of Each F							
	FEC ID number of contributing ederal political committee.	С					41	.08				
:	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	м	emo Item							
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 217.87	P/R Ded	uction (\$20	.54 Bi-W	eekly)					
	Full Name of Individual (Last, First, Middle Initi Fanning, Michael, R, MR.,	al) or Full O	rganization Name	Date o	f Receipt							
-	Mailing Address 140 Colonial Ave			10	, 17		2018	Y				
	City	State	Zip Code		action ID :							
-	North Andover	MA	01845-6349	Amoun	t of Each F	Receipt th	nis Perio	d				
	FEC ID number of contributing rederal political committee.	С				-7	192	2.30				
ſ	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) P - MassMutual U.S.	Memo Item								
I	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4038.30	P/R Deduction (\$192.30 Bi-Weekly)								
	Full Name of Individual (Last, First, Middle Initi Goldman, Victor, B., ,	al) or Full O	rganization Name	Date o	f Receipt							
-	Mailing Address 12030 N 62ND ST			10 <sup>M</sup>	/ D 17		2018	Y				
	City SCOTTSDALE	State AZ	Zip Code 85254-4953		saction ID : t of Each F							
	FEC ID number of contributing rederal political committee.	С			7	. ,	96	6.15				
	Name of Employer (for Individual) SELF		upation (for Individual) eral Agent		emo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2019.15	P/R Dec	luction (\$96	.15 Bi-W	eekly)					
รเ	JBTOTAL of Receipts This Page (optional)				,	7	329	0.53				
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IТ		Use separate schedule(s)			(C	(check only one)							
11	EMIZED RECEIPTS			each category of the etailed Summary Page		<b>X</b> 11a 13		11b 14	11c		12 16	17	
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not ddres	be sold or used by any pe s of any political committee	rsor to s	n for the	pur ntrit	pose of	solicitin	ig cor	ntributi	ons	
$\setminus$	NAME OF COMMITTEE (In Full)												
	Massachusetts Mutual Life Insur			•	Cc	ommitt	ee						
Α.	Full Name of Individual (Last, First, Middle Initi METKIFF, CHRISTOPHER, JAMES, ,	al) or Full O	rganiz	zation Name	Date of Receipt								
	Mailing Address 1580 SNUFF MILL RD					<sup>M</sup> 10	1	D D 17			)18	Y	
	City HOCKESSIN	State DE	2	Zip Code 19707-9641				ion ID : Each R				3	
	FEC ID number of contributing federal political committee.	C							-		25.0	0	
	Name of Employer (for Individual) SELF		•	n (for Individual) Agent		М	emo	o Item					
	Receipt For:	Aggregate	Year-	to-Date ▼ 250.00		P/R Ded	lucti	on (\$12.	50 Bi-W	/eekly	/)		
В.	Full Name of Individual (Last, First, Middle Initi MANN, JENNIFER, PAIGE, ,	itial) or Full Organization Name					Date of Receipt						
	Mailing Address 1151 W 14TH PL UNIT 406			10	/	D D D 17			18 18	Y			
	City CHICAGO	State IL	Zip Code 60608-2850				ion ID :						
	FEC ID number of contributing federal political committee.	C						Each R	eceipt t	nis p	25.0	0	
	Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent					emo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					P/R Deduction (\$12.50 Bi-Weekly)						
С.	Full Name of Individual (Last, First, Middle Initi Barrett, Hugh, , MR.,	al) or Full O	rganiz	zation Name		Date o	f Re	eceipt					
	Mailing Address 58 Pondview Dr					<sup>M</sup> 10	1	D D 17			)18 <sup>°</sup>	Y	
	City	State MA		Zip Code 01118-1145				ion ID :				3	
	Springfield		_	01116-1145		Amoun	t of	Each R	eceipt t	his P	eriod		
	FEC ID number of contributing federal political committee.	С	_			Ľ.		y			19.2	5	
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		•	n (for Individual) ernment Relations		M	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 404.25				P/R Deduction (\$19.25 Bi-Weekly)							
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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	, (	$\overrightarrow{\mathbf{X}}$ 11a       11b       11c       12         13       14       15       16       17							
	y information copied from such Reports and Sta for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	ompany Political Acti	ion Co	ommittee							
Α.	Mailing Address 2400 EVENING STAR DR				Date of Receipt							
	City PEARLAND	State TX	Zip Code 77584-3775	-	Transaction ID : PR1391531662518							
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period 30.00							
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 292.90		P/R Deduction (\$15.00 Bi-Weekly)							
B.	Full Name of Individual (Last, First, Middle Initia RYAN, Paula, T, MS.,	al) or Full O	Organization Name		Date of Receipt							
	Mailing Address 4 Ridge Rd	Otata			10 / D D / Y Y Y Y 10 17 2018							
	City Simsbury	State CT	Zip Code 06070-2134	-	Transaction ID : PR1391580662518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			38.46							
	Name of Employer (for Individual) Barings LLC		cupation (for Individual) naging Director		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.66		P/R Deduction (\$38.46 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia RIXHAM, Stephen, , MR.,	al) or Full O	Organization Name		Date of Receipt							
	Mailing Address 2526 Sherwood Ave	Chata	Zin Oodo		10 / D D / Y Y Y Y 10 17 2018							
	City Charlotte	State NC	Zip Code 28207-2547	-	Transaction ID : PR1417160662518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			9.62							
	Name of Employer (for Individual) Barings LLC Receipt For:	Man	upation (for Individual) naging Director		Memo Item							
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02		P/R Deduction (\$9.62 Bi-Weekly)							
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Any info or for c	ormation copied from such Reports and Sta ommercial purposes, other than using the r	Itements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for the	purpo	se of s	oliciting	contrit	oution	ns	
	IE OF COMMITTEE (In Full)		,,								
	ssachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee						
	Name of Individual (Last, First, Middle Initia ODIN, DAVID, , ,	al) or Full Oi	rganization Name	Date of Receipt							
Maili	ng Address 1391 VIEW DR			10 / D D / Y Y Y Y Y 10 17 2018							
City SAN	LEANDRO	State CA	Zip Code 94577-5336				R14171				
	ID number of contributing ral political committee.	С			-		-9-	5	0.00		
SEL			ipation (for Individual) rance Agent		lemo l	tem					
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Dec	duction	n (\$25.0	0 Bi-We	ekly)			
	Name of Individual (Last, First, Middle Initia on, Jack, , MR.,	al) or Full Oi	rganization Name	Date of Receipt							
	ng Address 11 Woodside Dr			10 / Y Y Y Y 2018							
City		State	Zip Code	Trans	saction	n ID : P	R14346	383625	518		
Wilb	raham	MA	01095-2741	Amour	nt of E	ach Re	ceipt th	s Perio	bd		
	ID number of contributing ral political committee.	С			,		- 9	1	6.70		
	e of Employer (for Individual) sachusetts Mutual Life Insurance Co		upation (for Individual) Sales	Memo Item							
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 350.70	P/R Deduction (\$16.70 Bi-Weekly)							
	Name of Individual (Last, First, Middle Initia Ccaro, John, , MR.,	al) or Full O	rganization Name	Date c	of Rece	eipt					
Maili	ng Address 18 Anna Marie Ln			M N 10	/	D D 17	/ Y	2018	Y	]	
City E Lo	ongmeadow	State MA	Zip Code 01028-3018				R14346				
	ID number of contributing ral political committee.	С			,			7	6.95	]	
Mas	e of Employer (for Individual) sachusetts Mutual Life Insurance Co		ipation (for Individual) - MassMutual Financial Network		lemo I	ltem					
	eipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1615.95	P/R Dec	duction	n (\$76.9	95 Bi-We	ekly)			
SUBTO	<b>DTAL</b> of Receipts This Page (optional)		▶		,		9	14	3.65		
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ITEMIZED REC	EIPTS	;	

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	<b>'</b> 11a		11b	11c	12				
		, ,		13		14	15	16	17			
Any information copied from such Reports or for commercial purposes, other than usi	and Statements maing the name and a	ay not be sold or used by any p ddress of any political committee	erson e to so	for the plicit co	purp ntrib	oose of utions f	soliciting from suc	j contribu h commi	utions ttee.			
NAME OF COMMITTEE (In Full)			-									
Aassachusetts Mutual Life	Insurance Co	mpany Political Action	Cor	nmitt	ee							
Full Name of Individual (Last, First, Mid A. HELD, PHILLIP, , ,	dle Initial) or Full O	rganization Name		Date o	f Re	ceipt						
Mailing Address 5010 MEADOWBROOK	K RD			<sup>M</sup> 10	/	D 17	) / Y	ү ү 2018	Y			
City	State	Zip Code		Trans	sacti	on ID :	PR1434	6502625	18			
BUFFALO	NY	14221-4214		Amoun	t of	Each R	Receipt th	nis Perioo	b			
FEC ID number of contributing federal political committee.	С					,	-	25	.00			
Name of Employer (for Individual)	Occi	upation (for Individual)	_	М	emo	Item						
SELF		rance Agent										
Receipt For:		Year-to-Date ▼										
Primary General	Aggregate		а I в	P/R Ded	luctic	on (\$12.	.50 Bi-W	eeklv)				
Other (specify) ▼		250.00	4									
Full Name of Individual (Last, First, Mid B. BARGHELAME, ALI, , ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1410 S ELIZABETH ST												
				10	ľ	17	, ,	2018				
City	State	Zip Code		Trans	acti	on ID :	PR1434	6585625 <sup>,</sup>	18			
DENVER	СО	80210-2423						nis Period				
FEC ID number of contributing federal political committee.	С					7	-	25	.00			
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		М	emo	Item						
Receipt For:		Year-to-Date ▼	-									
Primary General	Aggregate		P/R Deduction (\$12.50 Bi-Weekly)									
Other (specify) <b>v</b>		250.00										
Full Name of Individual (Last, First, Mid C. COUTU, David, J, MR.,	dle Initial) or Full O	rganization Name		Date o	f Re	ceipt						
Mailing Address 1 Mellissa Cir				10 <sup>M</sup>	/	D 17		y y 2018	Y			
City	State	Zip Code		Trans	sacti	on ID :	PR1479	4038625	18			
Greenville	RI	02828-1025		Amoun	t of	Each R	Receipt th	nis Period	b			
FEC ID number of contributing federal political committee.	С					,	. ,	38	.46			
Name of Employer (for Individual)	0.00	upation (for Individual)	_	м	emo	Item						
Barings LLC		aging Director		- H								
Receipt For:	I	Year-to-Date ▼	_									
Primary General	Aggregate		P/R Deduction (\$38.46 Bi-Weekly)									
Other (specify)		807.66	1	,		(¢00						
SUBTOTAL of Receipts This Page (option	nal)		►			,	. ,	88	.46			

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ITEMIZED RECEIPTS			Use separate schedule(s)			(check only one)						
				or each category of the Detailed Summary Page		<b>×</b> 11a 13		11b	11c		12 16	17
Any or fo	information copied from such Reports and Sta r commercial purposes, other than using the r	tements m	l nay n addre	ot be sold or used by any pe ess of any political committee	erson to s	for the	pur	pose of	soliciting	g con	tributi	ons
<u> </u>	AME OF COMMITTEE (In Full)			<i>,</i> ,								
	Assachusetts Mutual Life Insura	ance Co	omp	pany Political Action	Co	mmit	tee	!				
	ull Name of Individual (Last, First, Middle Initia Putnam, Roger, , MR.,	l) or Full C	Orgar	nization Name		Date c	of Re	eceipt				
M	ailing Address 8 The Glade					10	1 /	D 17	D / Y	ү 20	ү 18	Y
	ity iimsbury	State CT		Zip Code 06070-1041	_				PR1479 Receipt th			
	EC ID number of contributing deral political committee.	С				Ē		-	1 41		96.1	5
Μ	ame of Employer (for Individual) assachusetts Mutual Life Insurance Co		•	ion (for Individual) Isurance Operations		N	lemo	o Item				
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Yea	r-to-Date ▼ 2019.15		P/R Dec	ducti	on (\$96	.15 Bi-W	eekly)	)	
	ull Name of Individual (Last, First, Middle Initia CIRAVOLO, CHARLES, THOMAS, ,	l) or Full C	Orgar	nization Name		Date c	of Re	eceipt				
M				10 / D D / Y Y Y Y 10 17 2018						Y		
	ity	State		Zip Code					PR1479			
H	UNTINGTON STATION	NY		11746-4707	_	Amour	nt of	Each F	Receipt th	nis Pe	eriod	
	EC ID number of contributing deral political committee.	С	_					-y 1	-		25.0	0
	ame of Employer (for Individual) ELF		•	tion (for Individual) ce Agent		N	lemo	o Item				
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Yea	r-to-Date ▼ 250.00		P/R Dec	ducti	on (\$12.	.50 Bi-We	eekly)	J	
	ull Name of Individual (Last, First, Middle Initia BOWMAN, LEE, , ,	ll) or Full C	Orgar	nization Name		Date c	of Re	eceipt				
M	ailing Address 600 RIVER OAKS LN			-		<sup>M</sup> 10	1 /	D 17		20 <sup>°</sup>	18 <sup>°</sup>	Y
	ity CHARLOTTE	State NC		Zip Code 28226-6877					PR1491 Receipt th			}
	EC ID number of contributing deral political committee.	С				Ľ.		y .	. ,		27.6	8
S	ame of Employer (for Individual) ELF		•	ion (for Individual) e Agent		N	lem)	o Item				
R	eceipt For: Primary General Other (specify)	Aggregate	e Yea	r-to-Date ▼ 244.64		P/R Deo	ducti	ion (\$13	.84 Bi-W	eekly	)	
SUI	<b>BTOTAL</b> of Receipts This Page (optional)							y	. ,		148.8	3
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FOR LINE NUMBER:

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	-	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12			
Any information copied from such Reports a	nd Statements ma	Ay not be sold or used by any p	13         14         15         16           berson for the purpose of soliciting contributions			
· · ·	g the name and a	ddress of any political committe	e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life II	nsurance Co	mpany Political Action	n Committee			
Full Name of Individual (Last, First, Middl A. GREENBERG, DAVID, FRANKLYN		rganization Name	Date of Receipt			
Mailing Address 6103 AQUA AVE APT 10	6		M M / D D / Y Y Y Y 10 17 2018			
City MIAMI BEACH	State FL	Zip Code 33141-5876	Transaction ID : PR1491604462518 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		25.00			
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)			
Full Name of Individual (Last, First, Middl B. <u>GUEVARA, JOSEPH, VINCENT</u>	,,	rganization Name	Date of Receipt			
Mailing Address 1200 FRANCISCO ST AF			10 17 2018			
City SAN FRANCISCO	State CA	Zip Code 94123-2318	Transaction ID : PR1491619862518 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		25.00			
Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)			
Full Name of Individual (Last, First, Middl C. Russell, Douglas, , MR.,	e Initial) or Full C	rganization Name	Date of Receipt			
Mailing Address 4 Craigie St			10 / Y Y Y Y 10 17 2018			
City Cambridge	State MA	Zip Code 02138-3470	Transaction ID : PR1500908562518 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		192.30			
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) aging Director, Head of MassMut	tua			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 4038.30	P/R Deduction (\$192.30 Bi-Weekly)			
SUBTOTAL of Receipts This Page (optiona	l)		242.30			

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

FEC Schedule A (Form 3X) Rev. 06/2016

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		Use separate schedule(s)			(check only one)						
11			for each category of the Detailed Summary Page		<b>X</b> 11a 13	$\vdash$	11b	11c 15		2	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by an address of any political comm	y perso ittee to	n for the	purp	ose of s	soliciting	g cont	ributio	ons
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	ompany Political Acti	on Co	ommitt	ee					
Α.	Full Name of Individual (Last, First, Middle Initi Harrigan, Bernadette, , MS.,	ial) or Full O	Drganization Name		Date of Receipt						
	Mailing Address 66 Goodell St				<sup>M</sup> 10	/	D D 17	/ Y	Y 201	18	ſ
	City Belchertown	State MA	Zip Code 01007-9741					PR1500			
	FEC ID number of contributing federal political committee.	С					<b>y</b>			9.6	5
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		cupation (for Individual) P & Counsel		М	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 202.65		P/R Ded	uctio	n (\$9.65	5 Bi-Wee	ekly)		
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	Drganization Name		_						
В.	Sirko, Gregory, , , Mailing Address 118 ALTON RD				Date of	f Rec	ceipt	/ Y	201	Y	
	City	State	Zip Code		Trans	actic	on ID : F	PR15009			
	NASHVILLE	TN	37205-4202					eceipt th			
	FEC ID number of contributing federal political committee.	С					y			33.3	3
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent		М	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 233.33		P/R Ded	uctio	n (\$33.3	3 Month	nly)		
с.	Full Name of Individual (Last, First, Middle Initi RIBACK, MICHAEL, A., ,	ial) or Full O	Drganization Name		Date o	f Rec	ceipt				
	Mailing Address 200 W GRAND AVE APT 2502				<sup>M</sup> 10		D D 17	L	y 201	8	
	City CHICAGO	State IL	Zip Code 60654-7790	-				PR1500			
	FEC ID number of contributing federal political committee.	С								36.00	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		М	emo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 245.30		P/R Dec	luctio	ın (\$18.0	00 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)				Γ.		9	,		78.98	3
т	OTAL This Period (last page this line number of	only)					,	-		-	

## SCHEDULE A (FEC Form 3X) \_\_\_\_\_

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		Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	<b>X</b> 11a 13	11b 14	11c 15	12 16	17		
	y information copied from such Reports and S for commercial purposes, other than using the					soliciting				
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committe	ee					
Α.	Full Name of Individual (Last, First, Middle Init Smith, Cale, P., ,	tial) or Full O	rganization Name	Date of	Receipt					
	Mailing Address 1956 LONGWOOD DR			10 <sup>M</sup>	/ D D 17	/ Y	2018	Y		
	City BATON ROUGE	State LA	Zip Code 70808-1247		action ID : I					
	FEC ID number of contributing federal political committee.	С				-	192.	30		
	Name of Employer (for Individual) SELF		upation (for Individual) neral Agent	Me	emo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4038.30	P/R Ded	uction (\$192	2.30 Bi-W	/eekly)			
	Full Name of Individual (Last, First, Middle Init YOUNG, John, M, MR.,	tial) or Full O	rganization Name	Date of	Receipt					
	Mailing Address 7 Lampercock Ln			10	/ D D 17	/ Y	y y 2018	Y		
	City	State RI	Zip Code		action ID : I					
	Lincoln FEC ID number of contributing federal political committee.	C	02865-4201	Amount	of Each Re	eceipt th	lis Period 26.	_		
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Me	emo Item					
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 565.32	P/R Dedu	uction (\$26.9	92 Bi-We	ekly)			
	Full Name of Individual (Last, First, Middle Init Viviano, Mark, , MR.,	tial) or Full O	rganization Name	Date of	Receipt					
	Mailing Address 105 Northfield Rd			10 <sup>M</sup>	M M / D D / Y Y Y Y Y					
	City Longmeadow	State MA	Zip Code 01106-2143		of Each Re					
	FEC ID number of contributing federal political committee.	С			- y -	9	19.	25		
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) P Investment Operations	Me	emo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 404.25	P/R Ded	uction (\$19.)	25 Bi-We	ekly)			
⊢	JBTOTAL of Receipts This Page (optional)		· ·		· · ·		238.4	47		

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)         ▲         11a       11b         11b       11c         12         13       14         15       16         17
	y information copied from such Reports and Sta for commercial purposes, other than using the			
$\rangle$	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	Committee		
Full Name of Individual (Last, First, Middle Initial) or Fu A. True, Erica, J, MS.,			Organization Name	Date of Receipt
	Mailing Address 47 Cottage St			10 / D D / Y Y Y Y 10 17 2018
	City Belchertown	State MA	Zip Code 01007-9666	Transaction ID : PR1541058662518
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
	Massachusetts Mutual Life Insurance Co	Hea	ad of Presales and Compensation	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initi GORDON, MICHAEL, B, ,	al) or Full (	Organization Name	Date of Receipt
Mailing Address 4909 DOVER CT NW				10 17 2018
	City	State	Zip Code	Transaction ID : PR1541746762518
	ALBUQUERQUE	NM	87114-5449	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF		cupation (for Individual) surance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
С.	Full Name of Individual (Last, First, Middle Initi HERNANDEZ, CARLOS, , ,	al) or Full (	Drganization Name	Date of Receipt
	Mailing Address 8600 SW 84TH AVENUE			10 / Y Y Y Y 10 17 2018
	City	State FL	Zip Code	Transaction ID : PR1541766162518
	MIAMI		33143-6912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		66.68
			cupation (for Individual) urance Agent	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 666.66	P/R Deduction (\$33.34 Bi-Weekly)
⊢	UBTOTAL of Receipts This Page (optional)			101.30
Т	OTAL This Period (last page this line number o	nly)	····· •	<u> </u>

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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			Use separate schedule(s)	(check only one)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
$\langle \rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee					
Α.	Full Name of Individual (Last, First, Middle Initi MARTINEZ, MARGEE, DINARIS, ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 1200 ALHAMBRA CIR			10 / Y Y Y Y 2018					
	City CORAL GABLES	State FL	Zip Code 33134-3532	Transaction ID : PR1541766462518 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		41.68					
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.67	P/R Deduction (\$20.84 Bi-Weekly)					
D	Full Name of Individual (Last, First, Middle Initi Sweeney, Brian, S, MR.,	ial) or Full O	rganization Name	Date of Respiret					
ь.	Mailing Address 161 Cornerstone Dr			Date of Receipt 10 17 2018					
	City	State	Zip Code	Transaction ID : PR1554644262518					
	South Windsor	СТ	06074-6302	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		11.54					
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) jional Sales Manager	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 242.34	P/R Deduction (\$11.54 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initi HUFF, WILLIAM, B, ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 2617 E 3330 S	1		10 / Y Y Y Y 10 17 2018					
	City ST GEORGE	State UT	Zip Code 84790-7291	Transaction ID : PR1554873662518 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		30.36					
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 239.28	P/R Deduction (\$15.18 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		►	83.58					
Т	OTAL This Period (last page this line number c	only)							

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
II EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1					
Any information copied from such Report or for commercial purposes, other than u	s and Statements ma sing the name and a	ay not be sold or used by any p ddress of any political committed	person for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
Aassachusetts Mutual Life	e Insurance Co	mpany Political Action	n Committee					
Full Name of Individual (Last, First, M LEONARD, Taryn, , MS.,	iddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 49 Magazine St			10 / Y Y Y Y 2018					
City Cambridge	State MA	Zip Code 02139-3909	Transaction ID : PR1560527862518 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		26.95					
Name of Employer (for Individual) Barings LLC		upation (for Individual) aging Director	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.95	P/R Deduction (\$26.95 Bi-Weekly)					
Full Name of Individual (Last, First, M B. Picken, Todd, , MR.,	iddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 27 Grey Oak Ln			10 / Y Y Y Y 2018					
City	State	Zip Code	Transaction ID : PR1560539262518					
Whately	MA	01093	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		15.40					
Name of Employer (for Individual) Massachusetts Mutual Life Insurance C	-	upation (for Individual) porate Vice President - Treasurer	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.40	P/R Deduction (\$15.40 Bi-Weekly)					
Full Name of Individual (Last, First, M C. Jaeggi, Rachel, , MS.,	iddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 29 Hoffmann Rd			10 / D D / Y Y Y Y 2018					
City Canton	State CT	Zip Code 06019-2151	Transaction ID : PR1564484362518 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		38.50					
Name of Employer (for Individual) Massachusetts Mutual Life Insurance C		upation (for Individual) President - Operations	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 808.50	P/R Deduction (\$38.50 Bi-Weekly)					
SUBTOTAL of Receipts This Page (opti-	onal)		80.85					
TOTAL This Period (last page this line r	number only)							

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

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ITEMIZED RECEIPTS			(check only one)							
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Ar	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	ay not be sold or used by any per	rson for the	e pur	pose of	15 soliciting	g contr	6 ributic	17 ons
					onun		on suc	T COIII	millee	
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	ttee					
Α.	Full Name of Individual (Last, First, Middle Initi DAMICO, ROBERT, PAUL, ,	al) or Full O	rganization Name	Date	of Re	eceipt				
	Mailing Address 1259 FIVE MILE LINE RD		10 17 2018							
	City WEBSTER	State NY	Zip Code 14580-2545			ion ID : Each R				
	FEC ID number of contributing federal political committee.	С					- 75		25.00	)
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	י 🗆	Memo	o Item				
	Receipt For: Primary General	Aggregate	Year-to-Date V	P/R De	educti	on (\$12.	50 Bi-We	eeklv)		
	Other (specify) ▼	L	250.00			- ()		,,		
в.	Full Name of Individual (Last, First, Middle Initi DEBLOIS, William, , MR.,	al) or Full O	rganization Name	Date	of Re	eceipt				
_	Mailing Address 11 Jameson Dr	10 / Y Y Y Y 10 17 2018								
	City	State	Zip Code			ion ID :				
	Rehoboth	MA	02769-2039	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		I L		-			38.50	)
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	י 🏼 [	Memo	o Item				
	Receipt For:	Aggregate	Year-to-Date <b>V</b>	_						
	Other (specify) ▼		808.50	P/R De	ductio	on (\$38.	50 Bi-We	eekly)		
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Allen, Kathleen, M, MS.,	al) or Full O	rganization Name	Date	of Re	eceipt				
	Mailing Address 149 Lincoln Rd			M 10		D D D 17	/ Y	2018		Γ
	City	State	Zip Code	Trar	nsact	ion ID :	PR1596	85696	2518	
	Longmeadow	MA	01106-2641	Amou	nt of	Each R	eceipt th	nis Per	riod	
	FEC ID number of contributing federal political committee.	С				9	,		15.38	3
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occu AVP	upation (for Individual) PHR	ים [	Memo	o Item				
	Receipt For:	Aggregate	Year-to-Date ▼ 322.98	P/R De	educti	on (\$15.	38 Bi-W	eekly)		
s	UBTOTAL of Receipts This Page (optional)		•			,	9		78.88	;

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TTEMIZED RECEIPTS	for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17
	d Statements may not be sold or used by any per the name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life In:	surance Company Political Action	Committee
Full Name of Individual (Last, First, Middle A. WEEKS, JOHN, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 18 PALLADIO PARK		10 / Y Y Y Y Y 10 17 2018
City O FALLON	StateZip CodeMO63368-8510	Transaction ID : PR1602263862518 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
B. SIKARAS, JOHN, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 8516 W CLARA DR		10 17 2018
City NILES	State Zip Code IL 60714-2308	Transaction ID : PR1602274262518 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	36.60
Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 226.79	P/R Deduction (\$18.30 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. Valle-Yanez, Lorie, , MS.,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 575 Mountain Rd	State Zip Code	10 17 2018
City West Hartford	StateZip CodeCT06117-1842	Transaction ID : PR1606911962518 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) Vice President - Diversity & Inclusion	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 807.66	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	►	100.06

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

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)				
11			for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17				
	y information copied from such Reports and Si for commercial purposes, other than using the							
$\left[ \right]$	NAME OF COMMITTEE (In Full)							
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee				
Α.	Full Name of Individual (Last, First, Middle Init Cwikla, Thomas, , MR.,	ial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 9 Deer Mdw			10 17 2018				
	City	State	Zip Code	Transaction ID : PR1606916762518				
	Tolland	СТ	06084-3256	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		19.25				
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item				
	Massachusetts Mutual Life Insurance Co		ernal Wholesaler					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General	00 0		P/R Deduction (\$19.25 Bi-Weekly)				
	Other (specify) <b>v</b>		405.75					
	Full Name of Individual (Last, First, Middle Init BENOIT, GEORGE, , , JR	ial) or Full O	rganization Name	Date of Receipt				
Ъ.	Mailing Address 69 JILLIAN WAY							
	Maining Address 69 JILLIAN WAT			10 17 2018				
	City	State	Zip Code	Transaction ID : PR1619196062518				
	WESTPORT	MA	02790-4231	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		28.16				
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item				
	Receipt For:		Year-to-Date ▼					
	Primary General	, iggi oguto		P/R Deduction (\$14.08 Bi-Weekly)				
	Other (specify)	L	443.65					
с.	Full Name of Individual (Last, First, Middle Init KNAPP, Mark, , MR.,	ial) or Full O	rganization Name	Date of Receipt				
	Mailing Address 4237 Via Marina Apt 113			M M / D D / Y Y Y Y 10 17 2018				
	City	State	Zip Code	Transaction ID : PR1637390762518				
	Marina Del Rey	CA	90292-4552	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.				10.00				
	Name of Employer (for Individual) Barings LLC		upation (for Individual) aging Director	Memo Item				
	Receipt For:	1		-				
	Primary General Aggregate Year-to-Date ▼			P/R Deduction (\$10.00 Bi-Weekly)				
	Other (specify)	L	210.00					
⊢	UBTOTAL of Receipts This Page (optional)			57.41				

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			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		1b 4	11c 15		2 6	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the to solicit co	e purpo ontribut	ions fro	oliciting	i conti n com	ributio imitte	ons	
$\setminus$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi CARVAJAL, HUGO, XAVIER, ,	rganization Name	Date o	of Rece	eipt						
	Mailing Address 79 RIDGEVIEW DR			10 / D D / Y Y Y Y 10 17 2018							
	City WOODLAND PARK	State NJ	Zip Code 07424-2719			n ID : P ach Re					
	FEC ID number of contributing federal political committee.	С		25.00							
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initi GARABEDIAN, JIM, , ,	al) or Full O	rganization Name	Date o	of Rece	eipt					
	Mailing Address 1020 THACKERY LN					D D 17	/ Y	2018	8	ŕ	
	City	State	Zip Code	Tran	saction	n ID : P	R16374	13836	2518		
	NAPERVILLE	IL	60564-3143	Amour	nt of Ea	ach Re	ceipt th	is Per	riod		
	FEC ID number of contributing federal political committee.	С		25.00							
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		lemo l	tem					
	Receipt For:	Aggregate	Year-to-Date ▼ , 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HESS, VAN, MICHAEL, ,					eipt					
	Mailing Address 555 35TH ST				10 / D D / Y Y Y Y 10 17 2018						
	City MANHATTAN BEACH	State CA	Zip Code 90266-3407			<b>n ID : P</b> ach Re					
	FEC ID number of contributing federal political committee.	С							56.38	В	
	Name of Employer (for Individual) SELF	Occi Insu	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 487.22	P/R Deduction (\$28.19 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•	[	7		9	1	06.38	3	
т	OTAL This Period (last page this line number of	only)	•				-		-		

FOR LINE NUMBER:

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IT.			Use separate schedule(s		(check only one)								
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		¥ 11a 13	11b	11c	12	Г	17			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by a Iddress of any political com	any perso mittee to	on for the	purpose of	soliciting	g contri	ibutio	ns			
$\square$	NAME OF COMMITTEE (In Full)	-			•••								
	Massachusetts Mutual Life Insur	rance Co	mpany Political Ac	tion C	ommitt	ee							
<u>к</u>	Full Name of Individual (Last, First, Middle Initi HICKS, RYAN, CHARLES, ,	Date of	Receipt										
	Mailing Address 113 GREEN VALLEY LN				<sup>M</sup> 10	/ D 17	) / Y	2018	Y Y B	]			
	City CANONSBURG	State PA	Zip Code 15317-3543			action ID : of Each F							
FEC ID number of contributing federal political committee.			C			41.68							
	Name of Employer (for Individual) SELF	ual) Occupation (for Individual) Insurance Agent			M	emo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.67		P/R Deduction (\$20.84 Bi-Weekly)								
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name STEVENS, JACK, , ,					Receipt							
	Mailing Address 9 WILLIAM STREET				10 <sup>M</sup>	/ D 17	) / Y	2018		1			
	City	State NY	Zip Code			action ID :							
	CAZENOVIA FEC ID number of contributing federal political committee.	NY 13035-1121				Amount of Each Receipt this Period							
	Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.01				P/R Deduction (\$34.99 Bi-Weekly)							
<u>с</u> .	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MARTIN, TIMOTHY, , ,					Receipt							
	Mailing Address 7660 HOLCOMB RD					10 / Y Y Y Y 10 17 2018							
	City CLARKSTON	State MI	Zip Code 48348-4344			action ID :							
	FEC ID number of contributing federal political committee.	C				of Each F			26.44				
	Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent			Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 247.09				uction (\$13	.22 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)			►			. ,	13	38.10				
Т	OTAL This Period (last page this line number c	only)		····· <b>Þ</b>					-				

## SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

# Use separate schedule(s)

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(check only one)

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements ma	y not be sold or used by any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Aassachusetts Mutual Life I	nsurance Co	mpany Political Action	Committee						
Full Name of Individual (Last, First, Midd A. GRIFFITH, MATTHEW, ASHBROC	Date of Receipt								
Mailing Address 517 NW 156TH CIR	10 17 Y Y Y Y 2018								
City	State	Zip Code	Transaction ID : PR1645265362518						
EDMOND	OK	73013-2087	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		66.68						
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item						
SELF	Insu	rance Agent							
Receipt For:	I	Year-to-Date ▼	-						
Primary General	7.99109410		P/R Deduction (\$33.34 Bi-Weekly)						
Other (specify)		666.66							
Full Name of Individual (Last, First, Midd B. Stempel, Dennis, , MR.,	Date of Receipt								
Mailing Address 85 Christopher Ln	ing Address 85 Christopher Ln								
City	State	Zip Code	Transaction ID : PR1651025562518						
Feeding Hills	MA	01030-2616	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		11.55						
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		ipation (for Individual) or Vice President & General Aud	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 242.55	P/R Deduction (\$11.55 Bi-Weekly)						
Full Name of Individual (Last, First, Midd C. Ferrero, Amy, L, MS.,	Date of Receipt								
Mailing Address 42 Stonehill Rd	10 / D D / Y Y Y Y 10 17 2018								
City	State	Zip Code	Transaction ID : PR1663791262518						
E Longmeadow	MA	01028-1367	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		26.92						
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		pation (for Individual) President - Operations	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)						
SUBTOTAL of Receipts This Page (option	al)	•	105.15						

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

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171			Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12	47		
	y information copied from such Reports and for commercial purposes, other than using th					pose of a					
			duress of any political committee		JUITIT		UIII SUCI	1 Commu	<u>.</u>		
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Inst	urance Co	mpany Political Action	Commi	ttee	•					
Α.	Full Name of Individual (Last, First, Middle Ir Spaulding, Abigail, Sinks, ,	nitial) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 2818 SUGAR TREE RD				M /	D D 17	/ Y	y y 2018	Y		
	City NASHVILLE	State TN	Zip Code 37215-1910		Transaction ID : PR1663810162518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C						133.3	33		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.33	P/R Deduction (\$133.33 Monthly)							
B.	Full Name of Individual (Last, First, Middle Ir ROSEN, PAUL, ERIC, ,	hitial) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 738 NE 17TH TER				10 / Y Y Y Y 10 17 2018						
	City FORT LAUDERDALE	State FL	Zip Code 33304-3427		Transaction ID : PR1663824062518 Amount of Each Receipt this Period				3		
	FEC ID number of contributing federal political committee.	С		25.00							
	Name of Employer (for Individual) SELF	Occ Bro	upation (for Individual) ker		Memo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R De	P/R Deduction (\$12.50 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MORRIS, MELISSA, J, ,			Date	of Re	eceipt					
	Mailing Address 4266 20TH ST SW			<sup>™</sup> 10	)	D D 17	L	2018			
	City WAVERLY	State MN	Zip Code 55390-5004					82576251	8		
			33390-3004	Amou	unt of	Each Re	eceipt th	is Period			
	FEC ID number of contributing federal political committee.	С		ΙĻ	_	y	5	27.5	55		
	Name of Employer (for Individual) SELF	Occi Insu	1 U	Mem	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	P/R D	educt	ion (\$16.2	25 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)		•		-	y	9	185.8	38		

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

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
11	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	a 🗌	11b 14	11c	12	Г	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for th	ne pu contri	rpose of	soliciting	contrib	outio	ns
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Comm	ittee	<b>;</b>				
Α.	Full Name of Individual (Last, First, Middle Initi LAFFIE, SCOTT, , ,	ial) or Full O	Organization Name	Date	of R	eceipt				
	Mailing Address 450 E 83RD ST #21A			M 10		D D 17	/ Y	2018		
	City NEW YORK	State NY	Zip Code 10028-6293			tion ID : Each R				
	FEC ID number of contributing federal political committee.	С						2	5.00	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Mem	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R D	educt	ion (\$12.	50 Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Initi PERRY, JONATHAN, SAMUEL, ,	ial) or Full O	Organization Name	Date	of R	eceipt				
	Mailing Address 15 BROAD ST APT 2826			1		D D D 17	/ Y	2018	Y	
	City	State	Zip Code	Tra	nsac	tion ID :	PR16638	29362	518	
	NEW YORK	NY	10005-1991	Amo	unt of	Each R	eceipt th	is Perio	bc	
	FEC ID number of contributing federal political committee.	С				-	-7	3	3.32	
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent		Mem	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.37	P/R D	educt	ion (\$16.)	66 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initi Craddock, Geoffrey, , MR.,	ial) or Full O	Organization Name	Date	of R	eceipt				
	Mailing Address 11 Stepping Stone Ln			M 1		/ D D 17	/ Y	2018	Y	]
	City Greenwich	State CT	Zip Code 06830-4031			tion ID :				
			0000-4051	Amo	unt of	Each R	eceipt th	is Perio	bd	_
	FEC ID number of contributing federal political committee.	С		ΙĻ		y	- <u>y</u>	15	6.25	
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) ef Risk Officer		Mem	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1718.75	P/R D	educt	ion (\$156	6.25 Bi-W	/eekly)		
s	UBTOTAL of Receipts This Page (optional)		••••••	Ľ	_	9	- y	21	4.57	
т	OTAL This Period (last page this line number of	only)	•••••		_					

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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	Detailed Summary Page	<b>×</b> 11a   11b   11c   12				
	Botallod Outlinnary Page					
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any per he name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)						
angle Massachusetts Mutual Life Ins	surance Company Political Action	Committee				
Full Name of Individual (Last, First, Middle MCCREERY, JEFFREY, STEWART,		Date of Receipt				
Mailing Address 3000 SOUTHWIND TRAIL		M M / D D / Y Y Y Y 10 17 2018				
City	State Zip Code	Transaction ID : PR1688835862518				
POLAND	OH 44514-2880	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	20.82				
Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼	-				
Primary General	Aggregate Teal-to-Date +	P/R Deduction (\$10.41 Bi-Weekly)				
Other (specify) V	208.37	·····				
Full Name of Individual (Last, First, Middle B. HETTIGER, JOHN, STRATTON,		Date of Receipt				
Mailing Address 12484 BURKE DR		10 17 2018				
City	State Zip Code	Transaction ID : PR1692497562518				
CARMEL	IN 46032-7284	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	41.68				
Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent	Memo Item				
Receipt For:	Aggregate Year-to-Date ▼	-				
Primary General	Aggregate rear to Date v	P/R Deduction (\$20.84 Bi-Weekly)				
Other (specify) ▼	416.67					
Full Name of Individual (Last, First, Middle MILLER, BRYCE, L, ,	Date of Receipt					
Mailing Address 7602 SIMS RD						
City	State Zip Code	Transaction ID : PR1702297362518				
WAXHAW	NC 28173-7631	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	63.10				
Name of Employer (for Individual) SELF	Occupation (for Individual)	Memo Item				
	Insurance Agent	-				
Receipt For:	Aggregate Year-to-Date 🔻					

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

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 11				
Any information copied from such Reports or for commercial purposes, other than using	and Statements mang the name and a	ay not be sold or used by any p ddress of any political committe	13     14     15     16     1       berson for the purpose of soliciting contributions       e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	-						
Aassachusetts Mutual Life	Insurance Co	mpany Political Action	n Committee				
A. Full Name of Individual (Last, First, Mide YOUSSEFI, ANTHONY, WILLIAM,		rganization Name	Date of Receipt				
Mailing Address 7928 KIRKFIELD DR		10 / Y Y Y Y 10 17 2018					
City NASHVILLE	State TN	Zip Code 37211-4697	Transaction ID : PR1702300362518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		25.00				
Name of Employer (for Individual) SELF	Occi Brol	upation (for Individual) ker	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)				
Full Name of Individual (Last, First, Mide B. CARTY, Robert, Charles, ,	dle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 1421 GREENFIELD AVE	E APT 5		10 17 2018				
City	State	Zip Code	Transaction ID : PR1702305762518				
LOS ANGELES	CA	90025-8017	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		346.00				
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 809.29	P/R Deduction (\$173.00 Bi-Weekly)				
Full Name of Individual (Last, First, Mide C. CHAVIS, NICHOLAS, STEVE		rganization Name	Date of Receipt				
Mailing Address 11600 PARKSBURG C			10 / Y Y Y Y 10 17 2018				
City GLEN ALLEN	State VA	Zip Code 23059-4824	Transaction ID : PR1702316662518           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		25.00				
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)				
SUBTOTAL of Receipts This Page (option	al)		396.00				
TOTAL This Period (last page this line nu	mber only)	······ ]					

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)				
11	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17				
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full)							
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee				
Α.	Full Name of Individual (Last, First, Middle Init PUCKETT, RYAN, , ,	ial) or Full C	rganization Name	Date of Receipt				
	Mailing Address 4115 HICKORY ROCK DR			10 17 Y Y Y Y Y 10 17 2018				
	City POWELL	State OH	Zip Code 43065-7330	Transaction ID : PR1702333862518           Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		30.00				
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	P/R Deduction (\$15.00 Bi-Weekly)				
В.	Full Name of Individual (Last, First, Middle Init THOMAS, RYAN, , ,	ial) or Full C	rganization Name	Date of Receipt				
	Mailing Address 3230 PRAIRIE CREEK DR			10 / D D / Y Y Y Y 10 17 2018				
	City CHICO	State CA	Zip Code 95973-5820	Transaction ID : PR1709983462518 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		26.10				
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 247.82	P/R Deduction (\$13.05 Bi-Weekly)				
с.	Full Name of Individual (Last, First, Middle Init FREEMAN, GREGORY, THOMAS		rganization Name	Date of Receipt				
	Mailing Address 5901 N MERIDIAN ST			10 / Y Y Y Y 10 17 2018				
	City INDIANAPOLIS	State IN	Zip Code 46208-1532	Transaction ID : PR1710289862518				
			40200 1302	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		50.00				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)		•	106.10				

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

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         1 <sup>1</sup>				
Any information copied from such Reports ar	nd Statements ma	ay not be sold or used by any p ddress of any political committed	erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)		·····					
Aassachusetts Mutual Life Ir	nsurance Co	mpany Political Action	Committee				
Full Name of Individual (Last, First, Middle A. Orzell, Jennifer, , MS.,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 44 Westwoods Dr			10 / Y Y Y Y 10 17 2018				
City Canton	State CT	Zip Code 06019-4500	Transaction ID : PR1717732362518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		38.46				
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) President & Actuary	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.66	P/R Deduction (\$38.46 Bi-Weekly)				
Full Name of Individual (Last, First, Middle B. MORAN, MICHAEL, F, ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 9 W BROADWAY UNIT 6	07		10 / Y Y Y Y 10 17 2018				
City	State	Zip Code	Transaction ID : PR1717744862518				
BOSTON	MA	02127-1062	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		41.68				
Name of Employer (for Individual) SELF	Occ Bro	upation (for Individual) ker	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.67	P/R Deduction (\$20.84 Bi-Weekly)				
Full Name of Individual (Last, First, Middle C. CLAERBOUT, ADAM, G, ,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 7141 DICKINSON LN			10 / Y Y Y Y 10 17 2018				
City INDIANAPOLIS	State IN	Zip Code 46259-5703	Transaction ID : PR1727248562518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		25.00				
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional	)		105.14				
TOTAL This Period (last page this line num	ber only)						

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12				
Any information copied from such Reports	and Statements ma	av not be sold or used by any r	13     14     15     16     1       person for the purpose of soliciting contributions				
			e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	0						
Assachusetts Mutual Life	Insurance Co	mpany Political Action	Committee				
Full Name of Individual (Last, First, Mido	lle Initial) or Full O	rganization Name					
A. CREEDEN, WILLIAM, , ,			Date of Receipt				
Mailing Address 701 ROYAL CT APT 302	2		10 17 Y Y Y Y				
City	State	Zip Code	Transaction ID : PR1727258462518				
CHARLOTTE	NC	28202-2751	Amount of Each Receipt this Period				
FEC ID number of contributing	С		25.00				
federal political committee.	0						
Name of Employer (for Individual)		upation (for Individual)	Memo Item				
SELF		rance Agent					
Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$12.50 Bi-Weekly)				
Other (specify) ▼		250.00	F/K Deduction (\$12.50 BHWeekly)				
		7	-				
Full Name of Individual (Last, First, Mido B. PERCY, JASON, , ,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 2535 E 26TH ST							
City	State	Zip Code	Transaction ID : PR1727261162518				
TULSA	OK	74114-4413	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		13.84				
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item				
Receipt For:	Aggregate	Year-to-Date ▼					
Primary General			P/R Deduction (\$13.84 Semi-Monthly)				
Other (specify) <b>v</b>		230.80	1				
Full Name of Individual (Last, First, Mido C. QUINN, EDWARD, OWEN, ,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 17 AVON AVE			M M / D D / Y Y Y Y Y				
0.5	04-4-	7:	10 17 2018				
City CUMBERLAND	State RI	Zip Code 02864-1751	Transaction ID : PR1727277862518 Amount of Each Receipt this Period				
FEC ID number of contributing							
federal political committee.	C		58.53				
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item				
SELF		rance Agent	-				
Receipt For:	Aggregate	Year-to-Date 🔻					
Primary General Other (specify)		353.18	P/R Deduction (\$24.30 Bi-Weekly)				
			4				
SUBTOTAL of Receipts This Page (option	al)		97.37				
TOTAL This Period (last page this line nur	mber only)						

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
11	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11				717
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the	purpos	e of solici	ting contri	bution	
	NAME OF COMMITTEE (In Full)		duress of any pointear committee		minoutic			muco.	
	Massachusetts Mutual Life Insu	irance Co	mpany Political Action	Committ	tee				
Α.	Full Name of Individual (Last, First, Middle Ini HANCOCK, DAWN, , ,	itial) or Full O	rganization Name	Date o	f Recei	pt			
	Mailing Address 17247 SANDY KNOLL DR			M M		D D / 17	2018		
	City OLNEY	State MD	Zip Code 20832-2036			ID:PR17 ch Receip			
	FEC ID number of contributing federal political committee.	С					1	15.41	
	Name of Employer (for Individual) SELF	Occi Brol	upation (for Individual) ker	M	lemo Ite	əm			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 222.98	P/R Dec	duction (	(\$15.41 Se	emi-Month	ly)	
в.	Full Name of Individual (Last, First, Middle Ini SHEAN, MICHAEL, J, ,	tial) or Full O	rganization Name	Date o	f Recei	pt			
	Mailing Address 427 BONNIE BRAE RD			10		17 /	y y 2018		
	City	State IL	Zip Code			ID : PR17			
	HINSDALE	IL.	60521-2815	Amoun	it of Ea	ch Receip	t this Peri	od	
	FEC ID number of contributing federal political committee.	С					8	33.32	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	M	lemo Ite	əm			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.37	P/R Ded	luction (	(\$41.66 Bi-	Weekly)		
C.	Full Name of Individual (Last, First, Middle Ini DOWNS, KEVIN, S, ,	itial) or Full O	rganization Name	Date o	f Recei	pt			
	Mailing Address 2777 CAPTAIN CT			10	JL	D D / 17	Y Y 2018		
	City DACULA	State GA	Zip Code 30019-7840			Discription of the second seco			
	FEC ID number of contributing federal political committee.	С				ch Receip		00 14.12	
	Name of Employer (for Individual)		upation (for Individual) rance Agent		lemo Ite	em			
	Receipt For: Primary General Other (specify)	1	Year-to-Date ▼ 411.78	P/R Dec	duction	(\$22.06 Bi	-Weekly)		
s	UBTOTAL of Receipts This Page (optional)		•	ļ.	, , , , , , , , , , , , , , , , , , ,		14	12.85	Д

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

(check only one)

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TTEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	Statements may not be sold or used by any personal he name and address of any political committee t	
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Ins	surance Company Political Action C	Committee
A. STARK, TIMOTHY, DARREN, , Mailing Address 4402 POMONA RD	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	10 17 2018 Transaction ID : PR1728061462518
DALLAS	TX 75209-2824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 827.13	P/R Deduction (\$50.00 Bi-Weekly)
B. KAPLAN, BRIAN, , , Mailing Address 300 E 71ST ST #16K	Initial) or Full Organization Name	Date of Receipt
		10 17 2018
City	State Zip Code	Transaction ID : PR1728066562518
NEW YORK	NY 10021-5242	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. Benson, Wendy, , MS.,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 270 Allerton Commons Ln		10 / 17 2018
City Braintree	State Zip Code MA 02184-8248	Transaction ID : PR1728095762518
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 38.46
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Occupation (for Individual) Vice President - Wealth Management	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 807.66	P/R Deduction (\$38.46 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).	▶	188.46

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

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12				
			13     14     15     16     17       berson for the purpose of soliciting contributions       be to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	<u> </u>						
Aassachusetts Mutual Life	Insurance Co	mpany Political Actior	1 Committee				
Full Name of Individual (Last, First, Mide A. Verdi, Matthew, , MR.,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 25 New South St Apt 30			10 / Y Y Y Y 10 17 2018				
City Northampton	State MA	Zip Code 01060-4056	Transaction ID : PR1728096562518           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		9.62				
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) 9 Due Diligence	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)				
Full Name of Individual (Last, First, Midd JONES, RICHARD, ALAN, ,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 1153 GRAND CYPRES	S CV		10 / Y Y Y Y 10 17 2018				
City COLLIERVILLE	State TN	Zip Code 38017-3464	Transaction ID : PR1737062662518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		30.00				
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 243.41	P/R Deduction (\$15.00 Bi-Weekly)				
Full Name of Individual (Last, First, Mide SCHMIDT, Thomas, Allen, ,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 14713 LAMPLIGHT LN			10 / Y Y Y Y 10 17 2018				
City EDMOND	State OK	Zip Code 73013-1591	Transaction ID : PR1737064562518           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		31.94				
Name of Employer (for Individual) SELF	Insu	upation (for Individual) rance Agent	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.17	P/R Deduction (\$15.97 Bi-Weekly)				
SUBTOTAL of Receipts This Page (option	al)		71.56				
TOTAL This Period (last page this line nu	mber only)						

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		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12				
			13     14     15     16     17       berson for the purpose of soliciting contributions       a to collicit contributions from such committee				
NAME OF COMMITTEE (In Full)	ing the name and a	duress of any political committee	e to solicit contributions from such committee.				
Massachusetts Mutual Life	Insurance Co	mpany Political Actior	Committee				
Full Name of Individual (Last, First, Mic A. MICELI, JOSHUA, ANDREW, ,	dle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 6835 E CAMELBACK F			10 / Y Y Y Y 10 17 2018				
City SCOTTSDALE	State AZ	Zip Code 85251-3119	Transaction ID : PR1737080662518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		30.00				
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 292.90	P/R Deduction (\$15.00 Bi-Weekly)				
Full Name of Individual (Last, First, Mic B. GRANT, WALTER, , ,	dle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 10715 CURTMAN DR S			10 / Y Y Y Y 10 17 2018				
City EADS	State TN	Zip Code 38028-7031	Transaction ID : PR1737102362518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		30.36				
Name of Employer (for Individual) SELF	Occ Bro	upation (for Individual) ker	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 226.01	P/R Deduction (\$12.97 Bi-Weekly)				
Full Name of Individual (Last, First, Mic FAIR, BRADLEY, TENNYSC		rganization Name	Date of Receipt				
Mailing Address 349 OLD PAYNE PL			10 / Y Y Y Y 10 17 2018				
City SALTILLO	State MS	Zip Code 38866-8753	Transaction ID : PR1759864062518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		25.00				
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)				
SUBTOTAL of Receipts This Page (option	nal)		85.36				
TOTAL This Period (last page this line nu	Imber only)						

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ידו			Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.			
$\setminus$	NAME OF COMMITTEE (In Full)	_					
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee			
<u> </u>	Full Name of Individual (Last, First, Middle Initi LEECH, JOHNNY, , ,	ial) or Full O	rganization Name	Date of Receipt			
	Mailing Address 1107 CLAYTON AVE						
	5			10 17 2018			
		State MS	Zip Code	Transaction ID : PR1762091562518			
	TUPELO	IVIS	38804-1822	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item			
	SELF	Insu	rance Agent				
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Primary General Other (specify) ▼		250.00	P/R Deduction (\$12.50 Bi-Weekly)			
				1			
	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name				
	LOPEZ, BAVY, URIAH, ,	Date of Receipt					
	Mailing Address 2060 ELIZA GLYNNE LN			10 / D D / Y Y Y Y 10 17 2018			
		State TN	Zip Code	Transaction ID : PR1762108062518			
			37931-3681	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		51.10			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item			
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Primary General			P/R Deduction (\$25.55 Bi-Weekly)			
	Other (specify) ▼		497.82				
	Full Name of Individual (Last, First, Middle Initi CURRY, PIERS, L, , II	ial) or Full O	rganization Name	Date of Receipt			
	Mailing Address 8901 MAGNOLIA CHASE CIR			M M / D D / Y Y Y Y 10 17 2018			
	City	State	Zip Code	Transaction ID : PR1762115062518			
	ТАМРА	FL	33647-2220	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		25.00			
	Name of Employer (for Individual)	Оссі	pation (for Individual)	Memo Item			
	SELF	Insu	rance Agent				
		Aggregate	Year-to-Date ▼				
	Primary     General       Other (specify)		250.00	P/R Deduction (\$12.50 Bi-Weekly)			
			,				
_							
s	JBTOTAL of Receipts This Page (optional)		••••••	101.10			

SCHEDULE A	(FEC Form	3X)
ITEMIZED REC	EIPTS	

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ITEIMIZED RECEIFIS		Detailed Summary Page	X	11a		11b	11c		12				
		Detailed Summary Faye		13		14	15		16	17			
Any information copied from such Reports or for commercial purposes, other than usi													
NAME OF COMMITTEE (In Full)													
Aassachusetts Mutual Life	Insurance Co	mpany Political Action	Con	nmitt	ee	;							
Full Name of Individual (Last, First, Mid A. STUCKEY, DOMENICA, Santoro,		ganization Name		Date of	f R	eceipt							
Mailing Address 6113 COUNTRYVIEW	LN			<sup>M</sup> 10	1	/ D 17			2018	Y			
City	State	Zip Code		Transaction ID : PR1774172462518									
RALEIGH	NC	27606-9255		Amoun	t of	f Each F	Receipt	this	Period				
FEC ID number of contributing federal political committee.	C				1			_	30.				
Name of Employer (for Individual)	Occi	pation (for Individual)	_	м	em	o Item							
SELF		rance Agent											
Receipt For:		-											
Primary General	Aggregate	Year-to-Date 🔻	P	/R Ded	luct	ion (\$15	00 Bi-V	Vook	·hv)				
Other (specify) V		245.00		in Dou	1001			VOON	'y <i>)</i>				
Full Name of Individual (Last, First, Mid B. EISSENS, RODNEY, A, ,	dle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 3131 N 11TH ST				10	] '	/ D 17		2	018	Y			
City	State	Zip Code		Trans	act	tion ID :	PR177	4173	76251	8			
SHEBOYGAN	WI	53083-4023	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С	C					-		33.	66			
Name of Employer (for Individual) SELF		Occupation (for Individual) Insurance Agent					Memo Item						
Receipt For:	Aggregate	Year-to-Date 🔻											
Primary General			P/	/R Ded	ucti	ion (\$16	.83 Bi-V	/eek	ly)				
Other (specify)		232.68											
Full Name of Individual (Last, First, Mid C. CAHILL, MICHAEL, PATRIC		ganization Name		Date of	f R	eceipt							
Mailing Address 3694 DOTY LN				<sup>M</sup> 10	] '	/ D 17			2018	Y			
City	State	Zip Code		Trans	sac	tion ID :	: PR177	4173	86251	8			
CARMEL	IN	46033-4743	/	Amoun	t of	f Each F	Receipt	this	Period				
FEC ID number of contributing federal political committee.	C					y	y	_	25.	00			
Name of Employer (for Individual) SELF		pation (for Individual) ance Agent		M	lem	io Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)										
SUBTOTAL of Receipts This Page (option	nal)	•••••				,	9	_	88.	66			

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

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177			Use separate schedule(s)	(check or	nly or	ie)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a		11b	11c		2	17		
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe address of any political committee	erson for the	purp pontrib	oose of	soliciting	g cont	ributio	ons		
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee							
Α.	Full Name of Individual (Last, First, Middle Initi Griffith, Donald, , MR.,	al) or Full O	Organization Name	Date of	Date of Receipt							
	Mailing Address 133 Colony Road			10	10 / Y Y Y Y 10 17 2018							
	City Longmeadow	State MA	Zip Code 01106-1255				PR17790 eceipt th					
	FEC ID number of contributing federal political committee.	С				7		_	38.46	6		
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) e President - Compliance		/lemo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.66	P/R De	ductio	on (\$38.4	46 Bi-We	∍ekly)				
в.	Full Name of Individual (Last, First, Middle Initi WEST, JODIE, BENEVITAE, ,	al) or Full O	Organization Name	Date o	of Re	ceipt						
	Mailing Address 6024 CRESTRIDGE LANE			M 10	/	D D 17	/ Y	201	8 8			
	City	State	Zip Code	Tran	sacti	on ID : I	PR17790	)5796	2518			
	SACHSE	TX	75048-6500	Amour	nt of	Each R	eceipt th	is Pe	riod			
	FEC ID number of contributing federal political committee.	С					-	_	12.50	)		
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent		/lemo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 237.50	P/R Dec	ductio	on (\$12.	50 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initi MIRRA, GERALD, M, ,	al) or Full O	Organization Name	Date o	of Re	ceipt						
	Mailing Address 2204 HAWTHORN WAY			M 10		D D 17	/ Y	201				
	City NEW WINDSOR	State NY	Zip Code 12553-4796				PR1824					
	FEC ID number of contributing federal political committee.	С				y	y	_	25.00	)		
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		/lemo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R De	ductio	on (\$12.	50 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)		•			9	5	_	75.96	6		
Т	OTAL This Period (last page this line number c	nly)				_			-			

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	-	Use separate schedule(s)	(check or	nly one	e)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c 15	12	17				
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma g the name and a	ay not be sold or used by any p ddress of any political committe	erson for the	e purpo	ose of so	liciting	contribut	tions				
NAME OF COMMITTEE (In Full)												
ightarrow Massachusetts Mutual Life I	nsurance Co	mpany Political Actior	Commit	tee								
Full Name of Individual (Last, First, Middl POURI, AMIR, JOVANI, ,	e Initial) or Full C	rganization Name	Date o	Date of Receipt								
Mailing Address 15021 VENTURA BLVD			M 10	10 / Y Y Y Y 10 17 2018								
City SHERMAN OAKS	State CA	Zip Code 91403-2442			on ID : PR Each Rece			8				
FEC ID number of contributing federal political committee.	С		21.42									
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		/lemo	Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 257.13	P/R De	ductior	n (\$10.71	Bi-We	ekly)					
Full Name of Individual (Last, First, Middl B. CURRY, AARON, STEPHEN, ,	e Initial) or Full C	rganization Name	Date of	of Rec	eipt							
Mailing Address 2051 HAWK CLIFF PL			10 / Y Y Y Y Y 10 17 / 2018									
City	State	Zip Code			n ID : PR			8				
EDMOND	OK	73025-1239	Amour	nt of E	Each Rece	eipt thi	s Period					
FEC ID number of contributing federal political committee.	FEC ID number of contributing federal political committee.							00				
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	N	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Dec	ductior	n (\$12.50	Bi-We	∍kly)					
Full Name of Individual (Last, First, Middl C. Moeller, Gary, , MR.,	e Initial) or Full C	rganization Name	Date o	of Rec	eipt							
Mailing Address 24 Park Rd			M 10		D D D 17	/ Y	y y 2018	Ŷ				
City Simsbury	State CT	Zip Code 06070-2712			on ID : PR Each Rece			8				
FEC ID number of contributing federal political committee.	С			. ,		y	_	65				
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	etts Mutual Life Insurance Co AVP Systems											
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.65	P/R Deduction (\$9.65 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	ป)	)		,		y	56.0	)7				
TOTAL This Period (last page this line num	nber only)											

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Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for t	he pu	irpose of	soliciting	contril	butio	ns	
	NAME OF COMMITTEE (In Full)										
$\left \right\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Comm	ittee	Э					
Α.	Full Name of Individual (Last, First, Middle Initi BAKER, BRIAN, ERIC, ,	ial) or Full O	Organization Name	Date	Date of Receipt						
	Mailing Address 1532 SOMERSET DR				0	/ D D 17	/ Y	2018			
	City FOREST	State VA	Zip Code 24551-1784			t <b>ion ID :</b> f Each R					
	FEC ID number of contributing federal political committee.	С						2	1.42		
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Merr	no Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 257.13	P/R I	Deduc	tion (\$10.	71 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi STARBOWSKI, KAREN, LYNNE, ,	ial) or Full O	Organization Name	Date of Receipt							
	Mailing Address 3921 E TANO ST			10 / Y Y Y Y Y 10 17 2018							
	City	State	Zip Code	Tra	insac	tion ID :	PR18289	16962	518		
	PHOENIX	AZ	85044-3844	Amo	ount o	f Each R	eceipt th	is Perio	bd		
	FEC ID number of contributing federal political committee.	С	25.00								
	Name of Employer (for Individual) SELF	Occi Insu	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R D	educ	tion (\$12.	50 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initi KROLL, DAVID, RICHARD, ,	ial) or Full O	Organization Name	Date	e of F	leceipt					
	Mailing Address 5501 E GRANDVIEW RD				0	/ D D 17	/ Y	2018			
	City SCOTTSDALE	State AZ	Zip Code 85254-1173			tion ID : f Each R					
	FEC ID number of contributing federal political committee.	С				y .	y	2	7.50		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Men	no Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 245.00	P/R [	Deduc	tion (\$13.	.75 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•			5	5	7	3.92	_	
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11	EMIZED RECEIPTS		for each category o Detailed Summary		¥ 11a 13	11b	11c	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the				on for the	purpose of	soliciting	g contrib	utions				
	NAME OF COMMITTEE (In Full)												
	Massachusetts Mutual Life Insur	ance Co	mpany Political	Action C	Committe	ee							
Α.	Full Name of Individual (Last, First, Middle Initia Coburn, Christopher, , MR.,	al) or Full O	rganization Name		Date of Receipt								
	Mailing Address 21 Bayberry Dr				10 / D D / Y Y Y Y 10 17 2018								
	City Easthampton	State MA	Zip Code 01027-2735			action ID : of Each F							
	FEC ID number of contributing federal political committee.	С						19	9.25				
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) P Marketing		M	emo Item							
	Receipt For:		Year-to-Date V		-								
	Primary General Other (specify) ▼			04.25	P/R Ded	uction (\$19	.25 Bi-W	eekly)					
В.	Full Name of Individual (Last, First, Middle Initia COOPER, DANE, , ,	al) or Full O	rganization Name		Date of	Receipt							
	Mailing Address 6 CONIFER CIR				10 / Y Y Y Y 2018								
	City	State	Zip Code		Trans	action ID :	PR1841	4620625	18				
	ATLANTA	GA	30342-4303		Amount	of Each F	Receipt th	nis Perio	d				
	FEC ID number of contributing federal political committee.	С			-	-	27	7.68					
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		, , 2	44.64	P/R Ded	uction (\$13	.84 Bi-We	eekly)					
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia SANDERS, LEE, PARKER, ,	al) or Full O	rganization Name		Date of	Receipt							
	Mailing Address 1991 CAMBRIDGE VILLAGE D	DR			м м 10	/ D 17		2018 <sup>°</sup>	Y				
	City	State AR	Zip Code			action ID							
	CONWAY		72032-2363	_	Amount	of Each F	Receipt th	nis Perio	d				
	FEC ID number of contributing federal political committee.	С				9		17	7.10				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		M	emo Item							
	Receipt For:	Aggregate	Year-to-Date 🔻		]								
	Other (specify)		2	P/R Ded	uction (\$17	'.10 Semi	-Monthly	()					
s	UBTOTAL of Receipts This Page (optional)					. , .	. ,	64	1.03				
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17			Use separate schedule(s)	(check on	ily or	ne)	L					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a		11b	11c		2	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe uddress of any political committee	rson for the	pur pontrib	pose of	soliciting	cont	ributio	ons		
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insur	rance Co	mpany Political Action	Commit	tee							
Α.	Full Name of Individual (Last, First, Middle Initi WEINSTOCK, MARK, J., ,	ial) or Full O	organization Name	Date of	Date of Receipt							
	Mailing Address 8 GARFIELD AVE			10 17 Y Y Y Y Y 10 17 2018								
	City CLIFTON	State NJ	Zip Code 07012-1213				PR18570 eceipt th					
	FEC ID number of contributing federal political committee.	С							30.24	4		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		/lemo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 239.54	P/R De	ducti	on (\$15.	12 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initi CHIPPER, JEFFREY, S., ,	ial) or Full O	organization Name	Date of Receipt								
	Mailing Address 527 LIBERTY DRIVE			M N 10	/	D D 17	/ Y	201	Y Y 8			
	City	State	Zip Code	Tran	sacti	on ID : I	PR18570	9956	2518			
	YARDLEY	PA	19067-4538	Amour	nt of	Each R	eceipt th	is Pe	riod			
	FEC ID number of contributing federal political committee.				-			57.54	4			
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.93	P/R Dec	ductio	on (\$28.7	77 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Initi BLUM, DANIEL, SCOTT, ,	ial) or Full O	organization Name	Date o	of Re	eceipt						
	Mailing Address 4652 LUE LN			M 10	/	D D 17	/ Y	201				
	City CARMICHAEL	State CA	Zip Code 95608-6649			-	PR1857					
	FEC ID number of contributing federal political committee.	С				y 1			58.72	2		
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		/lemo	) Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 482.58	P/R De	ducti	on (\$29.	36 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)		•			,	9	1	46.50	)		
т	OTAL This Period (last page this line number c	only)	•••••			-			-			

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one)       X       11a       11b       11c       12       13       14       15       16       17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Initia SCHULMAN, GABRIEL, , , Mailing Address 385 GRAND ST APT L1406	al) or Full Oi	ganization Name	Date of Receipt
	City NEW YORK	State NY	Zip Code 10002-3936	10         17         2018           Transaction ID : PR1869366262518           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		33.32
	Name of Employer (for Individual) SELF Receipt For:	Insu	pation (for Individual) rance Agent Year-to-Date ▼	Memo Item
	Primary General Other (specify) ▼	Aggregate	333.37	P/R Deduction (\$16.66 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initia GUTWEIN, KEVIN, C, ,	al) or Full Oi	ganization Name	Date of Receipt
	Mailing Address 1434 OLDE BRIAR LN			10 / D D / Y Y Y Y 2018
	City CARMEL	State IN	Zip Code 46032-7336	Transaction ID : PR1873751062518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
С.	Full Name of Individual (Last, First, Middle Initia ROBERTS, PHILIP, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 7133 E RANDALL AVE			10 / Y Y Y Y 10 17 2018
	ORANGE	State CA	Zip Code 92869-1709	Transaction ID : PR1903660462518         Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF		pation (for Individual) ance Agent	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		••••••	83.32
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any information copied from such Reports and Statements may not be solid or used by any person for the purpose of soliciting contributions from such committee.         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. LOERA (SRNES)S.,         Mailing Address S211 KATY FWY APT 44         City         HOUSTON         TX       77024-1922         FEC ID number of contributing [edetal political committee.         Pail Name of Individual (Last, First, Middle Initial) or Full Organization Name         Receipt For:       Aggregate Year-to-Date V         Pull Name of Individual (Last, First, Middle Initial) or Full Organization Name         Receipt For:       Aggregate Year-to-Date V         Pull Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Receipt For:       Control (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Receipt For:       Open (Individual)       Control (Individual)       Date of Receipt         City       State       Zip Code       Tasasetion ID - PR1933627382518         Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Individual)       Tasasetion ID - PR1933627382518         Na	ITI	EMIZED RECEIPTS		1	for each category of the Detailed Summary Page	) `_	heck on X 11a 13		e) 11b 14	11c			17		
Massachusetts Mutual Life Insurance Company Political Action Committee         A.       Date of Individual (Last, First, Middle Initial) or Full Organization Name         A.       LOERA, GENESIS,         Mailing Address 8211 KATV FWY APT 44       10         City       TX         HOUSTON       TX         FEC 10 number of contributing federal political committee       C         Mailing Address 51 Adrew Dr       Aggregate Vear-to-Date V         PII Name of Employer (for Individual) Stelf       General         Officer (specify) V       State         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B.       Kennedy, John, F, MR., Mailing Address 51 Andrew Dr       C         City       State       Zip Code         City       State       Zip Code         City       C       Mailing Address 51 Andrew Dr         City       City       Other (specify) Improvement of Contributing federal political committee       Date of Receipt         Receipt Cit       Mailing Address 51 Andrew Dr       Occupation (for Individual) Vice President - Distribution Strategy       P/R Deduction (\$38.46 Bi-Weekly)         Primary       General       Occupation (for Individual) Vice President - Distribution Strategy       P/R Deduction (\$38.46 Bi-Weekly)							for the	purp	ose of :	soliciting	g conti	ributions			
A.       LOERA, GENESIS, .,         Mailing Address 8211 KATY FWY APT 44         City       State       Zip Code         Transaction ID : PR1902661562518         Mount of Each Receipt II         Name of Employer (for Individual)         SELF         Receipt For:         Primary         Other (specify) ♥         Self         Z70 20.00         FEC ID number of contributing         City         City         City         City         City         City         City          City         City         City         City         City         City         City         City         City         City         City         City         City         City         Receipt II         Other (specify) ♥         Aggregate Year-to-Date ♥         Primary       General         Other (specify) ♥         City       Code         Receipt II       State         City       General <th></th> <th></th> <th>ance Co</th> <th>om</th> <th>pany Political Action</th> <th>Co</th> <th>mmitt</th> <th>ee</th> <th></th> <th></th> <th></th> <th></th> <th></th>			ance Co	om	pany Political Action	Co	mmitt	ee							
City       State       Zip Code         HOUSTON       Tx       Zip Code         FEC. ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         SELF       Comparison of the individual)       Coccupation (for Individual) Insurance Agent       Memo item         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$12.50 Bi-Weekly)         Full Name of Individual (Last. First, Middle Initial) or Full Organization Name       Date of Receipt in Strategy         Receipt For:       C       Transaction ID : PR193873382518         Malling Address 51 Andrew Dr       C       Odoto 15, 5001         City       State       Zip Code         Carton       State       C       State         FeEL ID number of contributing federal political committee.       C       State       Occupation (for Individual) Vice President - Distribution Strategy         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$38.46 Bi-Weekly)         PH Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$38.46 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt In 10       17       2018         Transaction ID : PR1938935682518       Amount of Each Receipt In 10       17       <	Α.	LOERA, GENESIS, , ,	al) or Full O	Irga	nization Name		- · ·								
HOUSTON       TX       77024-1922         FEC ID number of contributing federal political committee.       C       25.00         Name of Employer (for Individual) SELF Receipt For: Primary General Other (specify) ▼       C       250.00         FILI Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. Kennedy, John, F, MR., Mailing Address 51 Andrew Dr       C       010 / 17 / 2018         City Granton       C       Coccupation (for Individual) Vice President - Distribution Strategy       Date of Receipt this Period         Receipt for: Primary General Gradial committee.       C       0010-5001       Transaction ID-JER1913873362518         Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co       Occupation (for Individual) Vice President - Distribution Strategy       P/R Deduction (\$38.46 Bi-Weekly)         Full Name of Individual (Last, First, Midcle Initial) or Full Organization Name       Date of Receipt for Gity Granton       Date of Receipt         Full Name of Individual (Last, First, Midcle Initial) or Full Organization Name       Date of Receipt       01 / 17 / 2018         Full Name of Individual (Last, First, Midcle Initial) or Full Organization Name       Date of Receipt       10 / 17 / 2018         Full Name of Individual (Last, First, Midcle Initial) or Full Organization Name       Date of Receipt       10 / 17 / 2018         Mailing Address 11 Mountain Spring Rd							10 17 2018								
FEC ID number of contributing federal political committee.       C       25.00         Name of Employer (for individual) Insurance Agent Primary General Other (specify) ▼       Occupation (for individual) Insurance Agent 250.00       Memo Item         PR Deduction (\$12.50 Bi-Weekly)       P/R Deduction (\$12.50 Bi-Weekly)       Date of Receipt         B. Kennedy, John, F, MR., Mailing Address 51 Andrew Dr       City City       Date of Receipt         Canton       CT       06019-5001         FEC ID number of contributing federal political committee.       C         Name of Employer (for individual) Massachusets Mutual Life Insurance Co       Vice President - Distribution Strategy         Receipt For: Cortextisk Mutual Life Insurance Co       Vice President - Distribution Strategy         Receipt For: Cortextisk Mutual Life Insurance Co       Vice President - Distribution Strategy         Receipt For: Cortextisk Mutual Life Insurance Co       Vice President - Distribution Strategy         Receipt For: Cortextisk Mutual Life Insurance Co       Vice President - Distribution Strategy         Receipt For: Cortextisk Mutual Life Insurance Co       Vice President - Distribution Strategy         Receipt For: Cortextisk Mutual Life Insurance Co       State       Zip Code         City       General       General       0'1'1'1'1'2018         City <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th colspan="8"></th>															
SELF       Insurance Agent         Receipt For:		•	С												
Primary       General       P/R Deduction (\$12.50 Bi-Weekly)         PR Deduction (\$12.50 Bi-Weekly)       PR Deduction (\$12.50 Bi-Weekly)         B. Kennedy, John, F, MR.,       Mailing Address \$1 Andrew Dr         City       City       Cit         Canton       State       Zip Code         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         Massachusets Mutual Life Insurance Co       Cocupation (for Individual)         Massachusets Mutual Life Insurance Co       Aggregate Year-to-Date ▼         Primary       General       Officer (Signed Text)         Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$38.46 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Corbett, Melvin, , MR.,       B07.66       P/R Deduction (\$38.46 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Corbett, Melvin, , MR.,       B07.66       P/R Deduction (\$38.46 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City       Gr       Obsolver       Aggregate Year-to-Date ▼         FEC ID numbe		1, , , , ,		•	· · · · · · · · · · · · · · · · · · ·		Μ	emo	Item						
B. Kennedy, John, F, MR.,       Date of Receipt         Mailing Address 51 Andrew Dr       City         City       State       Zip Code         Canton       CT       06019-5001         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) Massachuests Mutual Life insurance Co       Occupation (for Individual) Vice President - Distribution Strategy         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$38.46 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City       State       Zip Code         Primary       General       0C         Other (specify) ▼       Aggregate Year-to-Date ▼         Mailing Address 11 Mountain Spring Rd       CT         City       State       Zip Code         Face polyce (for Individual)       Occupation (for Individual)         MASACHUSETTS MUTUAL LIFE INS.       EVP & Chief Investment Officer         Receipt For:       192.30         P/R Deduction (\$192.30 Bi-Weekly)       P/R Deduction (\$192.30 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional)		Primary General	Aggregate	Yea			P/R Dec	luctio	n (\$12.8	50 Bi-W	eekly)				
Mailing Address §1 Andrew Dr         City         Canton         FEC ID number of contributing federal political committee.         Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co         Primary       General Other (specify) ▼         Primary       General Other (specify) ▼         FeC ID number of contributing federal political committee.       Occupation (for Individual) Vice President - Distribution Strategy         Receipt For:       Aggregate Year-to-Date ▼         Primary       General Other (specify) ▼         City       State CT         City       State CT         PEC ID number of contributing federal political committee.       Zip Code CT         Other (specify)       State CT         Diff       10         PEC ID number of contributing federal political committee.       Date of Receipt         Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.       Cupation (for Individual) EVP & Chief Investment Officer         Receipt For:       Aggregate Year-to-Date ▼       Memo Item         Massachusett of this Page (optional)	B		al) or Full O	rga	nization Name		Date o	f Rec	eint						
Canton       CT       06019-5001       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       38.46         Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co       Occupation (for Individual) Vice President - Distribution Strategy       Memo Item         Receipt For:       Primary       General Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$38.46 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       Date of Receipt         City       State       Zip Code       Transaction ID : PR1929995862518         Mailing Address 11 Mountain Spring Rd       C       10       17       2018         City       State       Zip Code       Transaction ID : PR1929995862518       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       Occupation (for Individual)       P/R Deduction (\$192.30 Bi-Weekly)         MASSACHUSETTS MUTUAL LIFE INS.       Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$192.30 Bi-Weekly)         Were other (specify)       4038.30       P/R Deduction (\$192.30 Bi-Weekly)       255.76		Mailing Address 51 Andrew Dr			1		M M	_	D D	/ Y					
FEC ID number of contributing federal political committee.       C       38.46         Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co       Occupation (for Individual) Vice President - Distribution Strategy       Memo Item         Receipt For: Primary       General Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$38.46 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Corbett, Melvin, , MR., Mailing Address 11 Mountain Spring Rd       Date of Receipt         City Farmington       State CT       Zip Code 06032-1612       Date of Receipt         Maxe of Employer (tor Individual) MASSACHUSETTS MUTUAL LIFE INS.       Occupation (for Individual) EVP & Chief Investment Officer       Memo Item         Receipt For: Primary       General Other (specify)       Occupation (for Individual) MASSACHUSETTS MUTUAL LIFE INS.       P/R Deduction (\$192.30 Bi-Weekly)         SUBETOTAL of Receipts This Page (optional)															
Massachusetts Mutual)       Use President Distribution Strategy         Massachusetts Mutual Life Insurance Co       Vice President - Distribution Strategy         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       807.66         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Corbett, Melvin, , MR.,       Date of Receipt         Mailing Address 11 Mountain Spring Rd       CT         City       State       Zip Code         FEC ID number of contributing       C         federal political committee.       0         Name of Employer (for Individual)       Occupation (for Individual)         MASSACHUSETTS MUTUAL LIFE INS.       Aggregate Year-to-Date ▼         Primary       General       Occupation (for Individual)         Massachusetts This Page (optional)		-	C												
Primary       General         Other (specify) <ul> <li>Aggregate rear to Date 1</li> <li>B07.66</li> </ul> P/R Deduction (\$38.46 Bi-Weekly)          Full Name of Individual (Last, First, Middle Initial) or Full Organization Name          Date of Receipt          C. Corbett, Melvin, , MR.,           Date of Receipt          Mailing Address 11 Mountain Spring Rd          Date of Receipt          City       State       Zip Code         FEC ID number of contributing federal political committee.          C          Name of Employer (for Individual)       Occupation (for Individual)         MASSACHUSETTS MUTUAL LIFE INS.          Aggregate Year-to-Date ▼          Primary       General          Aggregate Year-to-Date ▼          Other (specify)          Aggregate (optional)				•			Memo Item								
C. Corbett, Melvin, , MR.,       Date of Receipt         Mailing Address 11 Mountain Spring Rd       Image: City         City       State       Zip Code         Farmington       CT       06032-1612         FEC ID number of contributing federal political committee.       C       10       17       2018         Name of Employer (for Individual)       Occupation (for Individual)       192.30       192.30         MASSACHUSETTS MUTUAL LIFE INS.       C       Memo Item       P/R Deduction (\$192.30 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional)       4038.30       P/R Deduction (\$192.30 Bi-Weekly)       255.76		Primary General	Aggregate	Yea			P/R Ded	uctio	n (\$38.4	46 Bi-We	eekly)				
City       State       Zip Code       Transaction ID : PR1929995862518         Farmington       C       06032-1612       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       192.30         Name of Employer (for Individual)       Occupation (for Individual)       192.30         MASSACHUSETTS MUTUAL LIFE INS.       EVP & Chief Investment Officer       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$192.30 Bi-Weekly)         Other (specify)       4038.30       255.76	с.		al) or Full O	rga	nization Name		Date o	f Rec	eipt						
Farmington       CT       06032-1612       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       192.30         Name of Employer (for Individual)       Occupation (for Individual)       192.30         MASSACHUSETTS MUTUAL LIFE INS.       EVP & Chief Investment Officer       Memo Item         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$192.30 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional)       255.76       255.76		Mailing Address 11 Mountain Spring Rd						/		/ Y					
FEC ID number of contributing federal political committee.       C       192.30         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         MASSACHUSETTS MUTUAL LIFE INS.       EVP & Chief Investment Officer       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$192.30 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional)		-				_									
Marke of Enipoyer (for individual)       Coccupation (for individual)         MASSACHUSETTS MUTUAL LIFE INS.       EVP & Chief Investment Officer         Receipt For:       Aggregate Year-to-Date ▼         Other (specify)       4038.30         SUBTOTAL of Receipts This Page (optional)		FEC ID number of contributing	С							sceipt tr					
Primary       General         Other (specify)       4038.30         SUBTOTAL of Receipts This Page (optional)       255.76		MASSACHUSETTS MUTUAL LIFE INS.		•			N	lemo	ltem						
		Primary General	Aggregate					P/R Deduction (\$192.30 Bi-Weekly)							
TOTAL This Period (last page this line number only)	⊢						Ľ.			9	2	55.76	7		

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	EMIZED RECEIPTS		for each category of the	<b>४</b> 11a │ 11b │ 11c │ 12							
			Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and S for commercial purposes, other than using the			rson for the purpose of soliciting contributions							
$\setminus$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu										
Α.	Full Name of Individual (Last, First, Middle Init O CONNELL, TIMOTHY, DAVID, ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 15 WEBSTER PL			M M / D D / Y Y Y Y 10 17 2018							
	City NEWTOWN	State CT	Zip Code 06470-1837	Transaction ID : PR1930041462518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		30.94							
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.15	P/R Deduction (\$15.47 Bi-Weekly)							
В.	Full Name of Individual (Last, First, Middle Init Williams, Eleanor, P, MS.,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 57 Clairmont St			10 / Y Y Y Y 10 17 2018							
	City	State MA	Zip Code	Transaction ID : PR1934307462518							
	Longmeadow	IVIA	01106-1001	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		9.62							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) President - Strategic Developmen	Memo Item							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$9.62 Bi-Weekly)							
	Other (specify) V		202.02	The Deduction (\$3.02 Di-Weekly)							
	Full Name of Individual (Last, First, Middle Init ENNES, Eric, A, MR.,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 1824 Chestnut Ave			10 / D D / Y Y Y Y 10 17 2018							
	City Charlotte	State NC	Zip Code 28205-3018	Transaction ID : PR1934311262518							
	FEC ID number of contributing			Amount of Each Receipt this Period							
	federal political committee.	C		9.62							
	Name of Employer (for Individual) Barings LLC		upation (for Individual) aging Director	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼	_							
	Other (specify)		202.02	P/R Deduction (\$9.62 Bi-Weekly)							
SI	JBTOTAL of Receipts This Page (optional)		•	50.18							

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170			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17							
	y information copied from such Reports and S for commercial purposes, other than using the			rson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee							
Α.	Full Name of Individual (Last, First, Middle Init Frederick, Christine, , MS.,	ial) or Full C	organization Name	Date of Receipt							
	Mailing Address 2 Emerson Ln			10 / Y Y Y Y 10 17 2018							
	City	State CT	Zip Code	Transaction ID : PR1934313162518							
	Granby		06035-2713	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		28.85							
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
	MASSACHUSETTS MUTUAL LIFE INS.	Sen	ior Vice President - Compliance								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		COE 95	P/R Deduction (\$28.85 Bi-Weekly)							
	Other (specify) <b>v</b>		605.85								
В.	Full Name of Individual (Last, First, Middle Init FOSTER, REBECCA, SPECK, ,	ial) or Full C	organization Name	Date of Receipt							
	Mailing Address 1108 WILD PLUM			10 17 2018							
	City	State	Zip Code	Transaction ID : PR1934319762518							
	EDMOND	ОК	73025-2974	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		42.52							
	Name of Employer (for Individual) SELF	Occ Bro	upation (for Individual) ker	Memo Item							
	Receipt For:	Angregate	Year-to-Date ▼	-							
	Primary General Other (specify) ▼		214.97	P/R Deduction (\$21.26 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Init CARDILE, ANDREW, J, ,	ial) or Full C	organization Name	Date of Receipt							
	Mailing Address 3 CLARK DR			10 / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR1934321162518							
	CHERRY HILL	NJ	08034-1714	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		25.00							
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
	UBTOTAL of Receipts This Page (optional)		<b>r</b>	96.37							

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177			Use separate schedule(s)	(check on	ly one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c		2	17			
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the	purpose of	soliciting	g conti	ributio	ons			
	NAME OF COMMITTEE (In Full)								-			
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee							
Α.	Full Name of Individual (Last, First, Middle Initi GOLDSMITH, DANIEL, , ,	ial) or Full O	rganization Name	Date o	Date of Receipt							
	Mailing Address 1667 ARONA ST			M M 10	M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M							
	City SAINT PAUL	State MN	Zip Code 55108-2351									
	FEC ID number of contributing federal political committee.	С					1	03.32	2			
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	M	lemo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 983.43	P/R Dec	duction (\$10	3.32 Sem	ni-Mon	thly)				
В.	Full Name of Individual (Last, First, Middle Initi SMITH, ROBERT, JOHN, , JR	ial) or Full O	rganization Name	Date o	of Receipt							
	Mailing Address 2235 CASITAS WAY			10 / Y Y Y Y 2018								
	City	State	Zip Code		saction ID :							
	PALM SPRINGS	CA	92264-8202	Amoun	t of Each F	Receipt th	nis Per	riod				
	FEC ID number of contributing federal political committee.	С		121.04								
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1007.92	P/R Ded	luction (\$60	.52 Bi-We	ekly)					
с.	Full Name of Individual (Last, First, Middle Initi JALLAN, LALIT, , ,	ial) or Full O	rganization Name	Date o	of Receipt							
	Mailing Address 2114 CASTLEHEATH CT			10 <sup>M</sup>	/ D 17		201					
	City KATY	State TX	Zip Code 77450-6072		saction ID : It of Each F							
	FEC ID number of contributing federal political committee.	С			. , .	,		27.68	3			
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	N	lemo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 244.64	P/R Dec	duction (\$13	8.84 Bi-We	eekly)					
	UBTOTAL of Receipts This Page (optional)					, ,	2	52.04	1			

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)       X     11a       11b     11c       12       13     14       15     16       17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r								
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	ance Co	ompany Political Action	Committee					
A.		al) or Full O	Organization Name	Date of Receipt					
	Mailing Address 3715 WINDMILL CREEK DR	Ototo	Zin Oode	10 / D D / Y Y Y Y 10 17 2018					
	City RICHMOND	State TX	Zip Code 77407-3212	Transaction ID : PR1934337062518 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		16.42					
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 267.13	P/R Deduction (\$8.21 Bi-Weekly)					
В.	Full Name of Individual (Last, First, Middle Initia Blue, Dominic, , MR.,	al) or Full O	Organization Name	Date of Receipt					
	Mailing Address 28 Eastham Lane	01-1-	7. 0.1	10 / D D / Y Y Y Y 10 17 2018					
	City Longmeadow	State MA	Zip Code 01106-2342	Transaction ID : PR1947062962518 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		26.92					
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		cupation (for Individual) ad of Workplace Transformation	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)					
С.	Full Name of Individual (Last, First, Middle Initia Brown, Marc, A, MR.,	al) or Full O	Organization Name	Date of Receipt					
	Mailing Address 119 Winterwood			10 17 2018					
	City Windsor	State CT	Zip Code 06095-1052	Transaction ID : PR1950870362518           Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		17.50					
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) rmation Risk Consultant	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 367.50	P/R Deduction (\$17.50 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		•••••	60.84					
Г	OTAL This Period (last page this line number or	וy)	•••••						

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171			Use separate schedule(s)	(check or	ily or	ne)					
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a		11b	11c		2 6	17	
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	A not be sold or used by any pe ddress of any political committee	rson for the	pur pontrib	pose of	soliciting	cont	ributio	ons	
	NAME OF COMMITTEE (In Full)									-	
$\left \right\rangle$	Massachusetts Mutual Life Insul	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi LINDQUIST, JEREMY, , ,	ial) or Full O	rganization Name	Date of	of Re	eceipt					
	Mailing Address 6 ELIJAH HILL LN			M 10	/	D D 17	/ Y	ү 201	8	Ŷ	
	City LONDONDERRY	State NH	Zip Code 03053-3958				PR19508 eceipt th				
	FEC ID number of contributing federal political committee.	С					· ·		50.00	0	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		/lemo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R De	ducti	on (\$25.	00 Bi-We	ekly)			
В.	Full Name of Individual (Last, First, Middle Initi Bouyea, Michael, , MR.,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 2 Tigger Lane			10 / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Tran	sacti	ion ID :	PR19612	24726	2518	_	
	South Hadley	MA	01075-3315	Amour	nt of	Each R	eceipt th	is Pe	riod		
	FEC ID number of contributing federal political committee.	С				7			19.2	5	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) P - Continuous Improvement		/lemo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 404.25	P/R Deduction (\$19.25 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi LAROCHE, BRIAN, JAY, ,	ial) or Full O	rganization Name	Date o	of Re	eceipt					
	Mailing Address 2009 COMPASS CIR			M 10	/	D D 17	/ Y	201		Ŷ	
	City VIRGINIA BCH	State VA	Zip Code 23451-1713				PR1961: eceipt th				
	FEC ID number of contributing federal political committee.	С				, .	. y	_	50.00	0	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		/lemo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	P/R De	ducti	on (\$25.	00 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•			,	,	1	19.2	5	
Т	OTAL This Period (last page this line number of	only)					1.92		-		

#### SCHEDULE A (FEC Form 3X) 84175 D DECEIDTO

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	★     11a     11b     11c     12       13     14     15     16     17
	I Statements may not be sold or used by any pe the name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Ins	surance Company Political Action	Committee
Full Name of Individual (Last, First, Middle ARRANTS, BERKELY, , ,	· · · ·	Date of Receipt
Mailing Address 6036 POST OAK GREEN L		10 / D D / Y Y Y Y 10 17 2018
City HOUSTON	StateZip CodeTX77055-5500	Transaction ID : PR1961263962518
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	7
Primary     General       Other (specify) ▼	1250.00	P/R Deduction (\$62.50 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. Samuel, Sonu, , MR.,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 196 Creemer Ave		10 17 2018
City	State Zip Code	Transaction ID : PR1965198962518
Iselin	NJ 08830-2327	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.45
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) AVP Investment Risk	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.85	P/R Deduction (\$19.45 Bi-Weekly)
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name	
<b>c.</b> CHICK, Steven, Edward, ,		Date of Receipt
Mailing Address 124 ELM ST	State Zip Code	10 / 17 / 2018
City WILLIAMSTOWN	MA 01267-2576	Transaction ID : PR1965200762518
FEC ID number of contributing	C	Amount of Each Receipt this Period
federal political committee.		
Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 459.00	P/R Deduction (\$35.25 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).	▶	214.95

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

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1.77			Use separate schedule(s)	(check d	only c	one)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	a 🗌	11b 14	11c		2 6	17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for th	ne pu contri	rpose of	soliciting	g cont	ributio	ons	
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Comm	ittee	9					
Α.	Full Name of Individual (Last, First, Middle Initia WILSON, CARRIE, D., ,	al) or Full O	rganization Name	Date	of R	eceipt					
	Mailing Address 16134 BLACK OAK LN			M 1		/ D D D D D D D D D D D D D D D D D D D	) / Y	y 201	8		
	City ROGERS	State AR	Zip Code 72756-6354				PR19652 Receipt th				
	FEC ID number of contributing federal political committee.	С							30.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Mem	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	P/R D	educ	ion (\$15.	.00 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initia GARTNER, EDWARD, J, , III	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 88 MORNING GLORY RD			10 / D D / Y Y Y Y 2018							
	City	State	Zip Code	Tra	nsac	tion ID :	PR19652	21816	2518		
	WARREN	NJ	07059-7126	Amo	unt o	f Each F	Receipt th	is Pe	riod		
	FEC ID number of contributing federal political committee.	С				-		_	38.66	6	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Mem	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 222,68	P/R Deduction (\$19.33 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia ROBINETTE, CHRISTOPHER, , ,	al) or Full O	rganization Name	Date	of R	eceipt					
	Mailing Address 201 HERBERT CT			M 1		/ D D D D D D D D D D D D D D D D D D D		201		ſ	
	City BRENTWOOD	State TN	Zip Code 37027-7653				PR1980 Receipt th				
	FEC ID number of contributing federal political committee.	C				y :			41.68	3	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Mem	io Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.67	P/R D	educ	tion (\$20	.84 Bi-We	eekly)			
⊢	UBTOTAL of Receipts This Page (optional)			F	-	y .	5	1	10.34	1	

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	-	Use separate schedule(s)	(check only one)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		1b 11c 4 15	12	17				
Any information copied from such Report or for commercial purposes, other than u	s and Statements ma sing the name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpo	se of soliciting	contribut	ions				
NAME OF COMMITTEE (In Full)										
Aassachusetts Mutual Life	e Insurance Co	mpany Political Action	Committee							
Full Name of Individual (Last, First, M BRYAN, KATHRYN, , ,	ddle Initial) or Full O	rganization Name	Date of Rece	əipt						
Mailing Address 29900 EMERY RD			10 <sup>M</sup>	D D / Y 17	ү 2018	Y				
City CHAGRIN FALLS	State OH	Zip Code 44022-1664		n ID : PR19801 ach Receipt th		}				
FEC ID number of contributing federal political committee.	С				30.0	0				
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo I	tem						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 292.90	P/R Deduction	n (\$15.00 Bi-We	eekly)					
Full Name of Individual (Last, First, M B. GODSEY, JOSEPH, CORNE		rganization Name	Date of Receipt							
Mailing Address 17269 AVENIDA DE L	1		10 / D D / Y Y Y Y 10 17 2018							
City	State	Zip Code	Transaction	n ID : PR19801	61062518	;				
PACIFIC PALISADES	CA	90272-2004	Amount of Ea	ach Receipt th	is Period					
FEC ID number of contributing federal political committee.	С			<u> </u>	55.8	8				
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo I	tem						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 488.22	P/R Deduction (\$27.94 Bi-Weekly)							
Full Name of Individual (Last, First, M C. ASCIUTTO, MATTHEW, JC		rganization Name	Date of Rece	əipt						
Mailing Address 833 SURREY LN			10 <sup>M</sup>	D D / Y 17	2018	Y				
City GLENOLDEN	State PA	Zip Code 19036-1622		n ID : PR1990		3				
FEC ID number of contributing federal political committee.	С				35.7	2				
Name of Employer (for Individual)		upation (for Individual) rance Agent	Memo I	tem						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 228.58	P/R Deduction	า (\$17.86 Bi-We	eekly)					
SUBTOTAL of Receipts This Page (opti	onal)		,	, , , , , , , , , , , , , , , , , , ,	121.6	0				
TOTAL This Period (last page this line r	number only)									

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ıт.			Use separate schedule(s)	(che	ck onl	y or	ne)				
			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15		2	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson fo to sol	or the	pur ntrib	pose of	soliciting	g cont	ributio	ons
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Corr	nmitt	ee					
Α.	Full Name of Individual (Last, First, Middle Initi PARK, HYUNG JOON, , ,	al) or Full O	rganization Name	C	Date of	Re	ceipt				
	Mailing Address 6171 ORANGE AVE				<sup>M</sup> 10	1	D D D 17	/ Y	y 201	18	Ŷ
	City CYPRESS	State CA	Zip Code 90630-3330	A				PR1993 <sup>,</sup> eceipt th			
	FEC ID number of contributing federal political committee.	С			_					25.0	C
	Name of Employer (for Individual) SELF		ipation (for Individual) rance Agent		M	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/	'R Ded	uctio	on (\$12.	50 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initi FEMIA, JOSEPH, JONATHAN, ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 108 MAIN ST APT 1			10 / 17 / 2018							
	City	State	Zip Code		Trans	acti	on ID :	PR19932	21056	2518	
	TARRYTOWN	NY	10591-7608	A	mount	of	Each R	eceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С							_	25.0	C
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		M	emc	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 250.00	P/	R Ded	uctio	on (\$12.	50 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initi O'Grady, Thomas, , MR.,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 20 Heron Dr				<sup>M</sup> 10	1	D D 17	JL	y 201	8	
	City Somers	State CT	Zip Code 06071-1600				-	PR2002			
	FEC ID number of contributing federal political committee.	C			Amouni	to t	Each R	eceipt th	iis Pe	9.7	3
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) stigative Consultant		Μ	emo	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 204.33	P/	/R Ded	ucti	on (\$9.7	3 Bi-We	ekly)		
	UBTOTAL of Receipts This Page (optional)				-		y	,		59.73	3

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Massachusetts Mutual L	ife Insurance Co	mpany Political Action	Committee							
Full Name of Individual (Last, First FOWLER, Ian, M, MR.,	, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3865 Indian River	Dr E		10 17 Y Y Y Y Y 10 17							
City	State	Zip Code	Transaction ID : PR2006647562518							
Vero Beach	FL	32963-1404	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		38.50							
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item							
Barings LLC	Mar	aging Director								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General			P/R Deduction (\$38.50 Bi-Weekly)							
Other (specify) <b>v</b>		808.50								
Full Name of Individual (Last, First	, Middle Initial) or Full O	rganization Name								
B. SUSSMAN, EVAN, S, ,			Date of Receipt							
Mailing Address 400 SW 1ST AVE			10 / Y Y Y Y 2018							
City	State	Zip Code	Transaction ID : PR2006650162518							
FORT LAUDERDALE	FL	33301-3491	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		25.00							
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
Receipt For:		Year-to-Date ▼								
Other (specify) ▼		250.00	P/R Deduction (\$12.50 Bi-Weekly)							
Full Name of Individual (Last, First C. MASUR, JAMES, E, ,	, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6 TURTLE LN			10 / Y Y Y Y 10 17 2018							
City	State	Zip Code	Transaction ID : PR2006654062518							
DOVER	MA	02030-2053	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		30.00							
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 245.00	P/R Deduction (\$15.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page ( TOTAL This Period (last page this lin	. ,		93.50							

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IT.			Use separate schedule(s)	(check on	ly one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11b	11c		2 6 [	17			
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any pe Iddress of any political committee	rson for the	purpose c	f soliciting	g conti	ributic	ons			
	NAME OF COMMITTEE (In Full)								-			
	Massachusetts Mutual Life Insur	rance Co	ompany Political Action	Commit	tee							
Α.	Full Name of Individual (Last, First, Middle Initi BOTNER, RYAN, J, ,	al) or Full O	organization Name	Date c	of Receipt							
	Mailing Address 1414 57TH AVE S			M M	/ D		y 201	Y Y 8				
	City FARGO	State ND	Zip Code 58104-7215		saction ID							
	FEC ID number of contributing federal political committee.	С				1.95		83.32	2			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		lemo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.37	P/R Dec	duction (\$4	1.66 Bi-Wo	eekly)					
в.	Full Name of Individual (Last, First, Middle Initi BACH, JOSHUA, , ,	al) or Full O	organization Name	Date o	of Receipt							
	Mailing Address 101 28TH AVE NE			10 / D D / Y Y Y Y 10 17 2018								
	City	State	Zip Code	Trans	saction ID	: PR2006	66046	2518				
	FARGO	ND	58102-1704	Amoun	nt of Each	Receipt th	nis Per	riod				
	FEC ID number of contributing federal political committee.	С						41.68	3			
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	N	lemo Item							
	Receipt For:	Aggregate	Year-to-Date ▼ 416.67	P/R Deduction (\$20.84 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi MOSHER, SCOTT, , ,	al) or Full O	organization Name	Date o	of Receipt							
	Mailing Address 2605 22ND AVE			10 <sup>M</sup>	/ D		201					
	City MONROE	State WI	Zip Code 53566-3625		saction ID							
	FEC ID number of contributing federal political committee.	С						32.14	1			
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		lemo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 235.71	P/R Dec	duction (\$1	6.07 Bi-W	eekly)					
	UBTOTAL of Receipts This Page (optional)			F		y	1	57.14	ŀ			
Т	OTAL This Period (last page this line number of	only)	····· •					- 10				

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IT.			Use separate schedule(s)	(check o	nly o	ne)	L				
11			for each category of the Detailed Summary Page	★ 11a 13		11b 14	11c	12	Γ	17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for th	e pui contril	rpose of	soliciting	contrit	outio littee	ns	
$\setminus$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commi	ttee	;					
Α.	Full Name of Individual (Last, First, Middle Initi MELITO, MICHAEL, , ,	al) or Full O	rganization Name	Date	of R	eceipt					
	Mailing Address 7 S MADISON AVE			M 10		/ D D 17	/ Y	ү 2018	Y	]	
	City UPPER DARBY	State PA	Zip Code 19082-2818			tion ID : Each R					
	FEC ID number of contributing federal political committee.	С						2	5.00		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Mem	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R De	educt	ion (\$12.	50 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi CHOU, Jack, Lin, ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 108 HEATHER MIST			10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	City	State Zip Code				tion ID :	PR20085	059625	518	_	
	IRVINE	CA	92618-4812	Amou	unt of	Each R	eceipt th	is Perio	bd		
	FEC ID number of contributing federal political committee.	С				-		3	5.72		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Mem	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 210.72	P/R De	educti	ion (\$17.8	86 Bi-We	eekly)			
с.	Full Name of Individual (Last, First, Middle Initi DALEY, MICHAEL, , ,	al) or Full O	rganization Name	Date	of R	eceipt					
	Mailing Address 478 MAYMONT DR			M 10		/ D D 17	/ Y	2018	Y	]	
	City BALLWIN	State MO	Zip Code 63011-3465			tion ID : Each R					
	FEC ID number of contributing federal political committee.	С				,	, j		0.92		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Mem	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 218.17	P/R D	educt	ion (\$20.	46 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•		-	,	. ,	10	1.64	_	
т	OTAL This Period (last page this line number o	nly)							-		

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1771			Use separate schedule(s)	(check only one)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
	y information copied from such Reports and St for commercial purposes, other than using the			rson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
$\left \right\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee					
Α.	Full Name of Individual (Last, First, Middle Initi TOPOLSKI, Joseph, Robert, ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 10 LONG QUARTER RD			M M / D D / Y Y Y Y 10 17 2018					
	City	State	Zip Code	Transaction ID : PR2011965262518					
	NEW FREEDOM	PA	17349-8343	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		35.92					
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item					
	SELF	Insu	irance Agent						
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General			P/R Deduction (\$17.96 Bi-Weekly)					
	Other (specify) <b>v</b>		210.18						
	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name						
В.	GOHRES, SCOTT, ALAN, ,			Date of Receipt					
	Mailing Address 950 DEWING AVE APT 108			10 / Y Y Y Y Y 2018					
	City	State	Zip Code	Transaction ID : PR2011974762518					
	LAFAYETTE	CA	94549-4294	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		20.82					
	Name of Employer (for Individual) SELF	Occ Bro	upation (for Individual) ker	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		208.37	P/R Deduction (\$10.41 Bi-Weekly)					
_	Full Name of Individual (Last, First, Middle Initi PIME, MATTHEW, JOSEPH, ,	ial) or Full O	rganization Name	Date of Receipt					
0.	Mailing Address 23843 OXNARD ST			10 17 2018					
	City	State	Zip Code	Transaction ID : PR2011982562518					
	WOODLAND HILLS	CA	91367-2942	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		30.00					
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 244.71	P/R Deduction (\$15.00 Bi-Weekly)					
⊢	UBTOTAL of Receipts This Page (optional)		<b>r</b>	86.74					

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IT.			Use separate schedule(s)	(chec	k only	/ or	ne)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b>	11a 13		11b 14	11c		12 16	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for	the	purp ntrib	oose of	soliciting	g con	tributi	ons
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Com	nitte	ee					
Α.	Full Name of Individual (Last, First, Middle Initi MCCONNELL, DAVID, W., ,	al) or Full O	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 194 HAMILTON AVE	1-		ľ	10	/	D D 17	/ Y	ү 20	18 18	Y
	City WESTERVILLE	State OH	Zip Code 43081-1516				on ID : I Each Re				
	FEC ID number of contributing federal political committee.	С								18.5	9
	Name of Employer (for Individual) SELF	Occu Brok	upation (for Individual) ser		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207.06	P/R	Dedu	uctio	on (\$18.	59 Bi-We	eekly)	)	
в.	Full Name of Individual (Last, First, Middle Initi Belletsky, Marc, R, MR.,	al) or Full O	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 9 Moosehorn Hill Rd			10 / Y Y Y Y Y 2018							
	City	State	Zip Code		rans	acti	on ID : F	PR2012	00416	62518	
	West Granby	СТ	06090-1007	An	nount	of	Each Re	eceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	С								15.4	0
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) anced Markets Consultant		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.40	P/R	Dedu	uctio	on (\$15.4	40 Bi-We	eekly)		
с.	Full Name of Individual (Last, First, Middle Initi ROBERTSON, WILLIAM, SHANE,		rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 5100 FM 126			ľ	10 <sup>M</sup>	/	D D 17	/ Y	201	18 <sup>°</sup>	Y
	City NOLAN	State TX	Zip Code 79537-1702				i <b>on ID</b> : I Each Re				1
	FEC ID number of contributing federal political committee.	С			nount	OI			IIS PE	50.0	0
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Me	emc	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00						eekly	)	
s	UBTOTAL of Receipts This Page (optional)		•				,	,		83.9	9
Т	OTAL This Period (last page this line number o	nly)					<b>T</b>			- 49	

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IT.			Use separate schedule(s)	(check on	ly on	e)	L				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13		11b	11c		Г	17	
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the	purp	ose of	15 soliciting om such	contr	ributic	ons	
<u>,</u>	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi ENNIS, RICHARD, , , III	al) or Full O	rganization Name	Date c	of Rec	ceipt					
	Mailing Address 3318 CRESWELL ST			10	/	D D D 17	/ Y	ү 201	ү ү 8		
	City PHILADELPHIA	State PA	Zip Code 19129-1707				PR2016 eceipt th				
	FEC ID number of contributing federal political committee.	С				<b>y</b>			25.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		lemo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Dec	ductio	n (\$12.5	50 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initi TABORDA, FAVIO, JAVIER, ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 231 MENDOZA AVE			10 / Y Y Y Y 10 17 2018							
	City	State	Zip Code				PR20166				
	CORAL GABLES	FL	33134-3943	Amoun	nt of E	Each Re	eceipt th	is Per	riod		
	FEC ID number of contributing federal political committee.	С				,			50.00	)	
	Name of Employer (for Individual) SELF	Occi Brol	upation (for Individual) ker		lemo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 485.00	P/R Deduction (\$25.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi SCOTT, SETH, Michael, ,	al) or Full O	rganization Name	Date o	of Red	ceipt					
	Mailing Address 1127 BALDWIN ST			M N 10	/	D D 17	/ Y	2018			
	City MECHANICSBURG	State PA	Zip Code 17055-3935			-	PR2016 eceipt th				
	FEC ID number of contributing federal political committee.	С				y	y		47.62	2	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 404.75	P/R Dec	ductio	on (\$23.8	81 Bi-We	eekly)			
⊢	UBTOTAL of Receipts This Page (optional)					y	,	1	22.62	2	
11	OTAL This Period (last page this line number of	niiy)	····· •			,		1. A.			

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page	<b>X</b> 11a	a 🗌	11b 14	11c 15	12	Г	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for th to solicit	ne pu contri	rpose of butions f	soliciting	contri comn	butio nittee	ns 9.		
$\left[ \right]$	NAME OF COMMITTEE (In Full)											
Aassachusetts Mutual Life Insurance Company Political Action Committee												
Α.	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name Murphy, Richard, , MR.,				Date of Receipt							
	Mailing Address 67 Sewall Woods Rd				10 / Y Y Y Y Y 10 17 2018							
	City Melrose	State MA	Zip Code 02176-1709			tion ID : Each R						
	FEC ID number of contributing federal political committee.	С		25.00								
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) P Project Mgmt									
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$25.00 Bi-Weekly)									
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FIORE, ANTHONY, , ,				of R	eceipt						
	Mailing Address 31314 E RUTLAND ST					/ D D 17	/ Y	2018	Y	]		
	City	State	Zip Code	Tra	nsac	tion ID :	PR20237	14262	518			
	BEVERLY HILLS	MI	48025-5424	Amo	unt of	Each R	eceipt th	is Peri	od			
	FEC ID number of contributing federal political committee.	С		33.40								
	Name of Employer (for Individual) SELF	Occi Insu	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 233.22			P/R Deduction (\$16.70 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MASON, PHILIP, , ,					eceipt						
	Mailing Address 145 FOX RUN				10 17 Y Y Y Y 2018							
	City EASTON	State PA	Zip Code 18042-8773	Transaction ID : PR20239255625 Amount of Each Receipt this Perio								
	FEC ID number of contributing federal political committee.	С				y .		1	7.54			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Mem	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	P/R Deduction (\$3.70 Bi-Weekly)									
⊢	UBTOTAL of Receipts This Page (optional)			F	-	y .	,	7	5.94	-		
ΙĨ	OTAL This Period (last page this line number of	only)	••••••			-			-			

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)													
			for each category of the Detailed Summary Page	★ 11a	11b	11c		2	17								
Any	y information copied from such Reports and Sta for commercial purposes, other than using the	atements maname and a	ay not be sold or used by any per address of any political committee	rson for the	purpose of	f soliciting	g cont	ributio	ons								
	NAME OF COMMITTEE (In Full)																
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committ	tee												
	Full Name of Individual (Last, First, Middle Initia Dickey, Arthur, J, MR.,	ll Name of Individual (Last, First, Middle Initial) or Full Organization Name ickey, Arthur, J, MR.,						Date of Receipt									
	Mailing Address 160 Lakeshore Drive				10 / Y Y Y Y 2018												
-	City Marlborough	State MA	Zip Code 01752-4211		Transaction ID : PR203065416 Amount of Each Receipt this Per												
	FEC ID number of contributing federal political committee.	9.73															
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		cupation (for Individual) siness Operations Director	Memo Item													
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 204.33	P/R Deduction (\$9.73 Bi-Weekly)													
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Guerrera, Carlo, , MR.,				f Receipt												
	Mailing Address 1 Whispering Rod Road	10 <sup>M</sup>	/ D 17		201	Y Y 8	r										
	City	State	Zip Code		saction ID :												
-	Farmington	CO	06085-1436	Amount of Each Receipt this Pe				riod									
	FEC ID number of contributing federal political committee.	С		9.65													
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Memo Item															
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ , 202.65	P/R Deduction (\$9.65 Bi-Weekly)													
	Full Name of Individual (Last, First, Middle Initia Provenzano, Louise, , MS.,	Date o	f Receipt														
	Mailing Address 316 Wolcott Street				M M / D D / Y Y Y Y 10 17 2018												
	City Bristol	State CT	Zip Code 06010-6427	Transaction ID : PR203069866 Amount of Each Receipt this Pe													
	FEC ID number of contributing federal political committee.	15.40															
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	N	lemo Item														
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 323.40	P/R Deduction (\$15.40 Bi-Weekly)													
$\vdash$	JBTOTAL of Receipts This Page (optional)					1 1		34.78	3								
FOR LINE NUMBER:

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IТ	EMIZED RECEIPTS		(check only one)	
11	TEWIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
$\langle \rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee
	Full Name of Individual (Last, First, Middle Ini Concepcion, Luis, O, MR.,	tial) or Full O	rganization Name	Data of Descipt
Α.	Mailing Address 12 Hawks Ridge			Date of Receipt
	Maning Address 12 Hawks Kluge			10 17 2018
	City	State	Zip Code	Transaction ID : PR2030723162518
	Avon	СТ	06001-4417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		19.25
	Name of Employer (for Individual)		upation (for Individual) ? & Counsel	Memo Item
	Massachusetts Mutual Life Insurance Co Receipt For:			
	Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$19.25 Bi-Weekly)
	Other (specify) <b>v</b>		404.25	
_	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name	
В.	Norris, Russell, A, MR.,			Date of Receipt
	Mailing Address 21 Greaves Rd W			10 / D D / Y Y Y Y 2018
	City Stafford Springs	State CT	Zip Code 06076-3018	Transaction ID : PR2030740262518
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual)	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary     General       Other (specify) ▼		322,98	P/R Deduction (\$15.38 Bi-Weekly)
	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name	-
C.	Anderson, Joshua, , MR.,			Date of Receipt
	Mailing Address 144 Peachtree Road			10 / D D / Y Y Y Y 10 17 2018
	City Mountain Brk	State AL	Zip Code 35213-2931	Transaction ID : PR2030746862518
	Mountain Brk		33213-2931	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		9.73
	Name of Employer (for Individual)		upation (for Individual)	Memo Item
	Massachusetts Mutual Life Insurance Co Receipt For:	1	s Representative	
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 204.33	P/R Deduction (\$9.73 Bi-Weekly)
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number		<b>r</b>	44.36

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		Use separate schedule(s)	(check only	one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11b	11c	12 16	17		
Any information copied from such for for commercial purposes, other t	Reports and Statements ma han using the name and ad	y not be sold or used by any pe ddress of any political committee	rson for the p	ourpose of s	oliciting c	contributi	ions		
NAME OF COMMITTEE (In Full		·····							
		mpany Political Action	Committe	e					
Full Name of Individual (Last, Fi A. Glynn, Dennis, E, MR.,	rst, Middle Initial) or Full O	ganization Name	Date of	Receipt					
Mailing Address 37 Daniel Ridge			<sup>M</sup> M 10	/ D D 17	/ Y	ү ү 2018	Y		
City Westfield	State MA	Zip Code 01085-4151		action ID : P of Each Red			3		
FEC ID number of contributing federal political committee.	C				-9	19.2	25		
Name of Employer (for Individua Massachusetts Mutual Life Insura		pation (for Individual) luct Management Consultant	Me	mo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 404.25	P/R Dedu	iction (\$19.2	5 Bi-Wee	kly)			
Full Name of Individual (Last, Fi B. Englerth, Troy, K, MR.,	rst, Middle Initial) or Full O	ganization Name	Date of	Receipt					
Mailing Address 7253 W Melinda	I Lane		10	/ D D 17		y y 2018	Y		
City	State	Zip Code		ction ID : P			1		
Glendale	AZ	85308-9538	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C				- Jp.	19.2	:5		
Name of Employer (for Individua Massachusetts Mutual Life Insura		upation (for Individual) 9 Group Business	Memo Item						
Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 404.25	P/R Dedu	ction (\$19.28	5 Bi-Weel	<ly)< td=""><td></td></ly)<>			
Full Name of Individual (Last, Fi C. Harris, Patricia, L, MS.,	rst, Middle Initial) or Full O	ganization Name	Date of	Receipt					
Mailing Address 22 Charolais W	-		<sup>M</sup> M	/ D D 17		y 2018	Y		
City Burlington	State CT	Zip Code 06013-1627		of Each Red			3		
FEC ID number of contributing federal political committee.	С					9.6	2		
Name of Employer (for Individua Massachusetts Mutual Life Insura		pation (for Individual) President - RS Product Managem		emo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02	P/R Dedu	uction (\$9.62	Bi-Week	ly)			
SUBTOTAL of Receipts This Page	optional)	•		5		48.1	2		
TOTAL This Period (last page this	line number only)	▶							

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IT.			Use separate schedule(s)	(check on	nly or	ne)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a		11b	11c		2 6 [	17	
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any pe ddress of any political committee	erson for the	e purpontrib	pose of	soliciting	conti	ributic	ons	
	NAME OF COMMITTEE (In Full)									-	
	Massachusetts Mutual Life Insul	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi SEDORA, ANDREW, J, ,	ial) or Full O	rganization Name	Date of	of Re	eceipt					
	Mailing Address 65 WIMBLETON WAY			10 / D D / Y Y Y Y 10 17 2018						ſ	
	City RED LION	State PA	Zip Code 17356-8277				PR20307 eceipt th				
	FEC ID number of contributing federal political committee.	С				-y			25.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		/lemc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R De	ducti	on (\$12.	50 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initi AURICCHIO, JASON, , ,	ial) or Full O	rganization Name	Date o	of Re	eceipt					
	Mailing Address 6078 SW 33RD ST			M 10	/	D D 17	/ Y	2018	Y Y 8		
	City	State	Zip Code	Tran	sacti	on ID :	PR20387	709062	2518		
	MIAMI	FL	33155-4906	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				-			27.68	3	
	Name of Employer (for Individual) SELF		upation (for Individual) Jrance Agent	N	/lemc	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 244.64	P/R Dec	ductio	on (\$13.8	84 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initi ZIMMER, WILLIAM, , ,	ial) or Full O	rganization Name	Date o	of Re	eceipt					
	Mailing Address 2213 HAMRICK DR			M 10		D D D 17	JL	2018	8		
	City RALEIGH	State NC	Zip Code 27615-2512				PR2038 eceipt th				
	FEC ID number of contributing federal political committee.	С				<b>,</b> .	- y		28.24	4	
	Name of Employer (for Individual) SELF	Occu Brok	upation (for Individual) ær		/lemo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 233.08	P/R De	ducti	on (\$14.	12 Bi-We	eekly)			
⊢	UBTOTAL of Receipts This Page (optional)		F	F	-	,	5		80.92	2	
Г	OTAL This Period (last page this line number of	only)	····· •			_					

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ידו			Use separate schedule(s)	(check on	ily or	ne)				
111	EMIZED RECEIPTS	for each category of the Detailed Summary Page					11c		2	17
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any pe ddress of any political committee	rson for the to solicit co	pur pontrib	14 pose of outions fi	soliciting	cont	ributio	ons
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insul	ance Co	ompany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Initi HARTUNG, BRET, A, ,	al) or Full O	organization Name	Date of	of Re	eceipt				
	Mailing Address 4317 N DAMEN AVE			10 17 Y Y Y Y						Y
	City CHICAGO	State IL	Zip Code 60618-1705				PR20387 eceipt th			
	FEC ID number of contributing federal political committee.	С						1	125.00	0
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		lemo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00	P/R De	ducti	on (\$62.	50 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initi ELMTALAB, SAHAND, , ,	al) or Full O	organization Name	Date o	of Re	eceipt				
	Mailing Address 4295 WESTON LN N			10	/	D D 17	/ Y	201	ү ү 8	Y
	City	State	Zip Code				PR20387			
	PLYMOUTH	MN	55446-2502	Amour	nt of	Each R	eceipt th	is Pe	riod	_
	FEC ID number of contributing federal political committee.	С							22.00	0
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 206.02	P/R Dec	ductio	on (\$11.(	00 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initi CIAMPITTI, GARY, LAWRENCE,		organization Name	Date o	of Re	eceipt				
	Mailing Address 100 KINGS POINT DR APT 70			M 10	/	D D 17	/ Y	201		Y
	City SUNNY ISLES BEACH	State FL	Zip Code 33160-4788				PR2041 eceipt th			
	FEC ID number of contributing federal political committee.	С				, .	. <u>,</u>		30.36	6
	Name of Employer (for Individual) SELF	upation (for Individual) irance Agent		/lemo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 239.28	P/R De	ducti	on (\$15.	18 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)		•			,	y	1	77.36	6
Т	OTAL This Period (last page this line number of	only)	••••••						- 10	

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IT.			Use separate schedule(s)	(check on	ly one)				
11			for each category of the Detailed Summary Page	¥ 11a 13	11b	11c	12	г	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any pe ddress of any political committee	rson for the	purpose of	f soliciting	contri	ibutio	ns
	NAME OF COMMITTEE (In Full)								-
$\left \right\rangle$	Massachusetts Mutual Life Insur	rance Co	mpany Political Action	Committ	ee				
Α.	Full Name of Individual (Last, First, Middle Initi HAYWARD, JUSTIN, , ,	ial) or Full O	rganization Name	Date o	f Receipt				
	Mailing Address 16 WESTON RD			10 <sup>M</sup>	/ D 17		۲ 2018	ү ү З	
	City WELLESLEY	State MA	Zip Code 02482-6313		saction ID : t of Each F				
	FEC ID number of contributing federal political committee.	С			· · ·		4	41.68	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	M	lemo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.67	P/R Dec	duction (\$20	0.84 Bi-W€	eekly)		
в.	Full Name of Individual (Last, First, Middle Initi MCGEE, Daniel, J, MR.,	ial) or Full O	rganization Name	Date o	f Receipt				
	Mailing Address 10812 Alexander Mill Dr			10	/ D 17		2018		
	City	State	Zip Code		action ID :				
	Charlotte	NC	28277-2701	Amount of Each Receipt this F					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	M	lemo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1211.70	P/R Ded	luction (\$57	.70 Bi-We	ekly)		
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi LEE, SEAN, S, ,	ial) or Full O	rganization Name	Date o	f Receipt				
	Mailing Address 18809 CHRISTINA AVE			10	/ D 17		2018		1
	City CERRITOS	State CA	Zip Code 90703-8420		saction ID : t of Each F				_
	FEC ID number of contributing federal political committee.	С			, , , , , , , , , , , , , , , , , , ,	,	2	27.94	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 244.11	P/R Dec	duction (\$13	8.97 Bi-We	eekly)		
⊢	UBTOTAL of Receipts This Page (optional)						12	27.32	

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175			Use separate schedule(s)	(check onl	ly one)				
	MIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c		Г	17
Any or fo	information copied from such Reports and Sta or commercial purposes, other than using the	atements managements managements and a	ay not be sold or used by any per address of any political committee	son for the	purpose of	of soliciting	g contr	ibutio	ons
<u> </u>	IAME OF COMMITTEE (In Full)		······································						
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committ	ee				
	ull Name of Individual (Last, First, Middle Initia Parent, Rachel, A, MS.,	al) or Full C	Drganization Name	Date o	f Receipt				
N	Aailing Address 5 Pembroke Dr			M M 10	/ D		Y 2018	ү ү 8	
	City Suffield	State CT	Zip Code 06078-2096		<b>saction ID</b> t of Each				
	EC ID number of contributing ederal political committee.	С						55.56	;
Ν	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		cupation (for Individual) D - Corporate	M	lemo Item				
F	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1166.76	P/R Ded	duction (\$5	5.56 Bi-W	eekly)		
	ull Name of Individual (Last, First, Middle Initia HENDERLONG, Michael, E, MR.,	al) or Full C	Drganization Name	Date o	f Receipt				
_	Nailing Address 41 Beaver Creek Ct			M M 10	/ D		ې 2018	Y Y 3	
	City	State	Zip Code		action ID				
- -	Far Hills	NJ	07931-2594	Amoun	t of Each	Receipt th	nis Per	iod	
	EC ID number of contributing ederal political committee.	С			-	-	:	38.50	
	Name of Employer (for Individual) Barings LLC		cupation (for Individual) Inaging Director	Memo Item					
Ē	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ , 808.50	P/R Ded	luction (\$3	8.50 Bi-We	eekly)		
	ull Name of Individual (Last, First, Middle Initi HARDTNER, QUINTIN, THEODO		Drganization Name	Date o	f Receipt				
N	Nailing Address 4142 FAIRFIELD AVE			<sup>M</sup> 10	/ D		2018		1
	Dity SHREVEPORT	State LA	Zip Code 71106-1018		saction ID				
	EC ID number of contributing ederal political committee.	С			- y	. ,		21.42	
5	lame of Employer (for Individual) SELF		cupation (for Individual) urance Agent	M	lemo Item				
F	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 257.13	P/R Dec	duction (\$1	0.71 Bi-W	eekly)		
su	BTOTAL of Receipts This Page (optional)					. ,	1'	15.48	
то	TAL This Period (last page this line number o	nly)				-		-	

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	ance Co	mpany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Initia MCALPIN, MARTIN, JAMES, , Mailing Address 3527 PETE MILLER TRL N	l) or Full Or	ganization Name	Date of Receipt
	City	State	Zip Code	10 17 2018 Transaction ID : PR2076543162518
	STILLWATER	MN	55082-3616	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		27.94
	Name of Employer (for Individual) SELF		pation (for Individual) ance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 244.11	P/R Deduction (\$13.97 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initia MORGAN, ADAM, , ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 4914 DOLLARD DR			10 17 2018
	City RICHMOND	State VA	Zip Code 23230-2417	Transaction ID : PR2076547262518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		27.94
	Name of Employer (for Individual) SELF		pation (for Individual) rance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 244.11	P/R Deduction (\$13.97 Bi-Weekly)
<u></u>	Full Name of Individual (Last, First, Middle Initia DOSS CARTER, AL, JERMAINE, ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 4605 CAHUENGA BLVD APT 3	06		10 / Y Y Y Y 10 17 2018
	City TOLUCA LAKE	State CA	Zip Code 91602-1583	Transaction ID : PR2076565962518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF		pation (for Individual) ance Agent	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	80.88
т	OTAL This Period (last page this line number on	ıly)	••••••	· · · · · · · · · · · · · · · · · · ·

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			Use separate schedule(s)	(check o	(check only one)						
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	nformation copied from such Reports and Sta										
· · · · · ·	AME OF COMMITTEE (In Full)				onun	Julions					
	lassachusetts Mutual Life Insura	ance Co	mpany Political Action	Commi	ttee	•					
<b>A</b> ⊢	ll Name of Individual (Last, First, Middle Initia IOLMES, COLIN, , ,	al) or Full O	rganization Name	Date	of Re	eceipt					
	ailing Address 14310 GOLDTHREAD DR			10		D 17	) / Y	y y 2018	Y		
Ci <sup>-</sup> N	ty OBLESVILLE	State IN	Zip Code 46060-4752					184062518 nis Period	8		
	EC ID number of contributing deral political committee.	С						35.4	12		
	ame of Employer (for Individual) ELF		upation (for Individual) rance Agent		Mem	o Item					
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 229.17	P/R De	educti	ion (\$17	.71 Bi-We	eekly)			
	ll Name of Individual (Last, First, Middle Initia MITH, BRUCE, DAVID, ,	al) or Full O	rganization Name	Date	of Re	eceipt					
	ailing Address 2654 FRANCES ST			10		D 17	) / Y	2018	Y		
Ci <sup>.</sup> Bl	ty ELLMORE	State NY	Zip Code 11710-5402					184762518 his Period	3		
	C ID number of contributing deral political committee.	C						25.0	00		
	ame of Employer (for Individual) ELF	Occi Insu		Mem	o Item						
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R De	educti	on (\$12	.50 Bi-We	eekly)			
	III Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date	of Re	eceipt					
	ailing Address 19770 CAMINO ARROYO			10	)	D 17	J L	2018			
Ci <sup>.</sup> M	<sup>I</sup> Y /ALNUT	State CA	Zip Code 91789-1716					20036251	8		
	EC ID number of contributing deral political committee.	С				y .		20.8	32		
SE	ame of Employer (for Individual)		upation (for Individual) rance Agent		Mem	o Item					
	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 208.37	P/R De	educt	ion (\$10	.41 Bi-W	eekly)			
SUB	TOTAL of Receipts This Page (optional)		•••••	Ľ		y .		81.2	24		
тот	AL This Period (last page this line number or	nly)	••••••	_ <u>L</u> .		-					

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)
			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
$\backslash$	Massachusetts Mutual Life Insu	irance Co	mpany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Ini Todd, Lisa, M, MS.,	tial) or Full O	rganization Name	Date of Receipt
	Mailing Address 945 E Broadway			10 17 2018
	City	State	Zip Code	Transaction ID : PR2106069762518
	Boston	MA	02127-2479	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		19.25
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	Massachusetts Mutual Life Insurance Co		P Sales	-
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			P/R Deduction (\$19.25 Bi-Weekly)
	Other (specify) <b>v</b>		404.25	
_	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name	
в.	FLYNN, Daniel, L, MR.,			Date of Receipt
	Mailing Address 7917 Skye Lochs Dr	State	Zip Code	10 17 2018
	Waxhaw	NC	28173-7493	Transaction ID : PR2106071662518
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual) Barings LLC		upation (for Individual)	Memo Item
	Receipt For:		haging Director	
	Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		, 1159.07	P/R Deduction (\$55.56 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Ini Sebastian, Scott, E, MR.,	tial) or Full O	rganization Name	Date of Receipt
	Mailing Address 43 Lexington Rd			10 / Y Y Y Y 10 17 2018
	City	State	Zip Code	Transaction ID : PR2106072862518
	West Hartford	СТ	06119-1748	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		9.62
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) & Counsel	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			84.43

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177			Use separate schedule(s)	(check onl	y one)				
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12	Г	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	erson for the	purpose of	soliciting	contrib	oution	าร
$\left[ \right]$	NAME OF COMMITTEE (In Full)	_		_					
$\square$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committ	ee				
Α.	Full Name of Individual (Last, First, Middle Initi SNITKO, CLARK, , ,	al) or Full O	Organization Name	Date o	f Receipt				
	Mailing Address 4910 EL DON DR			10	/ D [	) / Y	ү ү 2018	Y	]
	City ROCKLIN	State CA	Zip Code 95677-3385		saction ID : t of Each F				
	FEC ID number of contributing federal political committee.	С			-		2	5.00	
	Name of Employer (for Individual) SELF		upation (for Individual) Jrance Agent	М	emo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Ded	luction (\$12	.50 Bi-We	ekly)		
в.	Full Name of Individual (Last, First, Middle Initi Merritt, Sears, A, MR.,	al) or Full O	Organization Name	Date o	f Receipt				
	Mailing Address 18 Canterbury Ln			10	/ D [	) / Y	2018	Y	]
	City	State	Zip Code	Trans	action ID :	PR21392	744625	518	_
	Groton	MA	01450-4242	Amoun	t of Each F	Receipt th	is Peric	bd	
	FEC ID number of contributing federal political committee.	С		13.90					
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) - Data Analytics	Memo Item					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$13.90 Bi-Weekly)					
	Other (specify) ▼	L	291.90				eniy)		
с.	Full Name of Individual (Last, First, Middle Initi Cove, David, , MR.,	al) or Full O	Organization Name	Date o	f Receipt				
	Mailing Address 220 Blue Granite Drive			M M 10	/ D 17		y y 2018	Y	]
	City Holly Springs	State NC	Zip Code 27540-6453		saction ID :				
			27540-0455	Amoun	t of Each F	leceipt th	is Peric	bd	_
	FEC ID number of contributing federal political committee.	С		1Ľ	9		2	7.80	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) ? Sales	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 583.80	P/R Dec	duction (\$27	.80 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)		•••••	Γ.	· · · ·	.,	61	6.70	
Т	OTAL This Period (last page this line number of	only)	•					-	

FOR LINE NUMBER:

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			Use separate schedule(s)	(check only one)					
	ED RECEIPTS	ECEIPTS       for each category of the Detailed Summary Page					12	17	
	nation copied from such Reports and Stannercial purposes, other than using the						g contribu	utions	
NAME	OF COMMITTEE (In Full)								
	sachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee				
	ume of Individual (Last, First, Middle Initians, CHARLES, , ,	al) or Full Oi	rganization Name	Date c	of Receipt				
Mailing	Address 2503 HILLIARD RD			M N 10	/ D 17		y y 2018	Y	
City HENR	ICO	State VA	Zip Code 23228-4503		saction ID				
	o number of contributing political committee.	C					25	.00	
SELF	of Employer (for Individual)		ipation (for Individual) rance Agent		lemo Item				
	t For: Primary General Dther (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Dec	duction (\$12	2.50 Bi-W	eekly)		
	ume of Individual (Last, First, Middle Initia MANN, KYLE, , ,	al) or Full Oi	rganization Name	Date c	of Receipt				
	Address 3003 OLIN AVE UNIT 415			10 <sup>M</sup>	/ D		2018	Y	
City		State	Zip Code		saction ID				
SAN JO	OSE	CA	95128-2442	Amour	t of Each	Receipt th	nis Perioo	ł	
	o number of contributing political committee.	С			25	.73			
Name SELF	of Employer (for Individual)		upation (for Individual) rance Agent		lemo Item				
	t For: Primary General Dther (specify) ▼	Aggregate	Year-to-Date ▼ , 221.34	P/R Dec	luction (\$25	5.73 Bi-We	eekly)		
	me of Individual (Last, First, Middle Initia FEE, MICHAEL, DAVID, ,	al) or Full O	rganization Name	Date c	of Receipt				
	Address 9237 REGENTS RD UNIT K21			10 <sup>M</sup>	/ D		2018	Y	
City LA JO	LLA	State CA	Zip Code 92037-9250		saction ID				
	) number of contributing political committee.	С			. , .	,	41	.62	
SELF	of Employer (for Individual)		ipation (for Individual) rance Agent		lemo Item				
	r For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.78	P/R Dec	duction (\$20	0.81 Bi-W	eekly)		
SUBTOT	AL of Receipts This Page (optional)			. , .	. ,	92	.35		
TOTAL T	his Period (last page this line number o			-	-				

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ı <del>ب</del> ا			Use separate schedule(s)	(check only one)					
11	EMIZED RECEIPTS	RECEIPTS       for each category of the         Detailed Summary Page							
	y information copied from such Reports and St for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full)								
$\rangle$	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee					
Α.	Full Name of Individual (Last, First, Middle Initi GROSS, ERIC, , ,	al) or Full O	organization Name	Date of Receipt					
	Mailing Address 3009 SHETLAND DR			10 17 2018					
	City	State CA	Zip Code	Transaction ID : PR2154035262518					
	PLEASANT HILL		94523-1616	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		26.10					
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo Item					
	SELF	Insu	urance Agent						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Primary General		247.82	P/R Deduction (\$13.05 Bi-Weekly)					
	Other (specify)								
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	rganization Name						
Β.	BOUROS, PETE, , ,			Date of Receipt					
	Mailing Address 8828 W 97TH PL	- 1		10 17 Y Y Y Y 2018					
	City	State	Zip Code	Transaction ID : PR2154037662518					
	PALOS HILLS	IL	60465-1015	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		25.00					
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item					
	Receipt For:		Year-to-Date ▼	_					
	Primary General	Aggregate		P/R Deduction (\$12.50 Bi-Weekly)					
	Other (specify) ▼	L	250.00						
с.	Full Name of Individual (Last, First, Middle Initi O'Connor, D Michael, , MR.,	al) or Full O	organization Name	Date of Receipt					
	Mailing Address 27 High Gate Dr			10 / Y Y Y Y 10 17 2018					
	City	State	Zip Code	Transaction ID : PR2159446062518					
	Avon	СТ	06001-4111	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		10.53					
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item					
	Massachusetts Mutual Life Insurance Co	Vice	President - Defined Benefit						
	Receipt For:	Aggregate	Year-to-Date 🔻						
	Other (specify)		221.13	P/R Deduction (\$10.53 Bi-Weekly)					
	UBTOTAL of Receipts This Page (optional)			61.63					

# SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

# Use separate schedule(s)

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions							
<u>.</u>	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insur	rance Co	mpany Political Action	Committee							
Α.	Full Name of Individual (Last, First, Middle Initi STOKESBARY, KEVIN, EDWARD, ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 7133 SAINT ANDREWS LN SE	Ξ		M M / D D / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR2159450562518							
	SNOQUALMIE	WA	98065-9092	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		55.88							
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item							
	SELF		rance Agent								
	Receipt For:		Year-to-Date ▼								
	Primary General	riggroguto		P/R Deduction (\$27.94 Bi-Weekly)							
	Other (specify) ▼	L	488.22								
	Full Name of Individual (Last, First, Middle Initia	ial) or Full O	rganization Name								
В.	Cherney, Adam, , ,			Date of Receipt							
	Mailing Address 2195 LARCH ST	01-1-	7.0.0.1	10 / D D / Y Y Y Y 2018							
	City	State NY	Zip Code	Transaction ID : PR2159503162518							
	WANTAGH		11793-4145	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		172.93							
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General			P/R Deduction (\$172.93 Monthly)							
	Other (specify)		454.13								
C.	Full Name of Individual (Last, First, Middle Initi BROWN, Scott, DA, MR.,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 479 Chestnut St			10 / D / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR2166460262518							
	Waban	MA	02468-1204	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		134.62							
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
	Barings LLC		aging Director								
	Receipt For:		Year-to-Date ▼	_							
	Primary General Other (specify)		2827.02	P/R Deduction (\$134.62 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•••••	363.43							

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

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170			Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	¥ 11a 13		11b	11c		r	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe ddress of any political committee	rson for the	purp	ose of	soliciting	contr	ributic	ns	
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi Foley, Brian, , MR.,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 31 Penniman Ter			10 <sup>M</sup>	10 / D D / Y Y Y Y 10 17 2018						
	City Braintree	State MA	Zip Code 02184-4121				PR21664 eceipt th				
	FEC ID number of contributing federal political committee.	С				<b>,</b>	<b>-</b> - <b>-</b>		23.81		
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) Id of MMFA Finance		1emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.01	P/R Dec	ductic	on (\$23.8	81 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi MALHOTRA, DEEPAK, , ,	al) or Full O	rganization Name	Date c	of Re	ceipt					
	Mailing Address 23 WARWICK ST		10 / D D / Y Y Y Y 10 17 2018								
	City	State	Zip Code				PR21664				
	ISELIN	NJ	08830-1837	Amour	nt of	Each Re	eceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	С				,			39.28	3	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		1emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 221.42	P/R Deduction (\$19.64 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi Potter, David, M, MR.,	al) or Full O	rganization Name	Date c	of Re	ceipt					
	Mailing Address 15 Aspen Rise			M 10	/	D D 17	/ Y	2018			
	City East Granby	State CT	Zip Code 06026-9413				PR21924 eceipt th				
	FEC ID number of contributing federal political committee.	С				, i	, ,		19.45	;	
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) Communications		lemo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.85	P/R Dec	ductio	on (\$19.4	45 Bi-We	eekly)			
	UBTOTAL of Receipts This Page (optional)			Ľ.		5 5	· · ·	· · ·	82.54		

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			Use separate schedule(s)	(check only one)								
ITEMIZED REC	JEIF I J		for each category of the Detailed Summary Page	<ul><li>✗ 11a</li><li>13</li></ul>	11b	11c 15	12 16	17				
			y not be sold or used by any pe ddress of any political committee	rson for the	purpose of	soliciting	g contribu	utions				
NAME OF COMMI	TTEE (In Full)											
Massachuse	tts Mutual Life Insur	ance Co	mpany Political Action	Committ	ee							
Full Name of Indivi	dual (Last, First, Middle Initia ER, JASON, M., ,	al) or Full Oi	rganization Name	Date of	f Receipt							
	9760 BRENNER DR			M M 10	10 17 2018							
City BROOKFIELD		State WI	Zip Code 53045-6093		action ID : t of Each R							
FEC ID number of federal political cor	0	C					30	.00				
Name of Employer SELF	(for Individual)		ipation (for Individual) rance Agent	M	emo Item							
Receipt For: Primary Other (specif	General y) ▼	Aggregate	Year-to-Date ▼ 245.00	P/R Ded	uction (\$15.	00 Bi-We	ekly)					
Full Name of Indivi B. MCANDREWS	dual (Last, First, Middle Initia S, KEVIN, , ,	rganization Name	Date of	f Receipt								
	RIVERWAY UNIT 1909			10 / 17 / 2018 Transaction ID : PR2199812562518								
City		State TX	Zip Code									
HOUSTON			77056-2057	Amount	t of Each R	eceipt th	is Period	1				
FEC ID number of federal political cor	0	C			30.24							
Name of Employer SELF	(for Individual)		upation (for Individual) rance Agent	M	emo Item							
Receipt For: Primary Other (specif	General y) ▼	Aggregate	Year-to-Date ▼ 239.54	P/R Ded	uction (\$15.	12 Bi-We	ekly)					
Full Name of Indivi c. ZHOU, STEP	dual (Last, First, Middle Initia	al) or Full Oi	rganization Name	Date of	f Receipt							
Mailing Address 10	082 66TH ST			м м 10	/ D D 17	/ Y	2018	Y				
City OAKLAND		State CA	Zip Code 94608-1203		<b>action ID :</b> t of Each R							
FEC ID number of federal political cor	0	С			, ,	. ,	27	.68				
Name of Employer SELF	(for Individual)		ipation (for Individual) rance Agent	M	emo Item							
Receipt For: Primary Other (specif	General y)	Aggregate	Year-to-Date ▼ 244.64	P/R Ded	luction (\$13	.84 Bi-W	eekly)					
SUBTOTAL of Recei	pts This Page (optional)		•				87.	.92				
TOTAL This Period (	last page this line number of	nly)	••••••									

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IT.			Use separate schedule(s)	(cheo	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b	11c	1:	Г	17		
	y information copied from such Reports and St for commercial purposes, other than using the				or the		oose of	soliciting	g contr	ibutio	ns		
	NAME OF COMMITTEE (In Full)												
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	n Com	mitt	ee							
Α.	Full Name of Individual (Last, First, Middle Initi SPRINGER, David, J, MR.,	al) or Full O	Organization Name	D	Date of Receipt								
	Mailing Address 1170 Adams Ln				10 / Y Y Y Y 10 17 2018								
	City Southlake	State TX	Zip Code 76092-8501				on ID : I Each Re						
	FEC ID number of contributing federal political committee.	С								26.32			
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 552.72	P/f	R Ded	uctio	on (\$26.3	32 Bi-W	eekly)				
в.	Full Name of Individual (Last, First, Middle Initi Acselrod, David, , MR.,	al) or Full O	Organization Name	D	ate of	Re	ceipt						
	Mailing Address 12 Burr School Rd				10 / Y Y Y Y Y 2018								
	City Westport	State CT	Zip Code 06880-3816				<b>on ID : F</b> Each Re				_		
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Head of PCG Integration			38.50								
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.				Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.50	P/F	R Dedi	uctic	on (\$38.5	50 Bi-We	eekly)				
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi DRABINSKI, DANIEL, J, ,	al) or Full O	Organization Name	D	ate of	Re	ceipt						
	Mailing Address 4100 PURDUE AVE				<sup>M</sup> 10	/	D D 17	/ Y	2018		1		
	City DALLAS	State TX	Zip Code 75225-6701				i <b>on ID :</b> I Each Re						
	FEC ID number of contributing federal political committee.	С		ļ			y .	9		57.34			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		M	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 485.31	P/I	R Ded	uctio	on (\$28.0	67 Bi-W	eekly)				
s	UBTOTAL of Receipts This Page (optional)						,		1	22.16			
Т	OTAL This Period (last page this line number c	nly)					<b>,</b>	-		-			

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IT.	ITEMIZED RECEIPTS		Use separate schedule(s	(check only one)								
11			for each category of the Detailed Summary Page		<b>X</b> 11a 13	11b	11c	12	17			
	y information copied from such Reports and St for commercial purposes, other than using the				n for the	purpose of	soliciting	contribu	itions			
	NAME OF COMMITTEE (In Full)											
$\rangle$	Massachusetts Mutual Life Insu	rance Co	ompany Political Act	ion Co	ommitte	ee						
Α.	Full Name of Individual (Last, First, Middle Init CHEN, TZU, LING, ,	ial) or Full O	Organization Name		Date of Receipt							
	Mailing Address 1124 S CROFTER DR				10 / Y Y Y Y Y 10 17 2018							
	City WALNUT	StateZip CodeCA91789-3848				action ID : of Each R						
	FEC ID number of contributing federal political committee.	С						25.	.00			
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Me	emo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00		P/R Ded	uction (\$12	.50 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Init REESER, CURTIS, , ,	ial) or Full O	Organization Name		Date of	Receipt						
	Mailing Address 25 E 40TH ST APT 3C					/ D D	) / Y	2018	Y			
	City	State Zip Code				action ID :						
	INDIANAPOLIS	IN	46205-2697		Amount	of Each R	Receipt th	is Period				
	FEC ID number of contributing federal political committee.	C			25.00							
	Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00		P/R Dedu	uction (\$12.	50 Bi-We	ekly)				
с.	Full Name of Individual (Last, First, Middle Init LOPEZ, FREDDY, S, ,	ial) or Full O	Organization Name		Date of	Receipt						
	Mailing Address 10070 CORBETT ST				10 <sup>M</sup>	/ D D		2018	Y			
	City LAS VEGAS	State NV	Zip Code 89149-1204	_		action ID :						
			09149-1204		Amount	of Each R	Receipt th	is Period				
	FEC ID number of contributing federal political committee.	С			Ľ.			75.	.88			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		M	emo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 648.24		P/R Deduction (\$37.94 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			···· <b>&gt;</b>	<u>_</u>	,	9	125.	88			

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

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		Use separate schedule(s)	(check only one)								
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c	12	Г	17		
An	y information copied from such Reports and St for commercial purposes, other than using the	atements ma	ay not be sold or used by any pe	rson for the	purpose of	soliciting	, contri	ibutio	ns		
<u> </u>	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	rance Co	ompany Political Action	Committ	ee						
Α.	Full Name of Individual (Last, First, Middle Initi Kochen, Neil, , MR.,	ial) or Full O	Drganization Name	Date of Receipt							
	Mailing Address 93 Sunny Reach Dr			10 / Y Y Y Y Y 10 17 2018							
	City West Hartford	State CT	Zip Code 06117-1531		saction ID : t of Each F						
	FEC ID number of contributing federal political committee.	С					ę	66.70			
	Name of Employer (for Individual) MassMutual Trust Company, FSB		supation (for Individual) e President, Trust Co. Investments	M	lemo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1400.70	P/R Dec	luction (\$66	.70 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initi SCHOOLCRAFT, MICHAEL, , ,	Organization Name	Date o	f Receipt							
	Mailing Address 883 CHASEWOOD DR				10 / D D / Y Y Y 10 17 2018						
	City	State	Zip Code		action ID :						
	SOUTH ELGIN	C			t of Each F	Receipt th	iis Peri	iod			
	FEC ID number of contributing federal political committee.				25.00						
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent	M							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi BUTLER, LAMAR, B, ,	ial) or Full O	Drganization Name	Date o	f Receipt						
	Mailing Address 1916 S PROSPECT AVE			10 <sup>M</sup>	/ D 17		2018		]		
	City PARK RIDGE	State IL	Zip Code 60068-5357		saction ID : t of Each F						
	FEC ID number of contributing federal political committee.	С			y 1			12.50			
	Name of Employer (for Individual) SELF	Occi Brok	cupation (for Individual) ker	N	lemo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 212.06	P/R Deduction (\$6.25 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•		y		1(	04.20	_		
т	OTAL This Period (last page this line number of	only)	•••••					-10-			

FOR LINE NUMBER:

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ITEMIZED RECEIPTS						(check only one)					
11			for each category of the Detailed Summary Page	<b>×</b> 11a 13		11b	11c		r	17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	A not be sold or used by any per address of any political committee	son for the	pur pontrik	pose of	soliciting	contr	ributio	ons	
$\setminus$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initia FRITZ, LEAH, Nicole, ,	al) or Full O	Organization Name	Date of Receipt							
	Mailing Address 4315 S 220TH PL			10	العنا لعدا لعنتا						
	City KENT	State WA	Zip Code 98032-4816				PR22657 eceipt th				
	FEC ID number of contributing federal political committee.	С				т. і т. і			49.24	ł	
	Name of Employer (for Individual) SELF	Occu Brok	upation (for Individual) ker	N	/lemo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 401.53	P/R De	ducti	on (\$24.)	62 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia Staroselskiy, Vadim, , MR.,	al) or Full O	Organization Name	Date o	of Re	eceipt					
	Mailing Address 904 Stratford Dr		10 / Y Y Y Y Y 2018								
	City	State	Zip Code	Tran	sact	ion ID :	PR22748	76962	2518		
	Southlake	TX	76092-7110	Amour	nt of	Each R	eceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	C			11.70						
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		cupation (for Individual) es Representative		/lemo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 245.70	P/R Deduction (\$11.70 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initia Bruno, Frank, , MR.,	al) or Full O	Organization Name	Date o	of Re	eceipt					
	Mailing Address 6130 Deerbrook Rd			M 10		D D 17	JL	ې 2018	В		
	City Oak Park	State CA	Zip Code 91377-5801				PR22748 eceipt th				
	FEC ID number of contributing federal political committee.	С				, .	. <u>,</u>		13.35	5	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) jional Sales Manager		/lemo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.35	P/R De	ducti	on (\$13.	35 Bi-We	ekly)			
	UBTOTAL of Receipts This Page (optional)				-	y .			74.29	,	

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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TIEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12									
			13 14 15 16 1									
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements maind the name and a	y not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
ight angle Massachusetts Mutual Life I	nsurance Co	mpany Political Action	Committee									
Full Name of Individual (Last, First, Midd A. DERHAM, CHRISTOPHER, M, ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 58 PHEASANT DR			M M / D D / Y Y Y Y 10 17 2018									
City	State	Zip Code	Transaction ID : PR2274978662518									
MIDDLETOWN	СТ	06457-5172	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		53.56									
Name of Employer (for Individual)	Occi	pation (for Individual)	Memo Item									
SELF		rance Agent										
Receipt For:	I		-									
Primary General	Aggregate	Year-to-Date 🔻	P/R Deduction (\$26.78 Bi-Weekly)									
Other (specify)		392.85										
Full Name of Individual (Last, First, Midd	le Initial) or Full O	rganization Name										
B. SILVA, VINCENT, , ,			Date of Receipt									
Mailing Address 520 N HALSTED ST APT			10 / D D / Y Y Y Y 10 17 2018									
City	State	Zip Code	Transaction ID : PR2274980762518									
CHICAGO	IL	60642-7567	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		21.42									
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼	-									
Primary General	riggrogato		P/R Deduction (\$10.71 Bi-Weekly)									
Other (specify)	_ L	257.13										
Full Name of Individual (Last, First, Midd C. TOKARZ, Paul, William, ,	le Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5820 N CLARK ST # 406	3		M M / D D / Y Y Y Y 10 17 2018									
City	State	Zip Code	Transaction ID : PR2274982862518									
CHICAGO	IL	60660-3213	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		38.70									
Name of Employer (for Individual)	Occi	pation (for Individual)	Memo Item									
SELF		ance Agent	_									
Receipt For:	I	Year-to-Date ▼										
Primary General	, iggi oguto		P/R Deduction (\$19.35 Bi-Weekly)									
Other (specify)		203.28										
SUBTOTAL of Receipts This Page (optional	, al)		113.68									

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

FEC Schedule A (Form 3X) Rev. 06/2016

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17			Use separate schedule(s)	(check only one)						
	EWIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17						
Ar or	y information copied from such Reports and St. for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pa address of any political committee	erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Initi Soucie, Delphine, P, MS.,	al) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 5 Great Mdws			10 / Y Y Y Y 10 17 2018						
	City West Simsbury	State CT	Zip Code 06092-2818	Transaction ID : PR2284793162518           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		15.40						
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		cupation (for Individual) / Account Manager	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.40	P/R Deduction (\$15.40 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initi EPPY, FRANCINE, B, ,	al) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 333 LAS OLAS WAY APT 1406	3		10 17 2018						
	City	State	Zip Code	Transaction ID : PR2292132162518						
	FORT LAUDERDALE	FL	33301-4303	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		103.08						
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 593.85	P/R Deduction (\$51.54 Bi-Weekly)						
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Hahn, Sahang-Hee, , MS.,	al) or Full O	Drganization Name	Date of Receipt						
	Mailing Address 85 Seaport Blvd Unit 1008			10 / Y Y Y Y Y 10 17 2018						
	City Boston	State MA	Zip Code 02210-2161	Transaction ID : PR2311363562518						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		eupation (for Individual) P & Counsel	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 375.06	P/R Deduction (\$17.86 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•••••	136.34						
Т	OTAL This Period (last page this line number o	nly)	•							

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ITEMIZED RECEIPTS			Use separate schedule(s) (c for each category of the				(check only one)						
111			for each catego Detailed Summ		<ul><li>✗ 11a</li><li>13</li></ul>		11b 14	11c	12	Г	17		
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or under a sold	used by any pers tical committee t	son for the o solicit co	pur purib	pose of utions fr	soliciting	g contr	ributio	ons		
$\setminus$	NAME OF COMMITTEE (In Full)												
	Massachusetts Mutual Life Insur	ance Co	mpany Politi	cal Action (	Commit	tee							
A.	Full Name of Individual (Last, First, Middle Initi Rutley, Jennifer, R, MS.,	al) or Full O	Date of Receipt										
	Mailing Address 66 Thornton Rd				M 10	/	D D 17	/ Y	۲ 201	ү ү 8			
	City Needham	State MA	Zip Code 02492-4330				ion ID : I						
			02492-4330		Amour	nt of	Each Re	eceipt th	iis Per	iod	_		
	FEC ID number of contributing federal political committee.	С								38.50	)		
	Name of Employer (for Individual)	Occi	upation (for Individ	ual)	N	lemo	Item						
	Massachusetts Mutual Life Insurance Co	Hea	ad of MMFA Strateg	ic Research & D									
	Receipt For:	Aggregate Tear-to-Date +											
	Primary General Other (specify) ▼			808.50	P/R Dec	ducti	on (\$38.	50 Bi-We	ekly)				
			-gg-	46									
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	organization Name										
B.	Huntley, David, , MR.,				Date o	of Re	ceipt						
	Mailing Address 16 Hawthorn Rd		10 / 17 / 2018 Transaction ID : PR2345715762518										
	City	State MA	Zip Code 01002-9710			-							
	Amherst		Amour	nt of	Each Re	eceipt th	iis Per	IOQ	_				
	FEC ID number of contributing federal political committee.	С			107.15								
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Indivic e President - Finan		Memo Item								
	Receipt For:	Aggregate	Year-to-Date 🔻		-								
	Primary General			0050.45	P/R Dec	ductio	on (\$107	.15 Bi-W	/eekly)	)			
	Other (specify) <b>v</b>		<b>, , , ,</b> ,	2250.15									
с.	Full Name of Individual (Last, First, Middle Initi Friend, Ernest, , MR.,	al) or Full O	organization Name		Date o	of Re	ceipt						
	Mailing Address 15 Cortland Cir				10	/	17	/ Y	2018		7		
	City	State	Zip Code		Tran	sact	ion ID : I	PR2348	66106:	2518			
	Lunenburg	MA	01462-1494		Amour	nt of	Each Re	eceipt th	nis Per	riod			
	FEC ID number of contributing federal political committee.	С					, .	9		26.70	)		
	Name of Employer (for Individual)	Осси	upation (for Individ	ual)		/lemo	Item						
	Massachusetts Mutual Life Insurance Co		itions Architect										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General Other (specify)			560.70	P/R De	ducti	on (\$26.	70 Bi-We	eekly)				
			-gr. 1 - gr. 1										
s	UBTOTAL of Receipts This Page (optional)			•••••			, ,		1	72.35			
т	OTAL This Period (last page this line number o	nly)					-	-		-			

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17	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
11			for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
	y information copied from such Reports and St. for commercial purposes, other than using the			rson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Initi Christie, Cynthia, , MS.,	al) or Full O	Organization Name	Date of Receipt						
	Mailing Address 51 Avalon Lane			M M / D D / Y Y Y Y 10 17 2018						
	City Marlborough	State CT	Zip Code 06447-1054	Transaction ID : PR2351779362518						
			00447-1034	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		16.67						
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
	MASSACHUSETTS MUTUAL LIFE INS.	AVF	P & Counsel							
	Receipt For:	or: Aggregate Year-to-Date ▼								
	Primary General		350.07	P/R Deduction (\$16.67 Bi-Weekly)						
	Other (specify) ▼		330.07							
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Drganization Name							
Β.	UNTALASCO, MYLENE, Gapasin, ,			Date of Receipt						
	Mailing Address 600 E WEDDELL DR SPC 195			10 / D D / Y Y Y Y 2018						
	City	State	Zip Code	Transaction ID : PR2413225862518						
	SUNNYVALE	CA	94089-1741	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		100.00						
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
	Receipt For:		Year-to-Date ▼	-						
	Primary General Other (specify) ▼		410.00	P/R Deduction (\$50.00 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initi DeGiule, Michael, A, MR.,	al) or Full O	Organization Name	Date of Receipt						
	Mailing Address 3 Edmund Ln			10 / Y Y Y Y 10 17 2018						
	City	State	Zip Code	Transaction ID : PR2469399062518						
	Enfield	СТ	06082-1826	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		16.70						
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item						
	Massachusetts Mutual Life Insurance Co	Syst	tems Data Mgmt Director							
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Other (specify)		P/R Deduction (\$16.70 Bi-Weekly)							
	UBTOTAL of Receipts This Page (optional)		<b>r</b>	133.37						

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ידו			Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         □							
An or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements managements managements and a	l nay not be sold or used by any p address of any political committed	erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Committee							
A.	Full Name of Individual (Last, First, Middle Init Mansell, Elise, , MS.,	ial) or Full C	Organization Name	Date of Receipt							
	Mailing Address 114 Wendover Heights Circle			10 / D D / Y Y Y Y 10 17 2018							
	City Charlotte	State NC	Zip Code 28211-1345	Transaction ID : PR2469410862518           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		25.00							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		cupation (for Individual) siness Consultant	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	P/R Deduction (\$25.00 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Init CHRISTIE, SAMUEL, , ,	ial) or Full C	Organization Name	Date of Receipt							
	Mailing Address 7220 LINWOOD AVE			M M / D D / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR2476162862518							
	UPPER DARBY	PA	19082-3515	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		25.00							
	Name of Employer (for Individual) SELF		cupation (for Individual) surance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ , 369.12	P/R Deduction (\$12.50 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Init DOUGHERTY, TIMOTHY, J, ,	ial) or Full C	Organization Name	Date of Receipt							
	Mailing Address 2171 MEADOWVIEW DR	1-		10 / D D / Y Y Y Y 2018							
	City JAMISON	State PA	Zip Code 18929-1609	Transaction ID : PR2476245662518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		42.64							
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 212.07	P/R Deduction (\$21.32 Bi-Weekly)							
	UBTOTAL of Receipts This Page (optional)			92.64							

# SCHEDULE A (FEC Form 3X) DEACH

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IT.			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
	y information copied from such Reports and SI for commercial purposes, other than using the			rson for the purpose of soliciting contributions								
$\setminus$	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee								
Α.	Full Name of Individual (Last, First, Middle Init OWENS, RICHARD, BRIAN, ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 2 BROOK LN			10 17 Y Y Y Y 10 17 2018								
	City	State	Zip Code	Transaction ID : PR2476270662518								
	PAOLI	PA	19301-1903	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		25.00								
	Name of Employer (for Individual)	Осси	pation (for Individual)	Memo Item								
	SELF	Insu	rance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			P/R Deduction (\$12.50 Bi-Weekly)								
	Other (specify) ▼		250.00									
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name									
В.	RUFF, ROBERT, C., ,			Date of Receipt								
	Mailing Address 2315 MEADOWWOOD DR			10 / Y Y Y Y 10 17 2018								
	City	State	Zip Code	Transaction ID : PR2476272662518								
	TOLEDO	OH	43606-3158	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		100.00								
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼	P/R Deduction (\$50.00 Bi-Weekly)								
	Primary General Other (specify) ▼		, 430.00									
с.	Full Name of Individual (Last, First, Middle Init MALOUF, DAIBES, FARIS, ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 77 ACCESS RD STE 4			10 / Y Y Y Y 10 17 2018								
	City	State	Zip Code	Transaction ID : PR2476282962518								
	NORWOOD	MA	02062-5244	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		30.94								
	Name of Employer (for Individual) SELF		ipation (for Individual) rance Agent	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.15	P/R Deduction (\$15.47 Bi-Weekly)								
⊢	UBTOTAL of Receipts This Page (optional)			155.94								

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ITENNIS		Use separate schedule(s)			(check only one)						
	ED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11b	11c	12	17			
	mation copied from such Reports and Sta nmercial purposes, other than using the r					soliciting					
	OF COMMITTEE (In Full)										
	sachusetts Mutual Life Insura	ance Co	mpany Political Action	Commit	ee						
	ame of Individual (Last, First, Middle Initia MAN, JEFFREY, R, ,	l) or Full Or	ganization Name	Date o	f Receipt						
Mailing	Address 144 DOCKSIDE CIR			10	/ D [ 17	О / Ү	y y 2018	Y			
City WEST	ON	State FL	Zip Code 33327-1100		saction ID : t of Each F						
	D number of contributing I political committee.	С				-		68			
SELF	of Employer (for Individual)		pation (for Individual) rance Agent		lemo Item						
	ot For: Primary General Other (specify) V	Aggregate Y	Year-to-Date ▼ 244.64	P/R Deduction (\$13.84 Bi-Weekly)							
	ame of Individual (Last, First, Middle Initia USING, RUSSELL, L, , II	l) or Full Or	ganization Name	Date o	f Receipt						
Mailing	Address 4011 ROSLYN			10	/ D [ 17		2018	Y			
City		State	Zip Code	Trans	action ID :	PR24763	35956251	8			
DOW	NERS GROVE	IL	60515-2319	Amoun	t of Each F	Receipt th	is Period				
	D number of contributing I political committee.	С				36.	.92				
Name SELF	of Employer (for Individual)		pation (for Individual) rance Agent	Memo Item							
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 226.14	P/R Deduction (\$18.46 Bi-Weekly)							
	ame of Individual (Last, First, Middle Initia ARDIOLA DIAZ, ROBERTO, , ,	l) or Full Or	ganization Name	Date o	f Receipt						
Mailing	Address E2 CALLE 4 URB EL MIRADOF	R DE CUPEY	/	10	/ D 17		2018	Y			
City SAN	JUAN	State PR	Zip Code 00926-7586		saction ID : t of Each F						
	D number of contributing I political committee.	С			y	, ,	80.	00			
SELF	of Employer (for Individual)		pation (for Individual) ance Agent		lemo Item						
	ot For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 440.00	P/R Dec	duction (\$40	.00 Bi-We	eekly)				
SUBTO	TAL of Receipts This Page (optional)				. , .	. ,	144.	60			
TOTAL	This Period (last page this line number or	ıly)	••••••			1. m					

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IT.			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
	y information copied from such Reports and S for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee						
<u>к</u> .	Full Name of Individual (Last, First, Middle Ini ULLOM, Clark, S., ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 498 ALBEMARLE RD #503			10 / Y Y Y Y Y 10 17 2018						
	City CHARLESTON	State SC	Zip Code 29407-7577	Transaction ID : PR2476378662518           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		196.42						
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 508.92	P/R Deduction (\$98.21 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Ini SOULSBURG, GREGORY, D, ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 1200 TERRACE DR			10 / Y Y Y Y Y 10 17 2018						
	City NAPA	State CA	Zip Code 94559-3586	Transaction ID : PR2476390362518						
	FEC ID number of contributing federal political committee.	C	34333300	Amount of Each Receipt this Period						
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 350.67	P/R Deduction (\$62.34 Bi-Weekly)						
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini BRESCHI, CHARLES, G, ,	tial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 11304 OLD CARRIAGE RD			10 / Y Y Y Y 10 17 2018						
	City GLEN ARM	State MD	Zip Code 21057-9414	Transaction ID : PR2476403762518           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		26.42						
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 247.13	P/R Deduction (\$13.21 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•	347.52						
Т	OTAL This Period (last page this line number	only)	····· •							

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IT.			Use separate schedule(s)	(check or	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c		2	17	
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the to solicit co	e pur ontrit	pose of	15 soliciting rom such	cont	6 ributic mittee	17 0ns e.	
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insur	rance Co	mpany Political Action	Commit	ttee	•					
Α.	Full Name of Individual (Last, First, Middle Initi KOFF, RICHARD, HOWARD, ,	ial) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 5159 CARMENTO DR			10		D D 17	/ Y	y 201	8 8		
	City OAK PARK	State CA	Zip Code 91377-4854				PR24764 eceipt th				
	FEC ID number of contributing federal political committee.	С							25.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Memo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R De	ducti	ion (\$12.	50 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initi LENTZ, JODY, LYNN, ,	ial) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 11404 SE 66TH ST			M 10		D D 17	/ Y	201	ү ү 8		
	City	State WA	Zip Code				PR24764				
	BELLEVUE FEC ID number of contributing federal political committee.	C	98006-6408	Amoui	nt of	Each R	eceipt th	iis Pei	riod 31.58	3	
	Name of Employer (for Individual)		Memo Item								
	SELF	Insu	Irance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 236.87	P/R Deduction (\$15.79 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi SCHWARTZ, REGINA, T., ,	ial) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 506 CLOVERLEAF CT			M 10		D D 17	/ Y	201			
	City NAPERVILLE	State IL	Zip Code 60565-4165			-	PR24764 eceipt th				
	FEC ID number of contributing federal political committee.	С							10.86	6	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Memo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 245.71	P/R De	educti	ion (\$10.	86 Semi	-Mont	hly)		
s	UBTOTAL of Receipts This Page (optional)		•••••	F	-	y	5		67.44	ł	
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ıт.					(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a		11b 14	11c 15	12	Г	17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committee	erson for th	e pui contril	rpose of	soliciting	, contri	ibutio	ns		
	NAME OF COMMITTEE (In Full)											
$\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commi	ttee	;						
Α.	Full Name of Individual (Last, First, Middle Init UPCHURCH, ADRIENNE, E, ,	tial) or Full O	rganization Name	Date	Date of Receipt							
	Mailing Address 3444 SHENANDOAH ST				10 17 2018							
	City DALLAS	State TX	Zip Code 75205-2220			t <b>ion ID :</b> Each R						
	FEC ID number of contributing federal political committee.	С				лр. I.		:	25.00			
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		Mem	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R De	educt	ion (\$12.	50 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Init OLSEN, WILLIAM, THOMAS, ,	tial) or Full O	rganization Name	Date	of R	eceipt						
	Mailing Address 300 ONEIL RANCH RD			M 10		D D 17	/ Y	y 2018				
	City	State	Zip Code			ion ID :						
	DRIPPING SPRINGS	TX	78620-5177	Amou	int of	Each R	eceipt th	is Peri	iod			
	FEC ID number of contributing federal political committee.	С				-gr. 1			45.00			
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Mem	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R Deduction (\$22.50 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Init MCNAMARA, BRIAN, PETER, ,	tial) or Full O	rganization Name	Date	of R	eceipt						
	Mailing Address 2071 MEADOW VIEW LN			M 10		D D 17	/ Y	2018		]		
	City COSTA MESA	State CA	Zip Code 92627-4051			tion ID : Each R						
	FEC ID number of contributing federal political committee.	С				y 1	y	ŕ	41.78			
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Mem	o Item						
	Receipt For: Primary General Other (specify)						P/R Deduction (\$20.89 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		•••••			y	,	11	11.78	_		
Т	OTAL This Period (last page this line number of	only)		•					-			

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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		Detailed Summary Page		_	11a		11b	11c		12		
					13		14	15		16		7
Any information copied from such Reports a or for commercial purposes, other than usin												
NAME OF COMMITTEE (In Full)												
Aassachusetts Mutual Life I	nsurance Co	mpany Political Action	Co	m	mitte	ee						
Full Name of Individual (Last, First, Middl A. ROCKWELL, JOSHUA, Michael, ,	e Initial) or Full C	Organization Name		Date of Receipt								
Mailing Address 608 ROSAER LN				10 17 2018								
City	State	Zip Code		Transaction ID : PR2476552362518								
VIRGINIA BEACH	VA	23464-2431	_	Ar	nount	of	Each R	leceipt th	nis Pe	eriod	-	
FEC ID number of contributing federal political committee.	С			44.42								
Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		C	Me	emo	ltem					
Receipt For:	Aggregate	Year-to-Date ▼										
Primary   General     Other (specify) ▼		211.13		P/R	R Dedi	uctio	on (\$22.	.21 Bi-W	eekly	′)		
Full Name of Individual (Last, First, Middl B. JONES, CHRISTOPHER, J, ,	e Initial) or Full C	organization Name		D	ate of	Re						
Mailing Address 24 WOOD DRIVE					10 01 M	1/	17	/ Y	202	18	Y	
City	State	Zip Code		5				PR2476			<u> </u>	
OYSTER BAY	NY	11771-3723						eceipt th				
FEC ID number of contributing federal political committee.	С	C								50.0	0	]
Name of Employer (for Individual) SELF		upation (for Individual) urance Agent			Me	emo	tem					
Receipt For:	Aggregate	Year-to-Date ▼	_									
Primary General			L I	P/R Deduction (\$25.00 Bi-Weekly)								
Other (specify)		500.00										
Full Name of Individual (Last, First, Middl C. DELANEY, CHRISTOPHER, I		organization Name		Da	ate of	Re	eceipt					
Mailing Address 2850 SW YANCY ST UN	IT 102			Γ	10 <sup>M</sup>	/	D D 17	) / Y	20	18	Y	
City	State	Zip Code			Trans	act	ion ID :	PR2476	6006	6251	3	
SEATTLE	WA	98126-2582	_	Ar	nount	of	Each R	leceipt th	nis Pe	eriod		
FEC ID number of contributing federal political committee.	C			Ę			,	9	_	12.5	50	
Name of Employer (for Individual) SELF		Occupation (for Individual) Insurance Agent					tem Item					
Receipt For:	Aggregate	Year-to-Date ▼			_							
Other (specify)		238.75	P/R Deduction (\$6.25 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optiona	l)	•	 _	ļ			y	. ,	-	106.9	12	]

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		Use separate schedule(s)			(check only one)							
	ED RECEIPTS		for each category of the Detailed Summary Page		<b>(</b> 11a		11b	11c	12		47	
Any inform or for com	nation copied from such Reports and Sta imercial purposes, other than using the r	Itements ma name and a	y not be sold or used by any pe ddress of any political committee	erson to se	13 for the plicit cor	pur ntrib	14 pose of putions f	soliciting	16 contril comm	outio	17 ns	
<hr/>	OF COMMITTEE (In Full)											
N	sachusetts Mutual Life Insur	ance Co	mpany Political Action	Coi	mmitt	ee						
	me of Individual (Last, First, Middle Initia DACH, MATTHEW, , ,	al) or Full O	ganization Name		Date of	f Re	eceipt					
	Address 200 E 72ND ST APT 5H				м м 10	1	D D 17	) / Y	2018			
City NEW Y	/ORK	State NY	Zip Code 10021-4500		Transaction ID : PR2476615962518           Amount of Each Receipt this Period							
	) number of contributing political committee.	С			<u> </u>			1 - 3F	1	9.79		
SELF	of Employer (for Individual)		ipation (for Individual) rance Agent		M	emo	tem					
	t For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 201.04	F	P/R Ded	ucti	on (\$19.	.79 Bi-We	eekly)			
Full Na B. LOF	me of Individual (Last, First, Middle Initia $\Gamma$ IS, MARK, , ,	al) or Full O	ganization Name		Date of	f Re	eceipt					
	Address 3022 SHANNON OAKS CV				M M 10	/	17	/ Y	2018	Y	1	
City		State	Zip Code		Trans	acti	ion ID :	PR24766	626262	518	_	
GERM	ANTOWN	TN	38138-7736	_	Amount	t of	Each R	leceipt th	is Perio	bd		
	ID number of contributing al political committee.						-		1	5.11		
Name of SELF	of Employer (for Individual)		ipation (for Individual) rance Agent	Memo Item								
	t For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 224.47	P/R Deduction (\$15.11 Semi-Monthly)								
	me of Individual (Last, First, Middle Initia MPSON, Shannon, A., ,	al) or Full O	ganization Name		Date of	f Re	eceipt					
Mailing	Address 145 STILLMERE CT				<sup>M</sup> 10	/	D D 17		2018	Y	]	
City WINST	FON SALEM	State NC	Zip Code 27101-2311					PR2476 leceipt th				
	onumber of contributing political committee.	С			<u> </u>		<b>9</b>	, ,	7	0.22		
SELF	of Employer (for Individual)		pation (for Individual) rance Agent		М	emo	tem Item					
	t For: Primary General Other (specify)					lucti	on (\$35	.11 Bi-We	eekly)			
SUBTOT	AL of Receipts This Page (optional)		•				,		10	5.12		
TOTAL T	his Period (last page this line number o	nly)	<b></b>				-	-		-		

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177			Use separate schedule(s)	(check only one)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1b 11c 4 15	12 16	17			
	y information copied from such Reports and St for commercial purposes, other than using the				se of soliciting					
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Initi RUSSELL, MICHAEL, , ,	al) or Full O	Organization Name	Date of Rece	eipt					
	Mailing Address 5935 BRACE RD			10 / Y Y Y Y Y 10 17 2018						
	City	State NC	Zip Code	Transactio	n ID : PR2476	641462518	3			
	CHARLOTTE		28211-4650	_ Amount of E	ach Receipt th	nis Period				
	FEC ID number of contributing federal political committee.	С				12.5	50			
	Name of Employer (for Individual)	Оссі	upation (for Individual)	Memo I	tem					
	SELF	Insu	urance Agent	_						
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		227.50	P/R Deduction	(\$12.50 Semi	-Monthly)				
	Other (specify) <b>v</b>		237.50							
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Organization Name							
	LICARI, DOUGLAS, J, ,	,	•	Date of Rece	eipt					
	Mailing Address 208 NORMAN DR			M M /	D D / Y 17	2018	Y			
	City	State	Zip Code	Transactio	n ID : PR2476	659362518	3			
	EAST MEADOW	NY	11554-1649	Amount of E	ach Receipt th	nis Period				
	FEC ID number of contributing federal political committee.	С				116.8	38			
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo I	tem					
	Receipt For:		Year-to-Date ▼	-						
	Primary General Other (specify) ▼	Aggregate	266.22	P/R Deduction	(\$58.44 Bi-We	eekly)				
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Organization Name							
	SINGER, RICHARD, , , Mailing Address 2 SAGE TER			Date of Rece	·		_			
	Mailing Address 2 SAGE TER			10 <sup>M</sup>	D D / Y 17	2018	Y			
	City	State	Zip Code	Transactio	n ID : PR2476	66066251	8			
	SCARSDALE	NY	10583-2018	Amount of E	ach Receipt th	nis Period				
	FEC ID number of contributing federal political committee.	С		,	,	25.0	00			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo I	tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deductior	າ (\$12.50 Bi-W	eekly)				
	JBTOTAL of Receipts This Page (optional)					154.3	8			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Coneck only one)     Image: Coneck only one)       Image: Coneck only one)     Image: Coneck one)       Image: Coneck only one)     Image: Coneck one)       Image: Coneck one)
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Ins	surance Co	mpany Political Action	Committee
A. THOMPSON, JOHN, P, , Mailing Address 745 VAIL DR	Initial) or Full Or	ganization Name	Date of Receipt
			10 17 2018
City JACKSON	State MO	Zip Code 63755-3287	Transaction ID : PR2476671862518
		03735-3287	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual) SELF		pation (for Individual) rance Agent	Memo Item
Receipt For:	Aggregate `	Year-to-Date 🔻	
Other (specify)		250.00	P/R Deduction (\$12.50 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. BORGES, JOSE, JUAN, ,	Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address 25 PACIFICA VIA AMANEC	CER		10 17 2018
City	State	Zip Code	Transaction ID : PR2476688962518
TRUJILLO ALTO	PR	00976	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		46.08
Name of Employer (for Individual) SELF		ipation (for Individual) rance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 407.87	P/R Deduction (\$23.04 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. Kaltenbach, Geoffrey, Lane, ,	Initial) or Full Or	ganization Name	Date of Receipt
Mailing Address 28 CALLE MATTIS			M M / D D / Y Y Y Y 10 17 2018
City SAN CLEMENTE	State CA	Zip Code 92673-7050	Transaction ID : PR2476690262518 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		83.35
Name of Employer (for Individual) SELF		pation (for Individual) eral Agent	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.35	P/R Deduction (\$83.35 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).			154.43

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IТ	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
11			for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         □	17					
	y information copied from such Reports and Sta for commercial purposes, other than using the			rson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Initi ROMAN, SHAVON, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 2550 CUMBERLAND BLVD SE	E APT 819		M = M / D = D / Y = Y = Y 10 17 2018						
	City	State	Zip Code	Transaction ID : PR2476706662518						
	SMYRNA	GA	30080-2837	_ Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		38.10						
	Name of Employer (for Individual)	Оссі	pation (for Individual)	Memo Item						
	SELF	Insu	rance Agent							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		223.81	P/R Deduction (\$19.05 Bi-Weekly)						
	Other (specify)									
– R	Full Name of Individual (Last, First, Middle Initi BUGANSKI, MICHAEL, A, ,	al) or Full O	rganization Name	Date of Receipt						
υ.	Mailing Address 6826 CLOISTER CT									
				10 17 2018						
	City	State	Zip Code	Transaction ID : PR2476706762518						
	TOLEDO	OH	43617-2215	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		25.00						
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼	-						
	Primary General	33 - 3		P/R Deduction (\$12.50 Bi-Weekly)						
	Other (specify) <b>v</b>	L	250.00							
с.	Full Name of Individual (Last, First, Middle Initi JARMUSIK, GERALD, C., , JR	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 104 OXFORD FALLS CT			10 17 2018						
	City	State	Zip Code	Transaction ID : PR2476714762518						
	LANGHORNE	PA	19047-3012	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		75.86						
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼	1						
	Primary General		240.00	P/R Deduction (\$37.93 Bi-Weekly)						
	Other (specify)		348.26							
s	UBTOTAL of Receipts This Page (optional)		••••••	138.96	]					
Т	OTAL This Period (last page this line number o	nly)	•		Ī					

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ITEMIZED DECEIDTO		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
			person for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
Aassachusetts Mutual Life	Insurance Co	mpany Political Action	n Committee									
A. WEINER, MIKE, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name WEINER, MIKE, , ,											
Mailing Address 3500 SAGE BRUSH T	10 / Y Y Y Y 10 17 2018											
City PLANO	State TX	Zip Code 75023-5731	Transaction ID : PR2476724162518           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		27.68									
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 244.64	P/R Deduction (\$13.84 Bi-Weekly)									
Full Name of Individual (Last, First, Mid B. LEONARDO, ROBERT, , ,	Date of Receipt											
Mailing Address 230 JULEP AVE	10 17 Y Y Y Y Y 2018											
City	State	Zip Code	Transaction ID : PR2476727362518									
OSWEGO		60543-7705	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		31.54									
Name of Employer (for Individual) SELF		upation (for Individual) Jrance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 236.89	P/R Deduction (\$15.77 Bi-Weekly)									
Full Name of Individual (Last, First, Mid C. STURGES, Robert, J., ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name STURGES, Robert, J., ,											
Mailing Address 30 RODNEY ST	10 / Y Y Y Y 10 17 2018											
City PORT JEFFERSON STATION	State NY	Zip Code 11776-3810	Transaction ID : PR2476737362518 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		149.20									
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 427.03	P/R Deduction (\$74.60 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optic	nal)		208.42									
TOTAL This Period (last page this line n	umber only)											

SCHEDULE A	(FEC Form 3X)							
ITEMIZED RECEIPTS								

FOR LINE NUMBER:

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				Detailed Summary Page		×	-		11b	11c		12					
Any information conject from such Reports and Statements m				ot be sold or used by any as		<u> </u>	13 for the		14	15 soliciting		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.																
$\square$	NAME OF COMMITTEE (In Full)																
	Assachusetts Mutual Life Insurance Company Political Action Committee																
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MCROBERTS, EMMA, , ,					Date of Receipt											
	Mailing Address 2727 E 86TH ST APT 310						10 17 2018										
	City	State		Zip Code	Transaction ID : PR2476755562518												
	INDIANAPOLIS	IN	46240-4479					Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.			30.00													
	Name of Employer (for Individual) SELF	•	tion (for Individual) ce Agent		Memo Item												
	Receipt For:			0	1												
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 243.95						P/R Deduction (\$15.00 Bi-Weekly)									
В.	Full Name of Individual (Last, First, Middle Initi SAUL, MATTHEW, J, ,	al) or Full (	Orgai	nization Name	Date of Receipt												
Ξ.	Mailing Address 45 TUDOR CITY PL APT 1904					10 17 2018											
	City	State Zip Code				Transaction ID : PR2476756562518											
	NEW YORK	NY 10017-7612					Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C					100.14										
	Name of Employer (for Individual) SELF		ccupation (for Individual) nsurance Agent				Memo Item										
	Receipt For:	Aggregate Year-to-Date ▼															
	Primary General Other (specify) ▼			P/R Deduction (\$30.14 Bi-Weekly)													
<u></u> с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HAMMAN, RYAN, , ,					Date of Receipt											
	Mailing Address 151 ANTLER CIR						10 17 2018										
	City	State		Zip Code			Trans	act	ion ID :	PR2476	758	76251	8				
	SAN ANTONIO	ТХ		78232-2259	_	4	Amount	of	Each R	eceipt th	nis F	<sup>2</sup> eriod		_			
	FEC ID number of contributing federal political committee.	C				26.44											
	Name of Employer (for Individual) SELF		•	tion (for Individual) ce Agent	Memo Item												
	Receipt For:		ur-to-Date ▼														
	Primary General Other (specify) 24				P/R Deduction (\$13.22 Bi-Weekly)												
s	UBTOTAL of Receipts This Page (optional)			•					y .		-	156.	58	1			

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

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FOR LINE NUMBER:

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177			Use separate schedule(s)	(check on	ly one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c	12	Г	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for the	purpose of	soliciting	g contri	ibutio	ns		
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Committ	ee						
Α.	Full Name of Individual (Last, First, Middle Initi MOSBACHER, ISIDOR, , ,	ial) or Full O	Organization Name	Date of Receipt							
	Mailing Address 145 FOREST DR	- 1		10 / Y Y Y Y 10 17 2018							
	City LAKEWOOD	State NJ	Zip Code 08701-2317		saction ID : t of Each F						
	FEC ID number of contributing federal political committee.	С					÷	30.24			
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	M	lemo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 239.54	P/R Dec	luction (\$15	.12 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initi NABI, USMAN, , ,	ial) or Full O	Organization Name	Date of Receipt							
	Mailing Address 4610 E CHEERY LYNN RD			10 / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Trans	action ID :	PR24767	792962	518			
	PHOENIX	AZ	85018-6528	Amoun	t of Each F	Receipt th	is Peri	od			
	FEC ID number of contributing federal political committee.	С				-	÷	30.88			
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 238.22	P/R Deduction (\$15.44 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi CUNNINGHAM, CHARLES, A, ,	ial) or Full O	Organization Name	Date o	f Receipt						
	Mailing Address 4211 GROVE AVE			10 <sup>M</sup>	/ D 17		2018		1		
	City WESTERN SPRINGS	State IL	Zip Code 60558-1347		saction ID : t of Each F	-					
	FEC ID number of contributing federal political committee.	С					٤	33.32			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		lemo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 833.37	P/R Dec	duction (\$41	.66 Bi-We	eekly)				
s	UBTOTAL of Receipts This Page (optional)		•		. , .	,	14	14.44			
т	OTAL This Period (last page this line number of	only)						-			

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FOR LINE NUMBER:

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17			Use separate schedule(s)	(check on	ly or	ne)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a		11b	11c		2	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any pe ddress of any political committee	rson for the	e purp ontrib	oose of	soliciting	conti	ributio	ons	
	NAME OF COMMITTEE (In Full)										
$\left \right\rangle$	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi HOULE, ROBERT, , , JR	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 41 MEMORY LN			10 / Y Y Y Y 10 17 2018							
	City FEEDING HILLS	State MA	Zip Code 01030-2423	Transaction ID : PR2476822262518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				-			30.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		/lemo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	P/R Dec	ductio	on (\$15.)	00 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi DEVIZIO, MICHAEL, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 2 FRANCES LN			M N 10	/	D D 17	/ Y	2018	Y Y 8		
	City	State	Zip Code				PR24768				
	SCOTCH PLAINS	NJ	07076-2534	Amour	nt of	Each R	eceipt th	is Pei	riod		
	FEC ID number of contributing federal political committee.	С	33.04								
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 233.95	P/R Dec	ductic	on (\$16.8	52 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initi DRAUDT, DONALD, JOSEPH, ,	al) or Full O	rganization Name	Date c	of Re	ceipt					
	Mailing Address 313 HUDSON AVE			10 <sup>M</sup>	л /	D D 17	/ Y	201		ſ	
	City CLARENDON HILLS	State IL	Zip Code 60514-1331				PR24768 eceipt th				
	FEC ID number of contributing federal political committee.	С				y .	. <u>,</u>		27.68	3	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		/lemo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	egate Year-to-Date ▼ 244.64			on (\$13.	84 Bi-We	eekly)			
⊢	UBTOTAL of Receipts This Page (optional)			Ę.	-	y	,		90.72	2	
ΙT	OTAL This Period (last page this line number of	only)	····· •			_					

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# Use separate schedule(s)

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check onl	y one)							
		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c	12 16	17				
Any information copied from such Reports an or for commercial purposes, other than using			erson for the	purpose of	soliciting c	ontributi	ions				
NAME OF COMMITTEE (In Full)											
Aassachusetts Mutual Life In	surance Co	mpany Political Action	o Committ	ee							
Full Name of Individual (Last, First, Middle JUDGE, JEFFREY, M, ,	Initial) or Full O	rganization Name	Date o	Date of Receipt							
Mailing Address 1200 GLASTONBURY WA	ΥY		10 <sup>M</sup>	/ D D 17	/ Y	y y 2018	Y				
City BEL AIR	State MD	Zip Code 21014-3333		Transaction ID : PR2476863862518 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		30.00								
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	М	emo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 292.90	P/R Ded	luction (\$15.0	00 Bi-Wee	kly)					
Full Name of Individual (Last, First, Middle B. GILL, JANICE, LYNN, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 38 WESLEY CT					/ Y	y y 2018	Y				
City	State	Zip Code		action ID : F			}				
EATONTOWN	NJ	07724-1423	Amoun	t of Each Re	eceipt this	Period					
FEC ID number of contributing federal political committee.	С					100.0	0				
Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 806.88	P/R Deduction (\$50.00 Bi-Weekly)								
Full Name of Individual (Last, First, Middle C. LIN, JIAN, , ,	Initial) or Full O	rganization Name	Date o	f Receipt							
Mailing Address 2408 MISTY IVY CT			<sup>M</sup> 10	/ D D 17		2018	Ŷ				
City BUFORD	State GA	Zip Code 30519-5489		saction ID :			3				
FEC ID number of contributing	C	30313-3403	Amoun	t of Each Re	eceipt this	Period 25.0	0				
federal political committee.					9						
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)								
SUBTOTAL of Receipts This Page (optional)					, , ,	155.0	0				

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

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)       ▼       11a       11b       11c       12       13       14       15       16       17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	ance Co	mpany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Initia DAVIS, RONALD, C., ,	ll) or Full Or	ganization Name	Date of Receipt
	Mailing Address 2032 ADDENBROCK DR	1-		10 / D D / Y Y Y Y 2018
	City MORRISVILLE	State NC	Zip Code 27560-8623	Transaction ID : PR2477475962518         Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.38
	Name of Employer (for Individual) SELF		pation (for Individual) rance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 248.11	P/R Deduction (\$50.38 Semi-Monthly)
в.	Full Name of Individual (Last, First, Middle Initia BAILEY, MATTHEW, R., ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 2900 OAK TREE LN			10 17 2018
	City BETHEL	State OH	Zip Code 45106-8375	Transaction ID : PR2477481462518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		19.35
	Name of Employer (for Individual) SELF		ipation (for Individual) rance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 203.28	P/R Deduction (\$19.35 Semi-Monthly)
<u> </u>	Full Name of Individual (Last, First, Middle Initia KIRSCHNER, DANIELLE, , ,	l) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1100 ELINOR RD			10 / D D / Y Y Y Y 10 17 2018
	City HEWLETT	State NY	Zip Code 11557-2506	Transaction ID : PR2477484562518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF		pation (for Individual) ance Agent	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			94.73
T T	OTAL This Period (last page this line number or	וy)	· · · · · · · · · · · · · · · · · · ·	

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ITEMIZED RECEIP	TS	for each category of the Detailed Summary Page	(cneck only one)       X     11a       11b     11c       12       13     14       15     16       17							
Any information copied from or for commercial purposes,	such Reports and Statements ma other than using the name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE	(In Full) Iutual Life Insurance Co	mpany Political Action	Committee							
A. GORDON-MACEY, S		rganization Name	Date of Receipt							
Mailing Address 409 HIL	State	Zip Code	10 17 2018							
BRATTLEBORO	VT	05301-9074	Transaction ID : PR2477492262518 Amount of Each Receipt this Period							
FEC ID number of contri federal political committe	ů.		33.40							
Name of Employer (for li SELF	,	upation (for Individual) Irance Agent	Memo Item							
Receipt For: Primary G Other (specify) ▼	eneral Aggregate	Year-to-Date ▼ 233.22	P/R Deduction (\$16.70 Bi-Weekly)							
Full Name of Individual ( BENSON, JEFFRE	Last, First, Middle Initial) or Full C $Y,R,,$	rganization Name	Date of Receipt							
Mailing Address 3206 CA		Zie Oode	10 / 17 / 2018							
City DALLAS	State TX	Zip Code 75229-5903	Transaction ID : PR2477494762518 Amount of Each Receipt this Period							
FEC ID number of contri federal political committe	ů.		25.00							
Name of Employer (for I SELF	,	upation (for Individual) urance Agent	Memo Item							
Receipt For: Primary G Other (specify) ▼	eneral Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
Full Name of Individual ( C. KRIFTCHER, ZAC	Last, First, Middle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 50 MUR			10 / D D / Y Y Y Y Y 10 17 2018							
City NEW YORK	State NY	Zip Code 10007-2271	Transaction ID : PR2477506562518 Amount of Each Receipt this Period							
FEC ID number of contri federal political committe	ů.		25.00							
Name of Employer (for In SELF	,	upation (for Individual) rance Agent	Memo Item							
Receipt For: Primary G Other (specify)	eneral Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
SUBTOTAL of Receipts Th	is Page (optional)		83.40							
TOTAL This Period (last page	age this line number only)									

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X       11a       11b       11c       12         13       14       15       16       17							
			e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life II	nsurance Co	ompany Political Action	Committee							
Full Name of Individual (Last, First, Middl A. CONE, WESLEY, E., , Mailing Address 500 CONSTITUTION DR	-	organization Name	Date of Receipt							
City	State	Zip Code	10 17 2018							
FORSYTH	GA	31029-7355	Transaction ID : PR2477536162518           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		114.28							
Name of Employer (for Individual) SELF		upation (for Individual) Jrance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 271.42	P/R Deduction (\$57.14 Bi-Weekly)							
Full Name of Individual (Last, First, Middl B. SCRIVNER, EVERETTE, SCOT		organization Name	Date of Receipt							
Mailing Address 190 BARNESTON RD	State	Zip Code	10 / Y Y Y Y 2018							
HONEY BROOK	PA	19344-9503	Transaction ID : PR2477572362518 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		46.36							
Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 207,31	P/R Deduction (\$23.18 Bi-Weekly)							
Full Name of Individual (Last, First, Middl C. MINKA, Stanley, E., , JR	le Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address 1 EAGLE WAY			10 / Y Y Y Y 10 17 2018							
City AVONDALE	State PA	Zip Code 19311-9723	Transaction ID : PR2477588062518 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 262.50	P/R Deduction (\$7.50 Bi-Weekly)							
SUBTOTAL of Receipts This Page (optiona	al)		175.64							
TOTAL This Period (last page this line num	nber only)									

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17			Use separate schedule(s)	(check c	only o	ne)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c		Г	17		
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma	l ay not be sold or used by any pe address of any political committee	erson for th	ne pu	rpose of	soliciting	contr	ributic	17 ons e		
	NAME OF COMMITTEE (In Full)											
$\left \right\rangle$	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commi	ittee	;						
Α.	Full Name of Individual (Last, First, Middle Initi KOH, STEPHEN, , ,	al) or Full O	Organization Name	Date of Receipt								
	Mailing Address 2441 REBECCA LN				10 / Y Y Y Y 10 17 2018							
	City GLENVIEW	State IL	Zip Code 60026-1144				PR24770					
	FEC ID number of contributing federal political committee.	С				-			15.47	7		
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Mem	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 222.68	P/R D	educt	ion (\$15.	47 Semi-	Month	ıly)			
В.	Full Name of Individual (Last, First, Middle Initi PYKOSZ, ROBERT, , ,	al) or Full O	Organization Name	Date of Receipt								
	Mailing Address 205 CLEARBROOK CT			M 10		D D D 17	/ Y	2018	Y Y B			
	City	State	Zip Code				PR24776					
	SCHAUMBURG	IL	60193-3129	Amou	unt of	Each R	eceipt th	is Per	iod			
	FEC ID number of contributing federal political committee.	С							31.90	)		
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 236.18	P/R Deduction (\$15.95 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi LIEBERMAN, JOSHUA, T, ,	al) or Full O	Organization Name	Date	of R	eceipt						
	Mailing Address 215 W WASHINGTON ST #33	05		M 10		/ D D 17	/ Y	2018				
	City CHICAGO	State IL	Zip Code 60606-3517				PR2477					
	FEC ID number of contributing federal political committee.	С							30.00	)		
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		Mem	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	egate Year-to-Date ▼ 245.00			ion (\$15.	.00 Bi-We	ekly)				
⊢	UBTOTAL of Receipts This Page (optional)		· ·		-	, . , .	· ·		77.37	7		

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IT.			Use separate schedule(s)	(ch	eck onl	у ог	ne)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>K</b> 11a		]11b	11c		2	
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma	I ay not be sold or used by any pe	erson	for the	pur	14 pose of	15 soliciting	g cont	ributio	0ns e
	NAME OF COMMITTEE (In Full)	name anu a		10 50		TUTL		Suci Suci		mille	0.
$\left \right\rangle$	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Coi	mmitt	ee					
A.	Full Name of Individual (Last, First, Middle Initi JARVIS, PATRICK, R, ,	al) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 343 W WOLF POINT PLZ 2905				10 <sup>M</sup>	/	D D D 17	) / Y	y 201	18	
	City CHICAGO	State IL	Zip Code 60654-0165					PR2477			
	FEC ID number of contributing federal political committee.	С			<u> </u>					25.00	)
	Name of Employer (for Individual)	Occi Insu		M	emo	tem Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	F	P/R Ded	ucti	on (\$12.	.50 Bi-We	eekly)		
В.	Full Name of Individual (Last, First, Middle Initi CUOMO, KEITH, , ,	al) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 19 LODGE LN			10 / Y Y Y Y 2018							
	City	State	Zip Code				-	PR2477			
	MILLER PLACE	NY	11764-1913	_	Amoun	t of	Each R	leceipt th	nis Pe	riod	
	FEC ID number of contributing federal political committee.	С		15.12							2
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		М	emo	o Item				
	Receipt For:	Aggregate	Year-to-Date ▼ , 224.42	P/R Deduction (\$15.12 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initi DONALDSON, Natalia, , ,	al) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 159 OAKESDALE DR				10 <sup>M</sup>	/	D D D 17	JL	201	8	
	City BLUFFTON	State SC	Zip Code 29909-7819					PR2477 leceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>		y			12.50	)
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		М	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 343.83		P/R Ded	lucti	on (\$12	.50 Semi	-Mont	hly)	
	UBTOTAL of Receipts This Page (optional)			_	[	-	9	,	-	52.62	2
L t	<b>OTAL</b> This Period (last page this line number of	riiy)	••••••		la de la companya de	1.0	-				

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Committee
A.	Full Name of Individual (Last, First, Middle Initi KIBLER, Bronson, , , Mailing Address 288 TRICKUM CREEK RD	al) or Full O	rganization Name	Date of Receipt
	City	State	Zip Code	10 17 2018 Transaction ID : PR2477775362518
	TYRONE	GA	30290-1711	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		12.89
	Name of Employer (for Individual) SELF		upation (for Individual) ırance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 222.63	P/R Deduction (\$12.89 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initi MCMILLAN, DARA, E., ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 3198 CASCADE DR			10 / Y Y Y Y 10 17 2018
	City BURLINGTON	State NC	Zip Code 27217-7450	Transaction ID : PR2478010762518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		44.64
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.70	P/R Deduction (\$22.32 Bi-Weekly)
<u></u> с.	Full Name of Individual (Last, First, Middle Initi CALDWELL, CELESTE, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 1385 VERA CRUZ			10 / D D / Y Y Y Y 10 17 2018
	City MEMPHIS	State TN	Zip Code 38117-6813	Transaction ID : PR2478084462518           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		5.64
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date  271.83	P/R Deduction (\$5.64 Semi-Monthly)
s	UBTOTAL of Receipts This Page (optional)			63.17
Т	OTAL This Period (last page this line number o	nly)		

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13		11b	11c		2 6	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the	e pur ontrit	pose of	soliciting	g cont	ributio	ons		
$\setminus$	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insur	rance Co	mpany Political Action	Commit	ttee	9						
Α.	Full Name of Individual (Last, First, Middle Initi SELKE, ERNEST, R., , JR	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1122 EASTERN AVE			10	العنتيا ليعا ليتنا							
	City CHARLTON	State NY	Zip Code 12019-2910				PR2478 eceipt th					
	FEC ID number of contributing federal political committee.	С				-			19.8	5		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Memo	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 200.72	P/R De	educti	ion (\$19.	85 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initi WIGGINS, TERA, , ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1001 DEXTER CIR			10 / D D / Y Y Y Y 2018								
	City	State	Zip Code	Tran	sact	ion ID :	PR24781	15176	2518			
	BIRMINGHAM	AL	35242-6663	Amou	nt of	Each R	eceipt th	is Pe	riod			
	FEC ID number of contributing federal political committee.	С	224.06									
	Name of Employer (for Individual) SELF	Occi Insu	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 801.89	P/R Deduction (\$0.00 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi Sherman, Renee, S, MS.,	al) or Full O	rganization Name	Date	of Re	eceipt						
	Mailing Address 1071 Brusko Drive			M 10		D D 17	/ Y	201		Ŷ		
	City The Villages	State FL	Zip Code 32163-4136				PR2478 eceipt th					
	FEC ID number of contributing federal political committee.	С		36.85								
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) President - Wealth Mgt		Mem	o Item						
	Receipt For: Primary General Other (specify)	Aggregate	gregate Year-to-Date ▼ 773.85			ion (\$36.	.85 Bi-We	eekly)				
	UBTOTAL of Receipts This Page (optional)		F		-	, . , .	· · ·	2	280.76	6		

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177			Use separate schedule(s)	(check on	ly on	ie)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	$\square$	11b 14	11c		2 6 [	17	
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the	purp pontrib	oose of	soliciting	contr	ributic	ons	
	NAME OF COMMITTEE (In Full)									-	
	Massachusetts Mutual Life Insur	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi HARRIS, Barkley, Miles, ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 1941 DENALI LANE			10 / Y Y Y Y 10 17 2018							
	City KELLER	State TX	Zip Code 76248-9725				PR24781 eceipt th				
	FEC ID number of contributing federal political committee.	С				7			52.38	3	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		lemo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.73	P/R Dec	ductio	on (\$52.:	38 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi KONAWALIK, BRADLEY, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 4459 BRAVERY PL SW			M N 10	/	D D 17	/ Y	2018	ү ү 8		
	City	State	Zip Code				PR24781				
	CONCORD	NC	28027-2709	Amour	nt of	Each Re	eceipt th	is Per	riod		
	FEC ID number of contributing federal political committee.	С		22.06							
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 205.91	P/R Deduction (\$11.03 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi Bargery, Brett, E., ,	al) or Full O	rganization Name	Date o	of Re	ceipt					
	Mailing Address 3541 N JASPER MTN CIR			10	/	D D 17	/ Y	2018			
	City MESA	State AZ	Zip Code 85207-9130				PR2478				
	FEC ID number of contributing federal political committee.	С				9	,		83.35	5	
	Name of Employer (for Individual) SELF		upation (for Individual) eral Agent	N	/lemo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	ggregate Year-to-Date ▼ 1750.35			on (\$83.:	35 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•			,	,	1	57.79	)	
Т	OTAL This Period (last page this line number of	only)	•••••		-	_			-		

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т	EMIZED RECEIPTS		Use separate		(check or	nly or	ie)					
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	y information copied from such Reports and S for commercial purposes, other than using the				rson for the		bose of	soliciting	contribu	itions		
$\setminus$	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	rance Co	mpany Poli	tical Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Init STENDER, MARY, , ,	ial) or Full O	rganization Nam	e	Date of	of Re	ceipt					
	Mailing Address 2934 HAWKINS CRK LANE				10 / Y Y Y Y 10 17 2018							
	City LEAGUE CITY	State TX	Zip Code 77573-154	4	Transaction ID : PR2478276962518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			70.07							
	Name of Employer (for Individual) SELF		upation (for Indiv rance Agent	idual)		/lemo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R De	ductio	on (\$70.0	07 Semi-	Monthly)					
в.	Full Name of Individual (Last, First, Middle Init JORDAN, Keith, Evans, ,		Date of Receipt									
	Mailing Address 7218 WHIPPOORWILL LN NE		10	VI /	D D 17	/ Y	2018	Y				
	City ALBUQUERQUE	State Zip Code						PR24783				
	FEC ID number of contributing federal political committee.	NM         87109-6072           C         Image: C         Image: C				Amount of Each Receipt this Period						
	Name of Employer (for Individual) SELF		upation (for Indiv Irance Agent	idual)	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	P/R Deduction (\$6.25 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Init Nicolas, Gaetan, , MR.,	ial) or Full O	rganization Nam	e	Date of	of Re	ceipt					
	Mailing Address 77 Raffaele Dr				M 10		D D 17		2018 Y			
	City Waltham	State MA	Zip Code 02452-031	3				PR24846				
	FEC ID number of contributing federal political committee.	С						eceipt th	125	_		
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Indiv President Sales	,		Vemo	Item					
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2625.00			P/R Deduction (\$125.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			•••••			5	,	207.	57		

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)         ✗ 11a       11b       11c       12         13       14       15       16       17							
	y information copied from such Reports and Sta for commercial purposes, other than using the r										
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	ance Co	mpany Political Action	Committee							
A.		l) or Full Or	ganization Name	Date of Receipt							
	Mailing Address 15 Stephenson Terrace			10 17 2018							
	City Briarcliff Manor	State NY	Zip Code 10510-1930	Transaction ID : PR2484675862518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		15.65							
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		pation (for Individual) & Counsel	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date ▼ 328.65	P/R Deduction (\$15.65 Bi-Weekly)							
B	Full Name of Individual (Last, First, Middle Initia Flynn, Daniel, J, MR.,	l) or Full Or	ganization Name	Date of Receipt							
υ.	Mailing Address 3011 Rocky Hollow Dr			10 17 2018							
	City Waxhaw	State NC	Zip Code 28173-5014	Transaction ID : PR2484676562518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		66.70							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		pation (for Individual) President Sales Support	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ , 667.00	P/R Deduction (\$66.70 Bi-Weekly)							
C.	Full Name of Individual (Last, First, Middle Initia Garrick, Alyssa, D, MS.,	l) or Full Or	ganization Name	Date of Receipt							
	Mailing Address 7104 Maricopa Road			10 17 2018							
	City Charlotte	State NC	Zip Code 28277-3577	Transaction ID : PR2484682662518							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		pation (for Individual) Business Planning	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate Y	Year-to-Date ▼ 589.60	P/R Deduction (\$36.85 Bi-Weekly)							
	UBTOTAL of Receipts This Page (optional)			119.20							

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IT	EMIZED RECEIPTS		for each	category of the Summary Page	(check oni 11a 13	11b 11c	2 12 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\left\rangle$	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	ance Co	ompany F	Political Action	Committ	ee						
Α.	Full Name of Individual (Last, First, Middle Initia Whelan, Sean, M, MR., Mailing Address 5084 Lily Pond Circle	l) or Full C	Prganization 1	Name	Date of	2018						
	City	State	Zip Coc		Trans	10         17         2018           Transaction ID : PR2484706062518						
	Waxhaw	NC	28173	-0246	Amoun	t of Each Receipt	this Period					
	FEC ID number of contributing federal political committee.	С					15.00					
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for I iness Plannir	ndividual) ng & Strategic Leader		emo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	315.00	P/R Ded	luction (\$15.00 Bi-	Weekly)					
В.	Full Name of Individual (Last, First, Middle Initia Costas, John, N, MR.,	ll) or Full C	organization 1	Name	Date o	f Receipt						
	Mailing Address 10 Massaco St Unit J		1		M M 10	/ D D / 17	2018					
	City	State CT	Zip Coc 06070			action ID : PR24						
	Simsbury FEC ID number of contributing federal political committee.	C			Amoun	this Period 18.75						
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for stems Data M	Individual) gmt Consultant	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	206.25	P/R Deduction (\$18.75 Bi-Weekly)							
С.	Full Name of Individual (Last, First, Middle Initia BACH, BRIAN, R, ,	l) or Full C	organization 1	Name	Date of	f Receipt						
	Mailing Address 49 ROGERS AVE				10 <sup>M</sup>	/ D D / 17	2018					
	City MILFORD	State CT	Zip Coc 06460-			saction ID : PR24						
	FEC ID number of contributing federal political committee.	С			Amoun	t of Each Receipt	30.00					
	Name of Employer (for Individual) SELF		upation (for I	ndividual)	— П м	emo Item						
	Receipt For: Primary General Other (specify)	1	Year-to-Date	242.49	P/R Deduction (\$15.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			••••••		· · · · · ·	63.75					
т	OTAL This Period (last page this line number or	nly)		•••••								

# SCHEDULE A (FEC Form 3X) MIZED DECEIDTS

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Mailing Address 38 WESLEY CT       Mailing Address 38 WESLEY CT       Mailing Address 38 WESLEY CT         City       State       Zip Code         EATONTOWN       NJ       07724-1423         FEC ID number of contributing       C       Amount of Each F         FEC ID number of contributing       C       Memo Item         federal political committee.       Occupation (for Individual)       Memo Item         SELF       Broker       Aggregate Year-to-Date ▼       P/R Deduction (\$50         Primary       General       0ther (specify) ▼       827.13       Date of Receipt         B.       JACOB, SCOTT, J, ,       Date of Receipt       Memo / Date       Memo / Date									
or for commercial purposes, other than using the name and address of any political committee to solicit contributions         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. GILL, ROBERT, EMMETT, , SR         Mailing Address 38 WESLEY CT         City       State         EATONTOWN       NJ         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Broker         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregatic Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Primary       General       Other (specify) ▼         Aggregate Year-to-Date ▼       P/R Deduction (\$50         Primary       General       Date of Receipt         Aggregate Year-to-Date ▼       P/R Deduction (\$50         Pate of Receipt       Date of Receipt									
Massachusetts Mutual Life Insurance Company Political Action Committee         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         GILL, ROBERT, EMMETT, , SR         Mailing Address 38 WESLEY CT         City         EATONTOWN         FEC ID number of contributing federal political committee.         Name of Employer (for Individual) SELF         Primary       General Other (specify) ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B.       JACOB, SCOTT, J, , Mailing Address 24 JOHN ST									
A. GILL, ROBERT, EMMETT, , SR       Date of Receipt         Mailing Address 38 WESLEY CT       Transaction ID :         City       State       Zip Code         EATONTOWN       NJ       07724-1423         FEC ID number of contributing federal political committee.       C       Amount of Each F         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         SELF       Broker       Aggregate Year-to-Date ▼       P/R Deduction (\$50         Primary       General       827.13       Date of Receipt         State       JACOB, SCOTT, J, ,       Date of Receipt         Mailing Address 24 JOHN ST       Milling Address 24 JOHN ST       Milling Address 24 JOHN ST									
City       State       Zip Code         EATONTOWN       NJ       07724-1423         FEC ID number of contributing       C         federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Broker         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       827.13         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. JACOB, SCOTT, J, ,       Date of Receipt         Mailing Address 24 JOHN ST       Mmm / Date	Date of Receipt								
EATONTOWN       NJ       07724-1423       Amount of Each F         FEC ID number of contributing federal political committee.       C       Amount of Each F         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         SELF       Broker       Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$50         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         JACOB, SCOTT, J, ,       Mailing Address 24 JOHN ST       Memo Item									
FEC ID number of contributing federal political committee.       C       Annohit of Each P         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         SELF       Broker       Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$50         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         JACOB, SCOTT, J, ,       Mailing Address 24 JOHN ST       Memo Item	Transaction ID : PR2490277662518								
federal political committee.       Image: Committee.       Image: Committee.       Image: Committee.         Name of Employer (for Individual)       Occupation (for Individual)       Image: Committee.       Image: Committee.         SELF       Broker       Broker       Primary       General       Other (specify) ▼       P/R Deduction (\$50         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       B. JACOB, SCOTT, J, ,       Date of Receipt         Mailing Address 24 JOHN ST       Image: Committee.       Image: Committee.       Image: Committee.	Receipt this Period								
SELF       Broker         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       Aggregate Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       B. JACOB, SCOTT, J, ,         Mailing Address 24 JOHN ST       Mail	100.00								
Primary       General         Other (specify)       ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. JACOB, SCOTT, J, ,         Mailing Address 24 JOHN ST									
Other (specify) ▼       827.13         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. JACOB, SCOTT, J, ,       Mailing Address 24 JOHN ST									
B. JACOB, SCOTT, J, , Mailing Address 24 JOHN ST Date of Receipt	I.00 Bi-Weekly)								
Mailing Address 24 JOHN ST									
10 17									
	PR2490415262518								
MILFORD CT 06460-5615 Amount of Each F	Receipt this Period								
FEC ID number of contributing federal political committee.	32.80								
Name of Employer (for Individual)     Occupation (for Individual)     Memo Item       SELF     Insurance Agent									
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       P/R Deduction (\$16	P/R Deduction (\$16.40 Bi-Weekly)								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. CURRY, JAMES, PAUL, , Date of Receipt									
Mailing Address 5961 W PARKER RD APT 1305									
	PR2491628162518								
PLANO TX 75093-7743 Amount of Each F	Receipt this Period								
FEC ID number of contributing federal political committee.	47.90								
Name of Employer (for Individual)Occupation (for Individual)Memo ItemSELFInsurance Agent									
Receipt For:     Aggregate Year-to-Date ▼       Primary     General   P/R Deduction (\$23	95 Bi-Weekly)								
Other (specify)	·····,,								
SUBTOTAL of Receipts This Page (optional)									

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IT.					(check only one)							
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 1 <sup>1</sup>	-	11b 14	11c		12 16	17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for	the p	urpose of	soliciting	g cont	tributio	ons		
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Comn	nitte	е						
Α.	Full Name of Individual (Last, First, Middle Initi SEAY, EVERETTE, M, ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 4392 WORTH DR E	1-			10 / 17 / Y Y Y 2018							
	City JACKSONVILLE	State FL	Zip Code 32207-7502			ction ID : of Each R						
	FEC ID number of contributing federal political committee.	С				7		1	100.00	0		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Mer	no Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 305.05	P/R	Deduc	ction (\$50.	.00 Bi-We	eekly)				
в.	Full Name of Individual (Last, First, Middle Initi LaPiana, Paul, A, MR.,	al) or Full O	rganization Name	Dat	e of F	Receipt						
	Mailing Address 6615 Green Knoll Drive			10 / D D / Y Y Y Y Y 10 17 2018								
	City	State	Zip Code	Tr	ansad	tion ID :	PR25058	30586	2518			
	Dallas	TX	75230-2809	Am	ount d	of Each R	Receipt th	nis Pe	riod			
	FEC ID number of contributing federal political committee.	С	166.70									
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Occi SVF	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 3500.70	P/R Deduction (\$166.70 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi CHANG, DAVID, T, ,	al) or Full O	rganization Name	Dat	e of F	Receipt						
	Mailing Address 501 FERNCROFT CT		- 1	_ L	10 <sup>M</sup>	/ D D 17	JL	ү 201	8			
	City DANVILLE	State CA	Zip Code 94526-5517			ction ID : of Each R						
	FEC ID number of contributing federal political committee.	С				9		1	100.76	6		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Mer	no Item						
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 798.51	P/R	Dedu	ction (\$50	.38 Bi-We	eekly)					
s	UBTOTAL of Receipts This Page (optional)		▶			9	, ,	3	367.46	6		
т	OTAL This Period (last page this line number o	nly)	<b></b>				-		-			

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
	y information copied from such Reports and St for commercial purposes, other than using the										
$\setminus$	NAME OF COMMITTEE (In Full)	•		0							
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee							
<u>к</u> А.	Full Name of Individual (Last, First, Middle Init Carr, Samuel, H, MR.,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 9022 Colfax Rdg			10 / Y Y Y Y 10 17 2018							
	City	State TX	Zip Code	Transaction ID : PR2512006462518							
	Helotes		78023-4563	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		16.70							
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
	Massachusetts Mutual Life Insurance Co	Exte	ernal Wholesaler								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General Other (specify) ▼		217.10	P/R Deduction (\$16.70 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name								
Β.	Hassara, Teresa, A, MS.,			Date of Receipt							
	Mailing Address 239 Kimball Rd			10 / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR2512012362518							
	Carlisle	MA	01741-1036	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		250.00							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) ad of Workplace Solutions	Memo Item							
	Receipt For:	Aggregate	Year-to-Date V	P/R Deduction (\$250.00 Bi-Weekly)							
	Primary General										
	Other (specify) <b>v</b>		1750.00								
с.	Full Name of Individual (Last, First, Middle Init Murphy, Sean, , MR.,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 6829 Vallon Drive			M M / D D / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR2519257162518							
	Rancho Palos Verdes	CA	90275-5305	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		83.35							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) President National Sales	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 583.45	P/R Deduction (\$83.35 Bi-Weekly)							
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o		F	350.05							

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# SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

# Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗     11a     11b     11c     12       13     14     15     16     17								
	y information copied from such Reports and S for commercial purposes, other than using the			rson for the purpose of soliciting contributions								
$\square$	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee								
Α.	Full Name of Individual (Last, First, Middle Init ENOS, Michael, Scott, ,	tial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1602 RUELLE DE GRACE DF	2		10 17 Y Y Y Y Y 2018								
	City	State	Zip Code	Transaction ID : PR2541283862518								
	BATON ROUGE	LA	70810-0510	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		200.00								
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item								
	Receipt For:		Year-to-Date ▼	-								
	Primary General Other (specify) ▼		200.30	P/R Deduction (\$100.00 Bi-Weekly)								
— B	Full Name of Individual (Last, First, Middle Init Sonne, James, , MR.,	tial) or Full O	rganization Name	Date of Receipt								
υ.	Mailing Address 2555 Pennsylvania Ave NW A	10 17 2018										
	City	State	Zip Code	Transaction ID : PR2544060162518								
	Washington	DC	20037-1640	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		21.90								
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) P Government Relations	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		, 240.90	P/R Deduction (\$21.90 Bi-Weekly)								
— c.	Full Name of Individual (Last, First, Middle Init Russek, David, , MR.,	tial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 10 Cumston St			10 17 2018								
	City	State	Zip Code	Transaction ID : PR2544080562518								
	Boston	MA	02118-3857	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		38.90								
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) Supplier Management	Memo Item								
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 505.70	P/R Deduction (\$38.90 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		▶	260.80								

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

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FOR LINE NUMBER:

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IT.		Use separate schedule(s) (d		(check only one)								
			for each category of the Detailed Summary Page	<b>×</b> 11a 13		11b	11c	12	Г	17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any per address of any political committee	rson for th	e pui contril	rpose of	soliciting	contr	ibutio	ns		
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commi	ttee	)						
Α.	Full Name of Individual (Last, First, Middle Initi Milikowsky, Matthew, , MR.,	al) or Full O	Organization Name	Date of Receipt								
	Mailing Address 131 Winchester St				10 / D D / Y Y Y Y 10 17 2018							
	City Brookline	State MA	Zip Code 02446-2762			tion ID : Each R						
	FEC ID number of contributing federal political committee.	С							27.80	)		
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) P Strategic Development		Mem	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 361.40	P/R De	educt	ion (\$27.	80 Bi-We	ekly)				
В.	Full Name of Individual (Last, First, Middle Initi LARGE, ABBE, F, ,	al) or Full O	Organization Name	Date	of R	eceipt						
	Mailing Address 11 BLANCHARD RD			10		D D D 17	/ Y	۲ 2018				
	City	State	Zip Code			ion ID :						
	GREENWICH	СТ	06831-3676	Amou	int of	Each R	eceipt th	is Per	iod			
	FEC ID number of contributing federal political committee.	C			25.00							
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi MELTZER, ALAN, L, ,	al) or Full O	Organization Name	Date	of R	eceipt						
	Mailing Address 2000 S OCEAN BLVD APT 3K			10		D D 17	/ Y	2018				
	City BOCA RATON	State FL	Zip Code 33432-8085			tion ID : Each R						
	FEC ID number of contributing federal political committee.	С				y .	, y	4	51.40	)		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Mem	o Item						
	Receipt For: Primary General Other (specify)	Year-to-Date ▼ 4062.49	P/R De	educt	ion (\$228	5.70 Bi-W	/eekly)	)				
s	UBTOTAL of Receipts This Page (optional)		•			,	.,	50	04.20			
Т	OTAL This Period (last page this line number o	only)	••••••						-			

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

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			Detailed Summary Page	[2	<b>′</b> 11a		11b	11c		12			
_					13		14	15		16	17		
	y information copied from such Reports and St for commercial purposes, other than using the												
$\setminus$	NAME OF COMMITTEE (In Full)												
	Massachusetts Mutual Life Insu			Co	mmitt	ee							
Α.	Full Name of Individual (Last, First, Middle Initi WINGERD, ANGELA, M, ,	ial) or Full C	Organization Name	Date of Receipt									
	Mailing Address 10297 STONE QUARRY RD			M M / D D / Y Y Y Y Y 10 17 2018									
	City	State	Zip Code		Transaction ID : PR789850162518								
	RIGA	MI	49276-9645	_	Amoun	t of	Each I	Receipt t	his F	Period			
	FEC ID number of contributing federal political committee.	С					-			25.3	88		
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		M	lemo	tem						
	Receipt For:		Year-to-Date ▼	$\neg$									
	Primary General	, .99,09010		F	P/R Dec	lucti	on (\$12	2.69 Bi-W	/eekl	y)			
	Other (specify) ▼		249.27										
в.	Full Name of Individual (Last, First, Middle Initi GLEASON, ANTHONY, M, ,	ial) or Full C	Organization Name		Date o	f Re	eceipt						
	Mailing Address 7098 E FISH LAKE RD				10	/	D 17	D / Y	2(	) 18	Y		
	City	State	Zip Code		Trans	acti	ion ID :	PR7898	5106	62518			
	MAPLE GROVE	MN	55311-2832		Amoun	t of	Each I	Receipt t	his F	Period			
	FEC ID number of contributing federal political committee.	С				-			41.0	)8			
	Name of Employer (for Individual) SELF	Occ		M	lemo	tem							
	Receipt For:	Aggregate	Year-to-Date ▼	—									
	Primary General	, iggi ogalo		F	P/R Ded	luctio	on (\$20	.54 Bi-W	eekl	y)			
	Other (specify) V	L	217.87						. ,				
с.	Full Name of Individual (Last, First, Middle Initi STARR, ANTHONY, R, ,	ial) or Full C	Organization Name		Date o	f Re	eceipt						
	Mailing Address 2 PAISLEY CT				<sup>M</sup> 10	/	D 17			) 018	Y		
	City	State	Zip Code		Tran	sact	ion ID	: PR7898	3513	62518			
	SAVANNAH	GA	31411-3078		Amoun	t of	Each F	Receipt t	his F	Period			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,			25.0	00		
	Name of Employer (for Individual) SELF	Occ Bro	upation (for Individual) ker		N	lemo	o Item						
	Receipt For: Primary General Other (specify)	mary General Aggregate real-to-Date +						2.50 Bi-W	/eekl	y)			
s	UBTOTAL of Receipts This Page (optional)		•	 			,	. ,		91.4	6		

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17			Use separate schedule(s)	(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c		2	17				
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for the	purpose	of soliciting	g cont	ributio	ons				
	NAME OF COMMITTEE (In Full)												
$\rangle$	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Committ	ee								
Α.	Full Name of Individual (Last, First, Middle Initi BUTERBAUGH, BRET, J, ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 207 FAIRFIELD DRVIE			10	M         M         /         D         /         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y								
	City STATE COLLEGE	State PA	Zip Code 16801-8244										
	FEC ID number of contributing federal political committee.	С				-		30.00	0				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	M	lemo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 242.49	P/R Dec	duction (\$1	15.00 Bi-W	eekly)						
В.	Full Name of Individual (Last, First, Middle Initi CLORE, BRINEY LEE, , ,	al) or Full O	rganization Name	Date o	f Receipt								
	Mailing Address 5064 SWITCH GRASS LN			10 / D D / Y Y Y Y 2018									
	City	State	Zip Code	Trans	action ID	: PR7898	59962	518					
	NAPERVILLE	IL	60564-5367	Amoun	t of Each	Receipt th	nis Pe	riod					
	FEC ID number of contributing federal political committee.	C			30.18								
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 239.63	P/R Deduction (\$15.09 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initi RIDDLE, Bruce, T., ,	al) or Full O	rganization Name	Date o	f Receipt								
	Mailing Address 3702 E 63RD ST			10 <sup>M</sup>		D / Y 7	201		Ŷ				
	City TULSA	State OK	Zip Code 74136-1523			D: PR7898 Receipt th							
	FEC ID number of contributing federal political committee.	С			.,	9	ł	166.67	7				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo Item	1							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.67	P/R Dec	duction (\$ <sup>^</sup>	166.67 Mor	nthly)						
⊢	UBTOTAL of Receipts This Page (optional)		<b>r</b>				2	226.85	5				

FOR LINE NUMBER:

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171			(check only one)									
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13		11b 14	11c 15		12 16	17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any per ddress of any political committee	rson for the	e pur ontrit	pose of potions fr	soliciting	, con	tributi	ons		
	NAME OF COMMITTEE (In Full)											
$\langle \rangle$	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	ttee							
Α.	Full Name of Individual (Last, First, Middle Initia HANNING, Bryan, Scott, ,	al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1 N SANDPIPER ST				10 17 2018							
	City	State	Zip Code	Trar	nsact	ion ID : I	PR7898	61062	2518			
	WICHITA	KS	67230-6626	Amou	nt of	Each Re	eceipt th	is Pe	eriod			
	FEC ID number of contributing federal political committee.	С					-		222.2	0		
	Name of Employer (for Individual)	Осси	upation (for Individual)	-  -	Memo	b Item						
	SELF		irance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General	33 - 3		P/R De	ducti	on (\$222	.20 Mor	thly)				
	Other (specify) <b>v</b>		555.60									
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name									
В.	ERSTAD, B, HYATT, , JR			Date	of Re	eceipt						
	Mailing Address 2510 S NANTUCKET WAY			M 10		D D 17	/ Y	201	8	Y		
	City	State ID	Zip Code			ion ID : F						
	BOISE		83706-5095	Amou	nt of	Each Re	eceipt th	is Pe	eriod			
	FEC ID number of contributing federal political committee.	С		25.00								
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼	1								
	Primary General			P/R De	ducti	on (\$12.5	50 Bi-We	ekly)				
	Other (specify) <b>v</b>		250.00									
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia CAVASSO, CAMPBELL, , ,	al) or Full O	rganization Name	Date	of Re	eceipt						
	Mailing Address 41-530 WAIKUPANAHA ST			M 10		D D 17	/ Y	201	8	Y		
	City	State	Zip Code	Trar	nsact	ion ID :	PR7898	62862	2518			
	WAIMANALO	HI	96795-1438	Amou	nt of	Each Re	eceipt th	is Pe	eriod			
	FEC ID number of contributing federal political committee.	С				9	9		50.0	0		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	ישך	Memo	o Item						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R De	educti	on (\$25.0	00 Bi-W	eeklv	)			
	Other (specify)	L	500.00			(+=51)		, ,	,			
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o				-	, ,	,	2	297.20	0		

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171	EMIZED RECEIPTS		(check only one)									
11			for each category of the Detailed Summary Page	<b>×</b> 11a 13	11b 14	11c 15	12		17			
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the to solicit co	purpose of ntributions f	soliciting	contri n comn	butio nittee	ns			
$\left  \right $	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	irance Co	mpany Political Action	Committ	ee							
Α.	Full Name of Individual (Last, First, Middle Ini WILSON, CASSANDRA, LOU, ,	tial) or Full O	rganization Name	Date o	f Receipt							
	Mailing Address 3909 PATTY LN			10 <sup>M</sup>	M M / D D / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR789865062518								
	BETHANY	OK	73008-3046	Amoun	t of Each R	leceipt th	is Peri	od				
	FEC ID number of contributing federal political committee.	С			1 40 1		2	25.00				
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	М	emo Item							
	Receipt For:	Aggregate	Year-to-Date <b>V</b>		uction (\$12.	50 Bi W/	ookly)					
	Other (specify) V		250.00	F/R Deu	αστοπ (φτ2.	.50 BI-We	eckiy)					
В.	Full Name of Individual (Last, First, Middle Ini FLYNN, CHRISTOPHER, J, ,	tial) or Full O	rganization Name	Date o	f Receipt							
	Mailing Address 126 JERICHO RD			10 <sup>M</sup>	/ D D 17	/ Y	2018		1			
	City	State	Zip Code	Trans	action ID :	PR78987	709625	18				
	SCITUATE	MA 02066-3558				leceipt th	is Peri	od				
	FEC ID number of contributing federal political committee.	С		25.00								
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item								
	Receipt For:	Aggregate	Year-to-Date <b>V</b>									
	Primary General Other (specify) ▼		250.00	P/R Ded	uction (\$12.	50 Bi-We	ekly)					
	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	reanization Namo									
C.	HEERDEGEN, CHRISTOPHE, L,			Date o	f Receipt							
	Mailing Address 6862 SECTION RD			10 <sup>M</sup>	/ D D 17		2018		]			
	City	State	Zip Code	Trans	saction ID :	PR7898	713625	518	_			
	OTTAWA LAKE	MI	49267-9551	Amoun	t of Each R	leceipt th	is Peri	od				
	FEC ID number of contributing federal political committee.	С			. , .	,	13	33.30				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	M	emo Item							
	Receipt For:		Year-to-Date ▼	-								
	Primary General Other (specify)	Aggregate	983.43	P/R Deduction (\$66.65 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		, ,		· · · ·		18	33.30	_			

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

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ıт.			Use separate schedule(s) for each category of the	(check only one)							
	EMIZED RECEIPTS		<b>X</b> 11a	11b 14	11c 15	12	17				
Ar or	ny information copied from such Reports and Si for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the to solicit co	purpose of ntributions 1	soliciting from suc	) contrib h commi	utions ittee.			
$\left[ \right]$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Init SCHNEIDER, COREY, A, ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 20 STRATTON RD			10	/ D 17	) / Y	ү ү 2018	Y			
	City SCARSDALE	State NY	Zip Code 10583-7555		saction ID : It of Each F						
	FEC ID number of contributing federal political committee.	С					416	6.68			
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		lemo Item						
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 4166.66	P/R Dec	duction (\$20	8.34 Bi-V	/eekly)				
В.	Full Name of Individual (Last, First, Middle Init SMITH, Daniel, M., ,	ial) or Full O	rganization Name	Date o	f Receipt						
	Mailing Address 1110 TENNWOOD DR			10		) / Y	2018	Y			
	City	State	Zip Code	Trans	saction ID :	PR78987	7766251	8			
	WILMINGTON	NC	28411-8306	Amoun	t of Each F	leceipt th	is Perio	d			
	FEC ID number of contributing federal political committee.	C			88.5						
	Name of Employer (for Individual) SELF		upation (for Individual) Jrance Agent	Memo Item							
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 222,27	P/R Deduction (\$88.87 Monthly)							
<u>с</u> .	Full Name of Individual (Last, First, Middle Init ROOT, DAVID, H, ,	ial) or Full O	rganization Name	Date o	f Receipt						
	Mailing Address 2500 HOLLYWOOD BLVD #30	04		10 <sup>M</sup>	/ D 17		2018 Y	Y			
	City HOLLYWOOD	State FL	Zip Code 33020-6615		saction ID : it of Each F						
	FEC ID number of contributing federal political committee.	С					55	5.88			
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 460.28	P/R Dec	duction (\$27	.94 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)		•				561	1.43			
т	OTAL This Period (last page this line number of	only)									

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IT.			Use separate schedule(s)			(check only one)						
11			for each category of the Detailed Summary Page		<b>X</b> 11a 13		11b 14	11c		12 16	17	
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p address of any political committee	erson e to s	for the	pur ntrib	pose of outions fr	soliciting	g con	tributi	ons	
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Со	mmitt	ee						
Α.	Full Name of Individual (Last, First, Middle Initia DAVIS, David, L., ,	al) or Full O	Drganization Name		Date of Receipt							
	Mailing Address 4211 83RD AVE SE				10 <sup>M</sup>	/	D D 17	/ Y		18 18	Y	
	City MERCER ISLAND	StateZip CodeWA98040-4015					ion ID : Each Re					
	FEC ID number of contributing federal political committee.	С			<u> </u>					266.6	7	
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent		М	emo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.67	1	P/R Ded	ucti	on (\$266	6.67 Mor	nthly)			
в.	Full Name of Individual (Last, First, Middle Initia BECKER, DAVID, M, ,	al) or Full O	Drganization Name		Date of	f Re	eceipt					
	Mailing Address 117 ROSE DR			10 / D D / Y Y Y Y Y 10 17 2018							Y	
	City	State	Zip Code 16870-7535		Trans	acti	ion ID : I	PR7898	85662	2518		
	PORT MATILDA	PA		Amoun	t of	Each R	eceipt th	nis Pe	eriod			
	FEC ID number of contributing federal political committee.	С			<u> </u>		-			25.0	0	
	Name of Employer (for Individual) SELF	Occi Insu	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	]	P/R Ded	uctio	on (\$12.	50 Bi-We	eekly)	)		
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Drganization Name		Date of	f Re	eceipt					
	Mailing Address 94 HOLST DR W				<sup>M</sup> 10	/	D D 17	/ Y	202	18 <sup>°</sup>	Y	
	City HUNTINGTON	State NY	Zip Code 11743-3940				ion ID : Each Re					
	FEC ID number of contributing federal political committee.	С			<u> </u>		<b>,</b> .			25.0	0	
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent		M	emo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	]	P/R Ded	lucti	on (\$12.	50 Bi-W	eekly	')		
s	UBTOTAL of Receipts This Page (optional)			•			,	. ,		316.6	7	
Т	OTAL This Period (last page this line number o	nly)		•			-					

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IT.			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c		12 16	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any per ddress of any political committee	son for the	purpose	of solicitir	ng cor ch cor	ntributi	ons		
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insur	rance Co	mpany Political Action (	Committ	ee						
А.	Full Name of Individual (Last, First, Middle Initi DUVAL, DENNIS, MICAHEL, ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 175 TURN BERRY LN			M M / D D / Y Y Y Y Y 10 17 2018							
	City BATTLE CREEK	State MI	Zip Code 49015-9406			D:PR789					
	FEC ID number of contributing federal political committee.	С						29.1	6		
	Name of Employer (for Individual) SELF	Occu Brok	upation (for Individual) ker		emo Iten	n					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 291.64	P/R Dec	luction (\$	14.58 Bi-V	Veekly	)			
в.	Full Name of Individual (Last, First, Middle Initi OLSEN, DONALD, G, ,	al) or Full O	rganization Name	Date o	f Receipt	:					
	Mailing Address 709 JEFFERSON ST			M M 10		17 /	20	18 18	Y		
	City	State	Zip Code	Trans	action II	) : PR7898	39186	2518			
	HANOVER	IL	61041-9678	Amoun	t of Each	Receipt	this P	eriod			
	FEC ID number of contributing federal political committee.	С			7			25.0	0		
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi LEBOLD, EDWARD, J, ,	al) or Full O	rganization Name	Date o	f Receipt	:					
	Mailing Address 945 OAK TER			10		D / 17	y y 20	т 18	Y		
	City LAKE OSWEGO	State OR	Zip Code 97034-4664			D:PR789					
	FEC ID number of contributing federal political committee.	С			 			41.6	8		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		emo Iter	n					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 395.83	P/R Dec	luction (\$	20.84 Bi-V	Veekly	')			
s	UBTOTAL of Receipts This Page (optional)					,		95.84	4		
Т	OTAL This Period (last page this line number c	only)			-						

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
11			for each category of the Detailed Summary Page	<b>×</b> 11a		11c	12					
	y information copied from such Reports and St											
	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and a	duress of any political committee		indutions from	n such	commute					
$\rangle$	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Committe	е							
Α.		al) or Full O	rganization Name	Date of Receipt								
	Mailing Address 106 BROOKHAVEN DR			10 / D D / Y Y Y Y 10 17 2018								
	City E LONGMEADOW	State MA	Zip Code 01028-1409		ction ID : PR of Each Rece							
	FEC ID number of contributing federal political committee.	С				-	25.0	0				
	Name of Employer (for Individual) SELF		ipation (for Individual) rance Agent	Mer	no Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduc	ction (\$12.50	Bi-We	ekly)					
B.	Full Name of Individual (Last, First, Middle Initi GINNANE, F, JAMES, ,	al) or Full O	rganization Name	Date of F	Receipt							
	Mailing Address 8570 GREENWAY CT			10 / D D / Y Y Y Y 10 17 2018								
	City EAST AMHERST	State NY	Zip Code 14051-2054		ction ID : PR							
	FEC ID number of contributing federal political committee.	С		25.00								
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)								
C.	Full Name of Individual (Last, First, Middle Initi PICKETT, FRANCIS, JOSEPH, ,	al) or Full O	rganization Name	Date of F	Receipt							
	Mailing Address 133 BONNIEBRAE CT			10 <sup>M</sup>	/ D D 17		2018	Y				
	City BURLESON	State TX	Zip Code 76028-2335		ction ID : PR							
	FEC ID number of contributing federal political committee.	С			,	9	20.8	4				
	Name of Employer (for Individual)		upation (for Individual) rance Agent	Mer	no Item							
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 218.84			ction (\$10.42	Bi-We	ekly)					
⊢	UBTOTAL of Receipts This Page (optional)				, ,	7	70.8	4				

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IТ			(check on								
	EMIZED RECEIPTS		<b>X</b> 11a	11b	11c	12	17				
	ny information copied from such Reports and S for commercial purposes, other than using the										
$\left[ \right]$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Init WILLIAMS, FORREST, E, , JR	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 1909 WOODSIDE LN			10 <sup>M</sup>	17		ү ү 2018				
	City VIRGINIA BCH	State VA	Zip Code 23454-1031		saction ID						
			201011001	Amour	nt of Each F	Receipt ti	nis Perio	a			
	FEC ID number of contributing federal political committee.	С			1 - 192 - 1		26	5.44			
	Name of Employer (for Individual)	Осси	upation (for Individual)	N	lemo Item						
	SELF	Insu	rance Agent	_							
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Other (specify)		247.09	P/R Dec	duction (\$13	3.22 Bi-W	eekly)				
_	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name								
Β.	TAYLOR, FRANKLIN, J, ,			Date o	of Receipt						
	Mailing Address 5062 RANCHITO AVE			M 10	/ D 17		ү ү 2018	Y			
	City	State	Zip Code		saction ID :						
	SHERMAN OAKS	CA	91423-1226	Amour	nt of Each F	Receipt t	nis Perio	d			
	FEC ID number of contributing federal political committee.	С		27.08							
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
	Receipt For:		Year-to-Date ▼	_							
	Primary General	riggi ogato		P/R Deduction (\$13.54 Bi-Weekly)							
	Other (specify) <b>v</b>		243.74				.,				
С.	Full Name of Individual (Last, First, Middle Init TYRRELL, Gene, S., ,	tial) or Full O	rganization Name	Date o	of Receipt						
	Mailing Address 1657 SOUTHPORT DR Suite 415			10	/ D 17		2018	Y			
	City	State	Zip Code	Tran	saction ID	: PR7899	1336251	8			
	RIVERSIDE	CA	92506-5450	Amour	nt of Each F	Receipt t	nis Perio	d			
	FEC ID number of contributing federal political committee.	С			. , .	.,	133	9.33			
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo Item						
	Receipt For:	1	Year-to-Date V	$\neg$							
	Primary General	Aggregate		P/R De	duction (\$13	33.33 Mo	nthly)				
	Other (specify)		333.33				• /				
	ILIPTOTAL of Possints This Page (anticasi)						186	.85			
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ıт.			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1						
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Init BECKNELL, George, Phelps, , III	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 201 CRESCENT ST			10 / Y Y Y Y Y 10 17 2018						
	City SAN ANTONIO	State TX	Zip Code 78209-4406	Transaction ID : PR789915662518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		222.20						
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item						
	Receipt For:       Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 555.60	P/R Deduction (\$222.20 Monthly)						
В.	Full Name of Individual (Last, First, Middle Init CAYLOR, George, V., ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 2460 RIVERMONT AVE			10 / Y Y Y Y 10 17 2018						
	City	State	Zip Code	Transaction ID : PR789915862518						
	LYNCHBURG	VA	24503-1546	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		133.33						
	Name of Employer (for Individual) SELF	Occ Bro	upation (for Individual) ker	Memo Item						
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.33	P/R Deduction (\$133.33 Monthly)						
<u>с</u> .	Full Name of Individual (Last, First, Middle Init KIMPEL, GORDON, M, ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 10161 CASTLEWOOD LN			10 / Y Y Y Y 2018						
	City OAKTON	State VA	Zip Code 22124-3026	Transaction ID : PR789919762518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		40.00						
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 220.00	P/R Deduction (\$20.00 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		•	395.53						
т	OTAL This Period (last page this line number of	only)								

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ı <del>ب</del>			Use separate schedule(s) for each category of the	(check only one)							
11	EMIZED RECEIPTS		¥ 11a 13	11b 14	11c 15	12	Г	17			
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for the to solicit co	purpose of ntributions 1	soliciting from suc	j contri h comn	butic	ons Ə.		
$\setminus$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committ	ee						
Α.	Full Name of Individual (Last, First, Middle Initi CARROLL, Gregory, F., ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 6016 CAIRN TER			10 <sup>M</sup>	/ D [ 17	) / Y	2018	ү ү 3			
	City BETHESDA	State MD	Zip Code 20817-5406		action ID : t of Each F						
	FEC ID number of contributing federal political committee.	С					26	66.67	,		
	Name of Employer (for Individual) SELF	Occu Brok	upation (for Individual) er	M	emo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.67	P/R Ded	uction (\$26	6.67 Mon	ıthly)				
В.	Full Name of Individual (Last, First, Middle Initi SKARDA, HAROLD, J, , JR	al) or Full O	rganization Name	Date of	Receipt						
	Mailing Address 746 LOST CREEK DR			M M 10							
	City	State	Zip Code	Trans	action ID :	PR78992	260625	18			
	BULVERDE	TX	78163-3147	Amount	t of Each F	Receipt th	nis Peri	od			
	FEC ID number of contributing federal political committee.	С		20.82							
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 208.37	P/R Deduction (\$10.41 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi MERIWETHER, HERSHEL, S, , II	al) or Full O	rganization Name	Date of	Receipt						
	Mailing Address 6535 ADEN LN			м м 10	/ D 17		2018				
	City AUSTIN	State TX	Zip Code 78739-1594		action ID :						
	FEC ID number of contributing federal political committee.	С			t of Each F			00 19.85	5		
	Name of Employer (for Individual) SELF		ipation (for Individual) ance Agent	М	emo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 200.74	P/R Ded	uction (\$19	.85 Semi	-Month	ly)			
s	UBTOTAL of Receipts This Page (optional)		•				30	)7.34			
т	OTAL This Period (last page this line number of					_	- 10				

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	,	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
Any information copied from such Repo	rts and Statements ma using the name and a	ay not be sold or used by any p ddress of any political committed	erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Massachusetts Mutual Lif	e Insurance Co	mpany Political Action	Committee							
Full Name of Individual (Last, First, M A. Bienenfeld, Howard, N., ,	Aiddle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5921 SW 33RD LN			10 / Y Y Y Y 10 17 2018							
City FT LAUDERDALE	State FL	Zip Code 33312-6364	Transaction ID : PR789932762518 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		166.67							
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.67	P/R Deduction (\$166.67 Monthly)							
Full Name of Individual (Last, First, M B. HINRICHS, IVAN, CARL, ,	Aiddle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2418 LA MAISON D	२		10 17 2018							
City	State NC	Zip Code	Transaction ID : PR789935262518							
CHARLOTTE FEC ID number of contributing		28226-6200	Amount of Each Receipt this Period							
federal political committee.	C		41.68							
Name of Employer (for Individual) SELF	Occi Brol	upation (for Individual) ker	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.67	P/R Deduction (\$20.84 Bi-Weekly)							
Full Name of Individual (Last, First, M C. JENSEN, JAMES, MICHAE		rganization Name	Date of Receipt							
Mailing Address 7903 COPELAND R			10 / D D / Y Y Y Y 10 17 2018							
City ODESSA	State FL	Zip Code 33556-3261	Transaction ID : PR789937162518 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		50.00							
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)							
SUBTOTAL of Receipts This Page (op	tional)		258.35							
TOTAL This Period (last page this line	number only)									

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ıт.			Use separate schedule(s)	(check d							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a	a 🗌	11b	11c		ſ	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	erson for th	ne pu contri	rpose of	soliciting	contr	ributio	ons	
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insur	rance Co	ompany Political Action	Comm	ittee	;					
Α.	Full Name of Individual (Last, First, Middle Initi BROCKE, JAMES, C, ,	ial) or Full O	Organization Name	Date of Receipt							
	Mailing Address 14010 PLATTE DR			M M / D D / Y Y Y Y 10 17 2018							
	City CARMEL	State IN	Zip Code 46033-8592			tion ID : Each R					
	FEC ID number of contributing federal political committee.	С							15.13	3	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Mem	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.15	P/R D	educt	ion (\$15.	13 Semi-	Month	nly)		
в.	Full Name of Individual (Last, First, Middle Initi FINNEY, JAMES, I, , III	ial) or Full O	Organization Name	Date	of R	eceipt					
	Mailing Address 2304 BUFFAPPLE CT			M 1		D D 17	/ Y	۲ 2018	Y Y 3		
	City	State	Zip Code			tion ID :					
	RICHMOND	VA	23233-2601	Amo	unt of	Each R	eceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	С				-y	-		25.00	)	
	Name of Employer (for Individual) SELF	Occi Insu	Memo Item								
	Receipt For:	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi GROOMS, JAMES, P, ,	ial) or Full O	Organization Name	Date	of R	eceipt					
	Mailing Address 660 OWNBY DR			M 1		/ D D 17	/ Y	2018			
	City GATLINBURG	State TN	Zip Code 37738-5767			tion ID : Each R					
	FEC ID number of contributing federal political committee.	С				y 1	. y		20.84	1	
	Name of Employer (for Individual) SELF	Occu Brok	upation (for Individual) ker		Mem	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 208.40	P/R D	educt	ion (\$10.	42 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		·····			y .	9		60.97	,	
Т	OTAL This Period (last page this line number c	only)	····· •	- E		-	-		-		

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т	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)							
••			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
	ny information copied from such Reports and Si for commercial purposes, other than using the										
$\left[ \right]$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee							
Α.	Full Name of Individual (Last, First, Middle Init FLEISHMAN, JANET, GAIL, ,	ial) or Full O	organization Name	Date of Receipt							
	Mailing Address 143 SOUNDVIEW CT			10 / Y Y Y Y 10 17 2018							
	City STAMFORD	State CT	Zip Code 06902-7111	Transaction ID : PR789955562518							
			00302 7111	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		25.00							
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
	SELF	Insu	Irance Agent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		250.00	P/R Deduction (\$12.50 Bi-Weekly)							
			Age Age Ate								
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	organization Name								
Β.	Duncan, Jeffrey, H., ,			Date of Receipt							
	Mailing Address 39 DEACON PL			10 / D D / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR789959362518							
	CRESSKILL	NJ	07626-1140	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		133.33							
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For:		Year-to-Date ▼	—							
	Primary General	, 199. oguto		P/R Deduction (\$133.33 Monthly)							
	Other (specify) <b>v</b>	L	, 333.33								
C.	Full Name of Individual (Last, First, Middle Init SKOOG, JOHN, CURTIS, ,	ial) or Full O	organization Name	Date of Receipt							
	Mailing Address 4945 PINE LN			10 / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Transaction ID : PR789968762518							
	EAGAN	MN	55123-4911	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		41.66							
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
	SELF		irance Agent								
	Receipt For:	Aggregate	Year-to-Date <b>V</b>								
	Primary General		395.81	P/R Deduction (\$20.83 Bi-Weekly)							
	Other (specify)		555.01								
s	UBTOTAL of Receipts This Page (optional)		•••••	199.99							
Т	<b>OTAL</b> This Period (last page this line number of	only)	••••••								

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	· ·	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS	)	for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 11							
Any information copied from suc	ch Reports and Statements ma per than using the name and a	y not be sold or used by any pe	13     14     15     16     17       erson for the purpose of soliciting contributions       to solicit contributions from such committee.							
NAME OF COMMITTEE (In										
		mpany Political Action	Committee							
Full Name of Individual (Last A. RUCKEL, John, Marvin,	t, First, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 524 INWOC			M M / D D / Y Y Y Y 10 17 2018							
City NACOGDOCHES	State TX	Zip Code 75965-1929	Transaction ID : PR789975562518 Amount of Each Receipt this Period							
FEC ID number of contributin federal political committee.	ng C		266.67							
Name of Employer (for Indivi	,	ipation (for Individual) rance Agent	Memo Item							
Receipt For: Primary Gene Other (specify) ▼		Year-to-Date ▼ 666.67	P/R Deduction (\$266.67 Monthly)							
Full Name of Individual (Last B. SCHNEIDER, JOHN,	t, First, Middle Initial) or Full O N, ,	rganization Name	Date of Receipt							
Mailing Address 211 ADDYS	TON PARC		10 / D / Y Y Y Y 10 17 2018							
City	State	Zip Code	Transaction ID : PR789975662518							
SAINT PETERS FEC ID number of contribution	ng MO	63376-2448	Amount of Each Receipt this Period							
federal political committee.	C		23.28							
Name of Employer (for Indiv SELF		upation (for Individual) rance Agent	Memo Item							
Receipt For: Primary Gene Other (specify) ▼		Year-to-Date ▼ , 203.42	P/R Deduction (\$11.64 Bi-Weekly)							
Full Name of Individual (Last C. AHRENS, JOHN, R,	t, First, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 8661 MILLC			10 / Y Y Y Y 10 17 2018							
City EAST AMHERST	State NY	Zip Code 14051-2085	Transaction ID : PR789976462518 Amount of Each Receipt this Period							
FEC ID number of contributin federal political committee.	ng C		20.84							
Name of Employer (for Indivi SELF	,	ipation (for Individual) rance Agent	Memo Item							
Receipt For: Primary Gene Other (specify)		Year-to-Date ▼ 208.40	P/R Deduction (\$10.42 Bi-Weekly)							
SUBTOTAL of Receipts This F	<sup>2</sup> age (optional)		310.79							
TOTAL This Period (last page	this line number only)									

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ידו			Use separate schedule(s)	(check only one)							
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 13		11b	11c		2	17	
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the	pur puri	pose of	soliciting	conti	ributio	ons	
$\setminus$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi DEGEN, JOHN, R, ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 1231 W 66TH ST			M M / D D / Y Y Y Y 10 17 2018							
	City KANSAS CITY	State MO	Zip Code 64113-1805				PR78997 eceipt th				
	FEC ID number of contributing federal political committee.	С							50.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		1emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Dec	ductio	on (\$25.	00 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initi WILSON, JOHN, WALTER, ,	al) or Full O	rganization Name	Date o	of Re	eceipt					
	Mailing Address 1321 VASSAR ST			M N 10	/	D D 17	/ Y	2018	Y Y B		
	City	State	Zip Code				PR78998				
	HOUSTON	TX	77006-6029	Amour	nt of	Each R	eceipt th	is Per	riod		
	FEC ID number of contributing federal political committee.	C			50.00						
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi EPPY, JOSEPH, F, ,	al) or Full O	rganization Name	Date o	of Re	eceipt					
	Mailing Address 333 LAS OLAS WAY APT 410	3		M 10	/	D D 17	/ Y	2018			
	City FORT LAUDERDALE	State FL	Zip Code 33301-2394				PR7899				
	FEC ID number of contributing federal political committee.	С				<b>y</b>	y	2	08.32	2	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		/lemc	) Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2083.37	P/R De	ducti	on (\$104	4.16 Bi-W	/eekly	)		
s	UBTOTAL of Receipts This Page (optional)		•			,	, ,	3	08.32	2	
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ITE	MIZED RECEIPTS		Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	<b>X</b> 11a 13	11b 14	11c 15	12		17	
	information copied from such Reports and Sta r commercial purposes, other than using the									
N N	AME OF COMMITTEE (In Full)									
) N	lassachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	iee					
	III Name of Individual (Last, First, Middle Initia //URRAY, JOSEPH, W, ,	Date of Receipt								
	Mailing Address 134 ROLLING HILL RD				10 / Y Y Y Y 10 17 2018					
Ci	ty LKINS PARK	State PA	Zip Code 19027-1825		saction ID : It of Each F					
	EC ID number of contributing deral political committee.	С					2	27.68		
SI	ame of Employer (for Individual) ELF		upation (for Individual) rance Agent		Memo Item					
	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 244.64	P/R Dec	P/R Deduction (\$13.84 Bi-Weekly)					
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Feitelberg, Karl, J., ,				of Receipt					
M	Mailing Address 175 DERBY ST UNIT 33				M M / D D / Y Y Y Y 10 17 2018					
Ci		State	Zip Code	Trans	Transaction ID : PR789989162518					
H	INGHAM	MA	02043-4017	Amoun	Amount of Each Receipt this Period					
	EC ID number of contributing deral political committee.	С		126.67						
	ame of Employer (for Individual) ELF		upation (for Individual) Irance Agent	Memo Item						
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 346.67	P/R Deduction (\$126.67 Monthly)						
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Degen, Kathleen, L., ,				of Receipt					
	Mailing Address 1231 W 66TH ST				10 / D D / Y Y Y Y 10 17 2018					
Ci _K	ty ANSAS CITY	State MO	Zip Code 64113-1805		Transaction ID : PR789989262518 Amount of Each Receipt this Period					
	EC ID number of contributing deral political committee.	S C C C C C C C C C C C C C C C C C C C				,	12	20.00		
S	ame of Employer (for Individual) ELF		upation (for Individual) rance Agent	Memo Item						
R	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 360.00			P/R Deduction (\$120.00 Monthly)					
SUE	BTOTAL of Receipts This Page (optional)		<b>&gt;</b>				27	4.35		
тот	AL This Period (last page this line number o	nly)	•			1.95		-		
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IT	EMIZED RECEIPTS		for ea	ach category of the led Summary Page	l `_	eck onl 11a 13	y one) 11 14		11c 15	12 16	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the					for the			liciting	contrib	outions	
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	mpan	y Political Action	Coi	nmitt	ee					
Α.	Full Name of Individual (Last, First, Middle Initi Tomczak, Lawrence, M., ,	al) or Full O	rganizati	on Name	Date of Receipt							
	Mailing Address 5938 SWAN CREEK DR	Otata	7:	0		10 / D D / Y Y Y Y 10 17 2018						
	City TOLEDO	State OH		Code 3614-1021	Transaction ID : PR7900017625 Amount of Each Receipt this Perio							
	FEC ID number of contributing federal political committee.	С									1.07	
	Name of Employer (for Individual) SELF		upation ( rance Ag	for Individual) gent		М	emo Ite	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-	Date ▼ 277.87	F	P/R Ded	uction (	(\$111.0	)7 Mon	thly)		
B.	Full Name of Individual (Last, First, Middle Initi Holden, Lawrence, Norbert, , III	al) or Full O	rganizati	on Name		Date of	Recei	pt				
	Mailing Address 601 ARBOR RD					10 / 17 / 2018 Transaction ID : PR790001862518						
	City WINSTON SALEM	State NC		Code 104-2331	-	Trans Amount						
	FEC ID number of contributing federal political committee.	С									3.33	
	Name of Employer (for Individual) SELF		Occupation (for Individual) Insurance Agent				Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-	Date ▼ 333,33	F	P/R Ded	uction (	\$133.3	3 Mont	hly)		
с.	Full Name of Individual (Last, First, Middle Initi BELINKIE, LOUIS, , ,	al) or Full O	rganizati	on Name		Date of	Recei	pt				
	Mailing Address 1711 CLOISTER DR					10 <sup>M</sup>	L	17		2018 Y		
	City RICHMOND	State VA		Code 238-3408	-	Trans Amoun				<b>96625</b>		
	FEC ID number of contributing federal political committee.	С					. ,		y		8.76	
	Name of Employer (for Individual) SELF		upation ( rance Ag	for Individual) jent		М	emo Ite	əm				
	Receipt For: Primary General Other (specify)	Aggregate	gate Year-to-Date ▼ 226.28				P/R Deduction (\$14.38 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			•••••					,	273	3.16	
Т	OTAL This Period (last page this line number o	nly)		••••••	<b>_</b>				-		40.	

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ΙТ	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)							
- •			Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17							
	y information copied from such Reports and Si for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee							
Α.	Full Name of Individual (Last, First, Middle Init WESTBROOK, LYNN, BRANTLY, , JR	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 6412 ONEIDA ST			M M / D D / Y Y Y Y 10 17 2018							
	City WICHITA	State KS	Zip Code 67206-1318	Transaction ID : PR790010462518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		30.00							
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 277.90	P/R Deduction (\$15.00 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Init MURRAY, LYNNE, HARMSTON, , Mailing Address 3470 MOORES SPRING RD	ial) or Full O	rganization Name	Date of Receipt							
		Otata	Zin Oode	10 17 2018							
	City WESTFIELD	State NC	Zip Code 27053-7354	Transaction ID : PR790011162518           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		20.84							
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.40	P/R Deduction (\$10.42 Bi-Weekly)							
c.	Full Name of Individual (Last, First, Middle Init RICHARDS, MARK, R, ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 22600 SW MIAMI DR			10 / Y Y Y Y 10 17 2018							
	City TUALATIN	State OR	Zip Code 97062-7363	Transaction ID : PR790016562518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		26.16							
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 246.49	P/R Deduction (\$13.08 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•	77.00							

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one)				
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements may name and ac	y not be sold or used by any p dress of any political committee	erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insu	rance Cor	mpany Political Action	Committee				
Α.	KERN, MATTHEW, L, ,							
	Mailing Address 1019 CHAMBERLEYNE WAY	01-1-	Zin Onda	10 17 2018				
	City WAXHAW	State NC	Zip Code 28173-7332	Transaction ID : PR790022662518           Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		30.00				
	Name of Employer (for Individual) SELF		pation (for Individual) rance Agent	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 292.90	P/R Deduction (\$15.00 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Init Brown, Michael, O., ,	ial) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 6512 NE 113TH ST			10 / D D / Y Y Y Y 2018				
	City EDMOND	State OK	Zip Code 73013-8351	Transaction ID : PR790030562518 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		186.67				
	Name of Employer (for Individual) SELF	Occu Brok	pation (for Individual) er	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 466.67	P/R Deduction (\$186.67 Monthly)				
с.	Full Name of Individual (Last, First, Middle Init PINE, MICHAEL, SCOTT, ,	ial) or Full Or	ganization Name	Date of Receipt				
	Mailing Address 11 STILL HOLLOW RD			10 / D D / Y Y Y Y 10 17 2018				
	City NEWBURGH	State NY	Zip Code 12550-8836	Transaction ID : PR790031862518           Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		41.68				
	Name of Employer (for Individual) SELF		pation (for Individual) ance Agent	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.67	P/R Deduction (\$20.84 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)			258.35				
Т	OTAL This Period (last page this line number of	only)						

FEC Schedule A (Form 3X) Rev. 06/2016

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only	one)							
			for each category of the Detailed Summary Page	<b>×</b> 11a 13	11b	11c 15	12 16	17			
	ny information copied from such Reports and S for commercial purposes, other than using the										
$\setminus$	NAME OF COMMITTEE (In Full)	-		•							
	Massachusetts Mutual Life Insu	irance Co	ompany Political Action	Committe	е						
Α.	Full Name of Individual (Last, First, Middle Ini STARR, MITCHELL, BRADLEY, ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 9800 SW 4TH ST			M M 10	/ D D 17	/ Y	ү ү 2018	Y			
	City PLANTATION	State FL	Zip Code 33324-2826	Transaction ID : PR790035462518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		208.32							
	Name of Employer (for Individual) SELF		upation (for Individual) ırance Agent	Mer	no Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2083.37	P/R Dedu	ction (\$104.1	6 Bi-We	ekly)				
В.	Full Name of Individual (Last, First, Middle Ini DOLAN, PATRICK, J, ,	tial) or Full O	rganization Name	Date of I	Receipt						
	Mailing Address 4310 PROMENADE BLVD			<sup>M</sup> M 10	y y 2018	Y					
	City FAIR LAWN	State NJ	Zip Code 07410-2780		Transaction ID : PR790043762518 Amount of Each Receipt this Period						
	FEC ID number of contributing	C	01410-2700	Amount (	or Each Rec	eipt this	Period 44.7	12			
	federal political committee.	0									
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Other (specify)		411.80	P/R Deduction (\$22.06 Bi-Weekly)							
— c.	Full Name of Individual (Last, First, Middle Ini DECOURSEY, PAUL, A, ,	tial) or Full O	rganization Name	Date of I	Receipt						
	Mailing Address 1467 MORNINGCREST CT			10 <sup>M</sup>	/ D D 17		2018	Ŷ			
	City	State IN	Zip Code		ction ID : PF						
	INDIANAPOLIS	IN	46280-2862	Amount	of Each Rec	eipt this	Period				
	FEC ID number of contributing federal political committee.	С			,	y	125.0	00			
	Name of Employer (for Individual) SELF	Occi Brok	upation (for Individual) ker	Mei	no Item						
	Receipt For:	Aggregate	Year-to-Date <b>V</b>								
	Other (specify)		1250.00	P/R Deduction (\$62.50 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		<b>&gt;</b>		y		377.4	14			

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ıт.			Use separate schedule(s)	(check on	nly or	ne)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13		11b	11c 15		2 6	17	
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	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initia HERZOG, PAUL, H, ,	al) or Full O	Organization Name	Date of Receipt							
	Mailing Address 900 HIGHLAND CT			10	И /	D D 17	/ Y	ү 201	8		
	City GERMANTOWN HILLS	State IL	Zip Code 61548-9056	Transaction ID : PR790046262518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				-	<u>-</u>		61.76	6	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		/lemo	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 467.63	P/R De	ducti	on (\$30.8	38 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initia JOANOU, PAUL, M, ,	al) or Full O	Organization Name	Date o	of Re	eceipt					
	Mailing Address 59 BRIARWOOD DR			10 / D D / Y Y Y Y Y 10 17 2018							
	City	State	Zip Code	Tran	sact	ion ID : F	PR79004	7062	518		
	WHEELING	WV	26003-4835	Amount of Each Receip					riod		
	FEC ID number of contributing federal political committee.	С				-	-9-		25.00	)	
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent		/lemo	ttem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 250.00	P/R Dec	ducti	on (\$12.5	50 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initia LEWIS, Peter, M., ,	al) or Full O	Organization Name	Date o	of Re	eceipt					
	Mailing Address 230 LITTLE ROUND TOP			M 10	И /	D D 17	/ Y	2018			
	City BULVERDE	State TX	Zip Code 78163-3400			ion ID : I Each Re					
	FEC ID number of contributing federal political committee.	С							13.33	3	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		/lemo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 213.33	P/R De	ducti	on (\$13.:	33 Monti	hly)			
s	UBTOTAL of Receipts This Page (optional)		•			,	,	1	00.09	)	
Т	OTAL This Period (last page this line number o	nly)				-			-		

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IT.			Use separate schedule(s)	(check on	ly or	ne)	L				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13		11b	11c		2 6	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any per ddress of any political committee	rson for the	pur puri	pose of	soliciting	g cont	ributio	ons	
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insur	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi SPRAGUE, PHILIP, J, ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 1308 SUNSET RDG			10 / 17 / Y Y Y Y 10 17 2018							
	City WATERTOWN	State NY	Zip Code 13601-4438	Transaction ID : PR790054762518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С							25.00	0	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		lemc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R De	ductio	on (\$12.	50 Bi-We	eekly)			
В.	Full Name of Individual (Last, First, Middle Initi ZANARINI, RAYMOND, HENRY, ,	ial) or Full O	rganization Name	Date o	of Re	eceipt					
	Mailing Address 1920 W SOUTHMEADOW LN			10		D D 17	/ Y	201	8	ſ	
	City	State	Zip Code	Tran	sacti	ion ID : I	PR79005	56162	518		
	LAKE FOREST	IL 60045-4830 Amount of I						is Pe	riod		
	FEC ID number of contributing federal political committee.	С			17						
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 213.31	P/R Deduction (\$17.34 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi CUSHING, Robert, Rand, ,	ial) or Full O	rganization Name	Date o	of Re	eceipt					
	Mailing Address 696 COMMERCIAL ST			M 10	/	D D 17	/ Y	ý 201		Ŷ	
	City WEYMOUTH	State MA	Zip Code 02189-1037			ion ID : Each Re					
	FEC ID number of contributing federal political committee.	С				<b>,</b> .	- y	1	16.67	7	
	Name of Employer (for Individual) SELF	Occu Brok	upation (for Individual) xer		/lemc	) Item					
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 316.67 P/R Deduction (\$116.6					thly)			
s	UBTOTAL of Receipts This Page (optional)		▶			, .		1	59.01	1	
т	OTAL This Period (last page this line number of	only)	•						-		

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177			Use separate schedule(s)	(check on	ly on	ie)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a		11b	11c		12 16	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe address of any political committee	rson for the	purp pontrib	oose of	soliciting	cont	tributio	ons	
$\square$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insul	rance Co	ompany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi Lang, Raleigh, H., ,	al) or Full O	organization Name	Date of Receipt							
	Mailing Address 6727 RAINBOW AVE			M 10	/	D D 17	/ Y	y 201	18	Ŷ	
	City MISSION HILLS	State KS	Zip Code 66208-2265	Transaction ID : PR790056962518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				7		1	120.00	0	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		1emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R De	ductio	on (\$120	).00 Mon	thly)			
в.	Full Name of Individual (Last, First, Middle Initi Welsh, Raymond, E., ,	al) or Full O	Organization Name	Date o	of Re	ceipt					
	Mailing Address 913 17TH RD			M 10	/	D D 17	/ Y	y 201	8	Ý	
	City	State	Zip Code				PR79006				
	PENDER	NE	68047-5001	Amour	nt of	Each Re	is Pe	riod			
	FEC ID number of contributing federal political committee.	С							33.33	3	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	P/R Deduction (\$33.33 Monthly)							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 233.33								
с.	Full Name of Individual (Last, First, Middle Initi KARCHEFSKY, RICHARD, IRVIN		Organization Name	Date o	of Re	ceipt					
	Mailing Address 7502 CARMELA WAY			M 10	/	D D 17	/ Y	201	8 8	Y	
	City DELRAY BEACH	State FL	Zip Code 33446-5668				PR7900 eceipt th				
	FEC ID number of contributing federal political committee.	С				y	y	_	41.68	8	
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		/lemo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.67	P/R De	ductio	on (\$20.8	84 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•			9	9	1	195.01	1	
т	OTAL This Period (last page this line number of	only)	••••••			<b>.</b> .			-		

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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•••			Detailed Summary Page		<b>X</b> 1'			11b	11c		12		
Ar	y information copied from such Reports and S	Statements m	av not be sold or used by any n	ersor	1: 1 for			14 rpose of	15 f soliciting		16 Intribut		7
	for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insu	irance Co	ompany Political Action	Co	omn	nitt	ee	;					
<u>к</u>	Full Name of Individual (Last, First, Middle In VANBENSCHOTEN, RICHARD, PIERC	itial) or Full C E, , JR	Organization Name		Dat	e of	f Re	eceipt					
	Mailing Address 875 5TH AVE APT 3A					10 <sup>™</sup>		D 17		2	2018		
	City NEW YORK	State NY	Zip Code 10065-4952	_					Receipt th				
	FEC ID number of contributing federal political committee.	С										30	]
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent			Μ	em	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.43	9/R Deduction (\$41.65 E									
в.	Full Name of Individual (Last, First, Middle In HOMER, ROBERT, L, , III	itial) or Full C	Organization Name		Dat	e of	f Re	eceipt					
	Mailing Address 10751 WILSHIRE AVE NE			10 / D D D D D D D D D D D D D D D D D D							018	Y	
	City ALBUQUERQUE	State NM	Zip Code 87122-3138	_					PR7900 Receipt th				
	FEC ID number of contributing federal political committee.	С						-			50.0	00	]
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent		Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle In SMITH, Robert, M., ,	itial) or Full C	Organization Name		Dat	e of	f Re	eceipt					
	Mailing Address 1487 S CREST DR					10 <sup>™</sup>	1	17			018	Y	
	City LOS ANGELES	State CA	Zip Code 90035-3339						: PR7900				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this P							133.3	33	]
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 333.33	P/R Deduction (\$13						nthly	()		
s	UBTOTAL of Receipts This Page (optional)			•				, .			266.6	33	j
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			for each category of the Detailed Summary Page	¥ 11a 13	11b	11c	12	17		
Any infor or for cor	mation copied from such Reports and Sta mmercial purposes, other than using the r	tements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the	purpose of	soliciting	contribu	utions		
	OF COMMITTEE (In Full)									
	ssachusetts Mutual Life Insura	ance Co	mpany Political Action	Commit	tee					
	ame of Individual (Last, First, Middle Initia s, Timothy, Timothy, ,	l) or Full O	rganization Name	Date of Receipt						
	g Address 3428 HAMPTON AVE			10	/ D 17	) / Y	y y 2018	Y		
City NASH	IVILLE	State TN	Zip Code 37215-1408	Transaction ID : PR790086662518 Amount of Each Receipt this Period						
	D number of contributing I political committee.	С			1 45 1		555	.57		
SELF	of Employer (for Individual)		upation (for Individual) eral Agent	N	lemo Item					
	ot For: Primary General Other (specify) <b>v</b>	Aggregate	Year-to-Date ▼ 1388.87	P/R Dec	duction (\$55	5.57 Mon	thly)			
	ame of Individual (Last, First, Middle Initia /ELL, RODNEY, E, ,	l) or Full O	rganization Name	Date o	of Receipt					
	g Address 5420 DECATUR ST	-1		10	/ D 17		y y 2018	Y		
City		State	Zip Code	Trans	saction ID :	PR79009	0962518	3		
OMA	HA	NE	68104-4931	Amoun	nt of Each F	Receipt th	is Period	k		
	D number of contributing I political committee.	С				26	.50			
Name SELF	of Employer (for Individual)		upation (for Individual) Irance Agent	P/R Deduction (\$13.25 Bi-Weekly)						
	ot For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 247.18							
	ame of Individual (Last, First, Middle Initia IE, Ronnie, E., ,	ll) or Full O	rganization Name	Date o	of Receipt					
Mailing	g Address 7740 SWEETWIND CIR			M 10	/ D 17		2018 Y	Y		
City FAIR	OAKS RANCH	State TX	Zip Code 78015-4569		saction ID : It of Each F					
	D number of contributing I political committee.	С				. ,	88	.87		
SELF	of Employer (for Individual)	Occu Brok	upation (for Individual) er	N	lemo Item					
	ot For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 222.27	P/R Dec	duction (\$88	.87 Montl	ıly)			
SUBTO	TAL of Receipts This Page (optional)		•			,	670	.94		
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17			Use separate schedule(s)	(check or	nly oi	ne)	L				
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Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the	e pur ontrib	pose of	soliciting	contr	ributio	ons	
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 9 TRIUMPH CT			10	المتشتعا لمعما لمتشا						
	City FLANDERS	State NJ	Zip Code 07836-4404	Transaction ID : PR790102962518           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С						2	22.20	)	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Memo	ttem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 555.60	P/R De	ducti	on (\$222	2.20 Mon	thly)			
В.	Full Name of Individual (Last, First, Middle Initi RIDER, SCOTT, P, ,	ial) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 23 RIVER PL			M 10		D D 17	/ Y	2018	ү ү З		
	City	State	Zip Code				PR79010				
	BEAUFORT	SC	29906-9189	Amou	nt of	Each R	eceipt th	is Per	iod		
	FEC ID number of contributing federal political committee.	С		I Ē.	_	-	-		25.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	P/R Deduction (\$12.50 Bi-Weekly)							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00								
с.	Full Name of Individual (Last, First, Middle Initi ESTLER, STEPHEN, DAVID, ,	ial) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 2177 NE 63RD ST			M 10		D D 17	/ Y	2018			
	City FT LAUDERDALE	State FL	Zip Code 33308-1330				PR7901 eceipt th				
	FEC ID number of contributing federal political committee.	С				, .	y	1	66.68	3	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	_ <b>_</b> _	Memo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1666.66	P/R De	educti	on (\$83.	34 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•			, .	,	4 <sup>.</sup>	13.88	3	
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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11b 14	11c 15	12 16	17				
	ny information copied from such Reports and S for commercial purposes, other than using the					soliciting		utions				
$\square$	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committe	ee							
Α.	Full Name of Individual (Last, First, Middle Init CONKLIN, THOMAS, DEAN, ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 7391 E 111TH PL S			M M 10								
	City BIXBY	State OK	Zip Code 74008-2138		action ID : t of Each R							
	FEC ID number of contributing federal political committee.	С					25.	.00				
	Name of Employer (for Individual) SELF		ipation (for Individual) rance Agent		emo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Ded	uction (\$12.	.50 Bi-We	eekly)					
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name	_								
в.	Deleot, Thomas, L., , Mailing Address 120 SULLIVAN WAY			Date of Recei								
	City	State	Zip Code	Trans	action ID :	PR7901;	24862518	3				
	WINSTON SALEM	NC	27104-4925	Amount	of Each R	leceipt th	nis Period	ł				
	FEC ID number of contributing federal political committee.	С		88.87								
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 222,27	P/R Deduction (\$88.87 Monthly)								
с.	Full Name of Individual (Last, First, Middle Init NAYLOR, THOMAS, W, ,	ial) or Full O	rganization Name	Date of	Receipt							
	Mailing Address 11304 SPRING MEADOW LN			10 <sup>M</sup>	/ D D 17		2018	Ŷ				
	City SAN DIEGO	State CA	Zip Code 92128-6332		action ID :							
	FEC ID number of contributing federal political committee.	С					32.					
	Name of Employer (for Individual)		ipation (for Individual) rance Agent	M	emo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 204.15	P/R Deduction (\$16.30 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)					,	146.	47				
т	OTAL This Period (last page this line number of	only)	•••••									

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ITEMIZED RECEIPTS					(check only one)					
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Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any per address of any political committee	rson for the	e pur ontrik	pose of	soliciting	g cont	tributio	ons
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Init MCDONALD, TODD, J, ,	ial) or Full O	Organization Name	Date of	of Re	eceipt				
	Mailing Address 11 EAGLE RIDGE DR			10 / Y Y Y Y 10 17 2018						ſ
	City TROY	State NY	Zip Code 12180-7167			ion ID : I Each Re				
	FEC ID number of contributing federal political committee.	С							125.00	)
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		Memo	o Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00	P/R De	ducti	on (\$62.9	50 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Initi IANNELLI, VICTOR, , ,	ial) or Full O	Organization Name	Date of	of Re	eceipt				
	Mailing Address 134 EDWARDS RD			10		D D 17	/ Y	y 201	8	
	City	State	Zip Code			ion ID : I				
	FREEHOLD	NJ	07728-1313	Amou	nt of	Each Re	eceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	C						2	238.10	0
	Name of Employer (for Individual) SELF	Occi Inst	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 773.83	P/R Deduction (\$119.05 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initi MCPHERSON, WILLIAM, GORDO		Organization Name	Date of	of Re	eceipt				
	Mailing Address 1276 PARNELL AVE NE			10		D D 17	/ Y	201	8	ſ
	City LOWELL	State MI	Zip Code 49331-9768			ion ID : Each Re				
	FEC ID number of contributing federal political committee.	С				J	J		25.00	D
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent		Memo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	P/R De	ducti	on (\$12.	50 Bi-We	eekly)	I.		
s	UBTOTAL of Receipts This Page (optional)			<u> </u>		,		3	388.10	)
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			for each category of the Detailed Summary Page	¥ 11a 13		11b	11c 15	12	Г	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for the	e pur ontrib	pose of a putions fr	soliciting	contr	ibutic	ns
$\left[ \right]$	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Initia KING, WILLIAM, B, ,	al) or Full O	Date of Receipt							
	Mailing Address 40 CALYPSO RD			10	VI /	D D 17	/ Y	2018	Y Y 8	]
	City MONETA	State VA	Zip Code 24121-5391			ion ID : I Each Re				
	FEC ID number of contributing federal political committee.	С					- 45-		25.00	)
	Name of Employer (for Individual) SELF	Occi Brol	upation (for Individual) ker		/lemo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R De	ducti	on (\$12.5	50 Bi-We	ekly)		
В.	Full Name of Individual (Last, First, Middle Initia MARTIN, WILLIAM, H, ,	al) or Full O	Organization Name	Date of	of Re	eceipt				
	Mailing Address 265 BRUSH VALLEY RD		10	И /	D D 17	/ Y	2018	Y Y 3	1	
	City	State	Zip Code	Tran	sacti	ion ID : F	PR79014	45625	518	
	BOALSBURG	PA	16827-1028	Amour	nt of	Each Re	eceipt th	is Per	iod	
	FEC ID number of contributing federal political committee.	С							25.00	)
	Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent			Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia BLAIS, Alan, L, MR.,	al) or Full O	Organization Name	Date o	of Re	eceipt				
	Mailing Address 20 Shady Dell Ln			10		D D 17	L	2018	3	
	City Somers	State CT	Zip Code 06071-2136			ion ID : I				
	FEC ID number of contributing federal political committee.	С				Each Re	, see of the		26.92	
	Name of Employer (for Individual) Barings LLC	Occu Dire	upation (for Individual) ctor		Memo Item					
	Receipt For: Primary General Other (specify)	eneral Aggregate Year-to-Date ▼ 565.32					92 Bi-We	eekly)		
F	UBTOTAL of Receipts This Page (optional)			[.		, .	5		76.92	
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An or	y information copied from such Reports and St. for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for the	purpose	e of sol	liciting of	contribut	tions	
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Initi Kingan, Albert, R, MR.,	al) or Full O	Organization Name	Date o	f Receip	ot				
	Mailing Address 3325 W Desert Vista Trl			10 17 Y Y Y Y 2018						
	City Phoenix	State AZ	Zip Code 85083-5875		saction It of Ead					
	FEC ID number of contributing federal political committee.	С						9.0	62	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) P Advanced Markets		lemo Ite	m				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 202.02	P/R Dec	duction (	\$9.62 B	i-Week	ly)		
В.	Full Name of Individual (Last, First, Middle Initi Frogameni, Anthony, D, MR.,	al) or Full O	Organization Name	Date o	f Receip	ot				
	Mailing Address 31 Coventry Ln			10		D 17	/ Y	y y 2018	Y	
	City	State	Zip Code		saction					
	Agawam	MA	01001-3570	Amoun	t of Ead	ch Rece	eipt this	Period		
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) AVP Investment Operations			14.71					
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co				Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 308.91	P/R Deduction (\$14.71 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initi Scibelli, Antonio, , MR.,	al) or Full O	Organization Name	Date o	of Receip	ot				
	Mailing Address 51 Mountain View St			10 <sup>M</sup>		D 17		y y 2018	Y	
	City South Hadley	State MA	Zip Code 01075-2133		saction					
	FEC ID number of contributing federal political committee.	С			. ,		y .	9.	62	
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) 2 & Counsel		lemo Ite	em				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02	P/R Dec	duction (	\$9.62 B	3i-Week	ly)		
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11			for each category Detailed Summar		×	11a 13		11b 14	11c 15		12 16	17
Ar or	y information copied from such Reports and St. for commercial purposes, other than using the	atements ma name and a	ay not be sold or use address of any politic	ed by any per al committee	rson fo to soli	or the	pur ntrib	pose of outions fi	soliciting	g cont	tributio	ons
$\left[ \right]$	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insur	ance Co	mpany Politic	al Action	Com	mitt	ee					
Α.	Full Name of Individual (Last, First, Middle Initi KULIG, Alan, , MR.,	al) or Full O	rganization Name		D	ate of	f Re	eceipt				
	Mailing Address 3 Wildwood Ln					10 / Y Y Y Y 10 17 2018						
	City Wilbraham	State MA	Zip Code 01095-2660						PR7901 eceipt th			
	FEC ID number of contributing federal political committee.	С	С								15.38	3
	Name of Employer (for Individual) Barings LLC		upation (for Individua naging Director	al)		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼					on (\$15.	38 Bi-W	eekly)		
B	Full Name of Individual (Last, First, Middle Initi Dickey, Andrew, C, MR.,	al) or Full O	rganization Name			ate of	f Re	ceint				
Mailing Address 2934 E Crestview St						M M 10	/	D D D 17	/ Y	201	8	
	City	State	Zip Code			Trans	acti	on ID :	PR7901	59362	518	
	Springfield	MO	65804-3420		A	moun	t of	Each R	eceipt th	nis Pe	eriod	
	FEC ID number of contributing federal political committee.	C			76.95						5	
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individua naging Director - Stra	,	÷	М	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	gregate Year-to-Date ▼ 1539.00				P/R Deduction (\$76.95 Bi-Weekly)					
с.	Full Name of Individual (Last, First, Middle Initi Prast, Brian, J, MR.,	al) or Full O	rganization Name		D	ate of	f Re	eceipt				
	Mailing Address 47 Ellington St	-				10 <sup>M</sup>		D D 17	JL	201	8	
	City Longmeadow	State MA	Zip Code 01106-1429					-	PR7901 eceipt th			
	FEC ID number of contributing federal political committee.	С				_		,	,		15.38	3
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individua ond VP & Actuary	al)		М	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 322.98					lucti	on (\$15.	38 Bi-W	eekly)	)	
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ITEMIZED RECEIPTS	for each cate Detailed Sum	egory of the
		or used by any person for the purpose of soliciting contributions political committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Ir	surance Company Poli	litical Action Committee
Full Name of Individual (Last, First, Middle         A.       Frisbie, Bruce, C, MR.,         Mailing Address 54 Massasoit Ave         City         W Springfield         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Massachusetts Mutual Life Insurance Co         Receipt For:         Primary       General         Other (specify) ▼	A Initial) or Full Organization Nam State Zip Code MA 01089-112 C Occupation (for Indiv AVP Finance Aggregate Year-to-Date ▼	Date of Receipt       10     17       2018       Transaction ID : PR790168362518       22       Amount of Each Receipt this Period       9.62
Full Name of Individual (Last, First, Middle B. Demas, Carol, W, MS., Mailing Address 52 Cedar Woods GIn	Date of Receipt	
City W Springfield	State Zip Code MA 01089-163	Transaction ID : PR790171362518           37         Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Occupation (for Indiv	9.61
Massachusetts Mutual Life Insurance Co Receipt For: Primary General Other (specify) ▼	Vice President - Field Aggregate Year-to-Date ▼	P/R Deduction (\$9.61 Bi-Weekly)
C. Full Name of Individual (Last, First, Middle Dube, Carol, A, MS., Mailing Address 80 Chilson Rd	e Initial) or Full Organization Nam	Date of Receipt
City Wilbraham	State Zip Code MA 01095-120	10         17         2018           Transaction ID : PR790171662518           04         Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.38
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Indiv Vice President - Acco	,
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	P/R Deduction (\$15.38 Bi-Weekly)
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ITEMIZED RECEIPTS					(check only one)						
11			for each category of the Detailed Summary Page	★ 11a 13		11b	11c		2	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for the	e pur	pose of	soliciting	cont	ributio	ons	
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Init KINNON, Christopher, K, MR.,	ial) or Full O	rganization Name	Date of	of Re	eceipt					
	Mailing Address 2415 Manhattan Ave			10	المتنا لعدا ليتنا						
	City Hermosa Beach	State CA	Zip Code 90254-2542				PR79018 eceipt th				
	FEC ID number of contributing federal political committee.	С							15.38	3	
	Name of Employer (for Individual) Barings LLC		ipation (for Individual) aging Director		/lemc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.98	P/R De	ducti	on (\$15.:	38 Bi-We	eekly)			
В.	Full Name of Individual (Last, First, Middle Initi Noreen, Clifford, M, MR.,	ial) or Full O	rganization Name	Date of	of Re	eceipt					
	Mailing Address 95 Bent Tree Dr			10		D D 17	/ Y	201	ү ү 8		
	City	State	Zip Code	Tran	sacti	ion ID : I	PR79018	34162	518	_	
	E Longmeadow	MA	01028-1365	Amour	nt of	Each R	eceipt th	is Pe	riod		
	FEC ID number of contributing federal political committee.	С				-	-		96.16	6	
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) aging Director - Strategic Investm		/lemc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 2019.36	P/R Deduction (\$96.16 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi Waddington, Craig, , MR.,	ial) or Full O	rganization Name	Date o	of Re	eceipt					
	Mailing Address 14 Spring Meadow Dr			M 10	VI /	D D 17	/ Y	201			
	City Granby	State CT	Zip Code 06035-1327			-	PR7901				
	FEC ID number of contributing federal political committee.	С				, .			38.46	6	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		ipation (for Individual) President & Actuary		/lemo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.66	P/R De	ducti	on (\$38.	46 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•		ï	, .	,	1	50.00	)	
Т	OTAL This Period (last page this line number of	only)	•			-			-		

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma	y not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
Aassachusetts Mutual Life	Insurance Co	mpany Political Action	Committee					
Full Name of Individual (Last, First, Mic A. Echeverria, David, J, MR.,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 36 Farmington Ave			10 / Y Y Y Y 10 17 2018					
City Longmeadow	State MA	Zip Code 01106-1433	Transaction ID : PR790188662518 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		26.92					
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) aging Dir - Investments	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)					
Full Name of Individual (Last, First, Mid B. WHARMBY, David, D, MR.,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 34 Verplank Ave			10 17 / Y Y Y Y 10 17					
City	State	Zip Code	Transaction ID : PR790192662518					
Stamford	СТ	06902-8216	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		38.46					
Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.66	P/R Deduction (\$38.46 Bi-Weekly)					
Full Name of Individual (Last, First, Mid C. Darley, Derek, D, MR.,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 27 North St			10 17 Y Y Y Y 10 17					
City	State	Zip Code	Transaction ID : PR790197162518					
Blandford	MA	01008-9516	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		9.61					
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		ıpation (for Individual) Treasury	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 201.81	P/R Deduction (\$9.61 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optic	nal)		74.99					
TOTAL This Period (last page this line n	umber only)							

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	-	Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a         11b         11c         12           13         14         15         16         11				
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements ma ng the name and a	ay not be sold or used by any p ddress of any political committed	erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
Aassachusetts Mutual Life	Insurance Co	mpany Political Action	Committee				
Full Name of Individual (Last, First, Mide A. Pellerin, Diane, , MS.,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 13 Pittroff Ave			10 / Y Y Y Y 2018				
City South Hadley	State MA	Zip Code 01075-2203	Transaction ID : PR790198562518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		23.10				
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) P-Reg Advisory Services	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.30	P/R Deduction (\$23.10 Bi-Weekly)				
Full Name of Individual (Last, First, Midd B. PHELAN, Donald, J, MR.,							
Mailing Address 24 Hammersmith			10 / Y Y Y Y 10 17 2018				
City	State	Zip Code	Transaction ID : PR790207862518				
Avon	СТ	06001-2915	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	ů – L						
Name of Employer (for Individual) Barings LLC							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)				
Full Name of Individual (Last, First, Mido C. Rawson, Ellen, , MS.,	lle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 145 Yokun Rd			10 / Y Y Y Y Y 10 17 2018				
City Pittsfield	State MA	Zip Code 01201-8880	Transaction ID : PR790212262518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		9.61				
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) President & Senior Counsel	Memo Item				
Receipt For: Primary General Other (specify)							
SUBTOTAL of Receipts This Page (option	al)		59.63				
TOTAL This Period (last page this line nur	mber only)						

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)	(check only one)						
			for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         □	17						
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements managements managements and a	l ay not be sold or used by any address of any political committe	person for the purpose of soliciting contribution	is						
$\square$	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	n Committee							
Α.	Full Name of Individual (Last, First, Middle Initi Garvey, Gail, S, MS.,	al) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 23 Crescent Cir			10 / Y Y Y Y Y 10 17 2018							
	City Westfield		Zip Code 01085-5003	Transaction ID : PR790220062518           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.				9.62							
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		cupation (for Individual) P Compliance	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Initi Hoffman, Harvey, , MR.,	al) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 50 Devonshire Ter			10 / Y Y Y Y 2018							
	City	State	Zip Code	Transaction ID : PR790231462518							
	E Longmeadow	MA	01028-3139	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		151.71							
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		cupation (for Individual) 'P - Operational and Strategic Ris	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ , 2741.51	P/R Deduction (\$151.71 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi Coelho, Jeffrey, A, MR.,	al) or Full C	Drganization Name	Date of Receipt							
	Mailing Address 118 Oakridge St			10 / Y Y Y Y 10 17 2018							
	City Ludlow	State MA	Zip Code 01056-3521	Transaction ID : PR790240962518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		9.62							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		cupation (for Individual) P Systems	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)							
⊢	UBTOTAL of Receipts This Page (optional)			▶ 170.95	7						
11	OTAL This Period (last page this line number o	niiy)									

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X       11a       11b       11c       12         13       14       15       16       17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	ance Co	ompany Political Action	Committee
A.	Full Name of Individual (Last, First, Middle Initia         Deitelbaum, John, E, MR.,         Mailing Address 3 Monticello Cir         City         Ellington         FEC ID number of contributing         federal political committee.         Name of Employer (for Individual)         MASSACHUSETTS MUTUAL LIFE INS.         Receipt For:         Primary       General         Other (specify)	State CT C Occ SVF	Zip Code 06029-8300 upation (for Individual) 2 & Deputy Gen Couns USIG Law Year-to-Date ▼ 2827.02	Date of Receipt
В.	Full Name of Individual (Last, First, Middle Initia Calabrese, Joseph, A, MR., Mailing Address 28 Canterbury Ln	Date of Receipt		
	City Feeding Hills	State MA	Zip Code 01030-1718	Transaction ID : PR790253262518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer (for Individual)	C	upation (for Individual)	26.92 Memo Item
	Massachusetts Mutual Life Insurance Co Receipt For: Primary General Other (specify) ▼	1	P Systems Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)
c.	Full Name of Individual (Last, First, Middle Initia Puhala, James, P, MR., III Mailing Address 68 Holcomb St	l) or Full C	rganization Name	Date of Receipt
	City East Granby	State CT	Zip Code 06026-9531	10     17     2018       Transaction ID : PR790260462518       Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) President - Compliance & Regulate	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	188.46
Т	OTAL This Period (last page this line number or	1y)	•	

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17						
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee						
Α.		ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 26 Evergreen Dr			10 / Y Y Y Y 10 17 2018						
	City E Longmeadow	State MA	Zip Code 01028-1456	Transaction ID : PR790260562518           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		15.38						
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		pation (for Individual) President & Senior Counsel	Memo Item						
	Receipt For: Primary General Other (specify) $\forall$	Aggregate	Year-to-Date ▼ 322.98	P/R Deduction (\$15.38 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Init GURSKI, Jeffrey, M, MR.,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 10 Victoria Ln			10 17 Y Y Y Y 2018						
	City	State	Zip Code	Transaction ID : PR790261262518						
	Wilbraham	MA	01095-1905	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		4.71						
	Name of Employer (for Individual) Barings LLC		upation (for Individual) aging Director	Memo Item						
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ , 204.71	P/R Deduction (\$4.71 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init Coughlin, Kathleen, M, MS.,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 37 Southwood Rd			10 / Y Y Y Y 10 17 2018						
	City Newington	State CT	Zip Code 06111-3156	Transaction ID : PR790271462518						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		ipation (for Individual) New Business Underwriting	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)						
F	UBTOTAL of Receipts This Page (optional)			29.71						

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\mathbf{X}$ 11a     11b     11c     12       13     14     15     16     17			
	ny information copied from such Reports and S for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee			
Α.	Full Name of Individual (Last, First, Middle Init REEVE, Kathy, S, MS., Mailing Address Edgemere Hills Bldg 14 <u>85 N MAIN ST UNIT 14A</u> City	ial) or Full O	Zip Code	Date of Receipt 10 / 17 / 2018 Transaction ID : PR790272762518			
	East Hampton	СТ	06424-1448	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.			19.23			
	Name of Employer (for Individual) Barings LLC	Occu Dire	ipation (for Individual) ctor	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 403.83	P/R Deduction (\$19.23 Bi-Weekly)			
в.	Full Name of Individual (Last, First, Middle Init Perlotto, Laura, J, MS.,	ial) or Full O	rganization Name	Date of Receipt			
	Mailing Address 17 Claire Lane			10 / D D / Y Y Y Y 10 17 2018			
	City Bloomfield	State CT	Zip Code 06002-1181	Transaction ID : PR790280562518 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		9.61			
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) Compliance	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 201.81	P/R Deduction (\$9.61 Bi-Weekly)			
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Flynn, Linda, M, MS.,	ial) or Full O	rganization Name	Date of Receipt			
	Mailing Address 26 Bayne St			10 / Y Y Y Y 10 17 2018			
	City E Longmeadow	State MA	Zip Code 01028-2214	Transaction ID : PR790283862518 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		9.62			
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		ipation (for Individual) Business Operations	Memo Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)			
⊢	UBTOTAL of Receipts This Page (optional)			38.46			
11	<b>OTAL</b> This Period (last page this line number of	only)	••••••				

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IT.			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a 13	11b 11c 14 15	12 16	17			
Ar or	y information copied from such Reports and SI for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p address of any political committee	erson for the purp to solicit contrib	pose of solicitin	g contribut h committ	tions			
	NAME OF COMMITTEE (In Full)									
$\left \right\rangle$	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Init Langlois, Louise, R, MS.,	ial) or Full O	Organization Name	Date of Re	Date of Receipt					
	Mailing Address 21 Upland Rd			10 17 Y Y Y Y Y						
	City Holyoke	State MA	Zip Code 01040-1422		ion ID : PR7902 Each Receipt th					
	FEC ID number of contributing federal political committee.	С				9.6	61			
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) P Quantitative	Memo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 201.81	P/R Deductio	on (\$9.61 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Init ACKERMAN, Mark, , MR.,	ial) or Full O	Organization Name	Date of Re	eceipt					
	Mailing Address 50 Barber Hill Rd			10 / Y Y Y Y Y 10 17 2018						
	City	State	Zip Code	Transacti	on ID : PR7902	96062518	_			
	Broad Brook	СТ	06016-9716	Amount of	Each Receipt th	nis Period				
	FEC ID number of contributing federal political committee.	С		26.95						
	Name of Employer (for Individual) Barings LLC		cupation (for Individual) naging Director	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 565.95	P/R Deduction (\$26.95 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init NATCHARIAN, Matthew, P, MR.,	ial) or Full O	Organization Name	Date of Re	eceipt					
	Mailing Address 3 Ridgebury Rd			10 <sup>M</sup> /	D D / Y 17	2018	Y			
	City Avon	State CT	Zip Code 06001-3825		ion ID : PR7903 Each Receipt tl					
	FEC ID number of contributing federal political committee.	С			, , , ,	134.6	62			
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Memo	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2827.02	P/R Deduction	on (\$134.62 Bi-\	Veekly)				
s	UBTOTAL of Receipts This Page (optional)				, ,	171.1	18			
Т	OTAL This Period (last page this line number of	only)			<del></del>					

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IT.			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13		11b	11c 15		ſ	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma	ay not be sold or used by any per ddress of any political committee	son for the	purpo	ose of s	soliciting	contr	ibutio	ons
	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Mutual Life Insur	ance Co	mpany Political Action (	Committ	tee					
Α.	Full Name of Individual (Last, First, Middle Initi GATELY, Michael, H, MR.,	al) or Full O	rganization Name	Date o	Date of Receipt					
	Mailing Address 134 Fairview Ter			10 17 2018						
	City S Glastonbury	State CT	Zip Code 06073-3304				PR79030 eceipt th			
	FEC ID number of contributing federal political committee.	С			,	p			38.46	3
	Name of Employer (for Individual) Barings LLC		upation (for Individual) laging Director	M	lemo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.66	P/R Dec	ductior	n (\$38.4	l6 Bi-We	ekly)		
В.	Full Name of Individual (Last, First, Middle Initi Dubois, Michael, E, MR.,	al) or Full O	rganization Name	Date o	of Rec	eipt				
	Mailing Address 76 Clearbrook Dr			M M 10		17	/ Y	2018	ү ү 3	
	City	State	Zip Code	Trans	sactio	n ID : P	PR79031	33625	518	_
	Springfield	MA	01118-1905	Amoun	nt of E	ach Re	eceipt th	is Per	iod	
	FEC ID number of contributing federal political committee.	С	15.38						3	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) ond VP & Actuary	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	ggregate Year-to-Date ▼ 322.98			P/R Deduction (\$15.38 Bi-Weekly)				
с.	Full Name of Individual (Last, First, Middle Initi ZAMMITTI, Michael, E, MR.,	al) or Full O	rganization Name	Date o	of Rec	eipt				
	Mailing Address 57 Virginia Rail Dr	1		10 <sup>M</sup>	/	D D D 17	/ Y	2018		
	City Marlborough	State CT	Zip Code 06447-1158				PR7903			
	FEC ID number of contributing federal political committee.	С			9		. y		15.38	3
	Name of Employer (for Individual) Barings LLC		upation (for Individual) aging Director		1emo	ltem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.98	P/R Dec	ductio	n (\$15.3	38 Bi-We	ekly)		
⊢	UBTOTAL of Receipts This Page (optional)				,		5		69.22	2

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ıт.			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 13		11b 14	11c 15	12	ſ	17
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p address of any political committee	erson for the to solicit c	e pur ontrib	pose of outions fi	soliciting	j contr h com	ibutic mitte	ons e.
$\left[ \right]$	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Commit	ttee					
Α.	Full Name of Individual (Last, First, Middle Initi Drzewiecki, Neil, E, MR.,	al) or Full O	Organization Name	Date	Date of Receipt					
	Mailing Address 74 Greenwood Rd				10 / Y Y Y Y 10 17 2018					
	City Windsor Locks	State CT	Zip Code 06096-2635			i <b>on ID :</b> Each R				
	FEC ID number of contributing federal political committee.	С							10.00	)
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) e President & Actuary		Memc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	P/R De	eductio	on (\$10.)	00 Bi-W	eekly)		
B.	Full Name of Individual (Last, First, Middle Initi Beals, Pamela, M, MS.,	al) or Full O	Organization Name	Date	of Re	ceipt				
	Mailing Address 20 Wishing Well Way			10 / D D / Y Y Y Y 10 17 2018						
	City	State	Tran	nsacti	on ID : I	PR7903	204625	518	_	
	W Springfield	MA	01089-4363	Amou	int of	Each R	eceipt th	nis Per	iod	
	FEC ID number of contributing federal political committee.	С	9.62						2	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Occi Vice	rite							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initi Delaney, Pamela, J, MS.,	al) or Full O	Organization Name	Date	of Re	ceipt				
	Mailing Address 15 Winterset Ln			M 10		D D 17	/ Y	۲ 2018		
	City Simsbury	State CT	Zip Code 06070-1720			ion ID : Each R				
	FEC ID number of contributing federal political committee.	С				,			38.46	5
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) President - Procurement	ים ן	Memo	tem				
	Receipt For: Primary General Other (specify)	Aggregate	regate Year-to-Date ▼ 807.66			on (\$38.	46 Bi-W	eekly)		
s	UBTOTAL of Receipts This Page (optional)				-	,	,		58.08	3
т	OTAL This Period (last page this line number of	only)					-		-	

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	y information copied from such Reports and Stafor commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Initi Preston, Phillip, J, MR.,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 63 Wright St			10 / D D / Y Y Y Y 10 17 2018
	City Agawam	State MA	Zip Code 01001-3131	Transaction ID : PR790330762518           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.38
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) Project Manager	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.98	P/R Deduction (\$15.38 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initi Ferris, Peter, G, MR.,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 393 Pinewood Dr			10 17 2018
	City Longmeadow	State MA	Zip Code 01106-1643	Transaction ID : PR790332962518
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) President & Actuary	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼ 242.13	P/R Deduction (\$11.53 Bi-Weekly)
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Van Beaver, Peter, C, MR.,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 8 Victoria Ln			10 / D D / Y Y Y Y 10 17 2018
	City Wilbraham	State MA	Zip Code 01095-1905	Transaction ID : PR790333162518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.38
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) President & Illustration Actuary	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.98	P/R Deduction (\$15.38 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	42.29
Т	OTAL This Period (last page this line number o	nly)		

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Check only one)       Image: The second
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Initia Kennedy, Rhae, A, MS.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 10 Briar Cliff Dr	Chata	Zin Oode	10 / D D / Y Y Y Y 10 17 2018
	City Wilbraham	State MA	Zip Code 01095-1576	Transaction ID : PR790351862518
	FEC ID number of contributing federal political committee.	С		38.46
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) naging Director - Investment Analy	si Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 807.66	P/R Deduction (\$38.46 Bi-Weekly)
В.	Full Name of Individual (Last, First, Middle Initia Barnhart, Richard, P, MR.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 344 Westchester Rd			10 / Y Y Y Y 2018
	City Colchester	State CT	Zip Code 06415-2426	Transaction ID : PR790352062518
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) , Acctg Standards & Ind Relations	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.95	P/R Deduction (\$26.95 Bi-Weekly)
с.	Full Name of Individual (Last, First, Middle Initia Bourgeois, Richard, D, MR.,	al) or Full C	Organization Name	Date of Receipt
	Mailing Address 415 Porter Lake Drive Apartment 313	Otata	7. 0.1	10 / D D / Y Y Y Y 10 17 2018
	City Springfield	State MA	Zip Code 01106-1239	Transaction ID : PR790352262518           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		76.95
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) ior Vice President - Tax	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1615.95	P/R Deduction (\$76.95 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		••••••	142.36
т	OTAL This Period (last page this line number o	nly)	•••••	

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		Use separate schedule(s) for each category of the		(check or	(check only one)					
			Detailed Summary Page	<b>X</b> 11a	11b	11c	12	17		
	n copied from such Reports and a sial purposes, other than using th			erson for the	e purpose c	of soliciting	contribu	tions		
	COMMITTEE (In Full) husetts Mutual Life Inst	urance Co	mpany Political Action	Commit	tee					
	f Individual (Last, First, Middle Ir /, Richard, F, MR., Jr.	iitial) or Full O	organization Name	Date of Receipt						
	ress 1 Cedar Rdg			10	M / D		ү ү 2018	Y		
City South Hadle	€y	State MA	Zip Code 01075-1795		nsaction ID					
	ber of contributing cal committee.	С				-	26.	92		
Barings LLC			upation (for Individual) naging Director		vlemo Item					
Receipt For: Primar Other		Aggregate Year-to-Date ▼ 565.32			duction (\$2	6.92 Bi-We	ekly)			
B. Rosentha	f Individual (Last, First, Middle Ir al, Robert, S, MR.,	iitial) or Full O	Organization Name	Date of	of Receipt					
	ress 12 Sherwood Ln			10			2018	Y		
City Avon		State CT	Zip Code 06001-3215		saction ID nt of Each					
	ber of contributing cal committee.	С		57.70 Memo Item						
	nployer (for Individual) SETTS MUTUAL LIFE INS.		upation (for Individual) & Assistant General Counsel							
Receipt For: Primar Other		Aggregate	Year-to-Date ▼ 1211.70	P/R Deduction (\$57.70 Bi-Weekly)						
c. Crandall	f Individual (Last, First, Middle Ir , Roger, W, MR.,	iitial) or Full O	organization Name	Date of	of Receipt					
Mailing Addr	ress 165 Converse St Apt 13			M 10			2018	Y		
City Longmeado	W	State MA	Zip Code 01106-1755		nsaction ID					
	ber of contributing cal committee.	С			,	,	192.	_		
Massachuse	nployer (for Individual) tts Mutual Life Insurance Co		upation (for Individual) irman President & CEO	N	Vemo Item					
Receipt For: Primar Other		Aggregate	P/R Deduction (\$192.30 Bi-Weekly)							
SUBTOTAL of	f Receipts This Page (optional)						276.	92		

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			Use separate schedule(s)	(check only one)							
ITEMIZED REC	561619		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c	12	17			
Any information copie or for commercial put	d from such Reports and St poses, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	erson for the	purpose	of soliciting	g contribu	utions			
NAME OF COMM	ITTEE (In Full)										
	. ,	rance Co	mpany Political Action	Commit	tee						
Full Name of Indiv A. MOORE, Susar	idual (Last, First, Middle Initi n, A, MS.,	ial) or Full O	rganization Name	Date o	Date of Receipt						
Mailing Address 7	0 Brooks Rd			M M	10 17 2018						
City Longmeadow		State MA	Zip Code 01106-2129			: PR7903 Receipt th					
FEC ID number of federal political co	0	С					134	.62			
Name of Employe Barings LLC	r (for Individual)		ipation (for Individual) aging Director		lemo Item						
Receipt For: Primary Other (speci	General fy) ▼	Aggregate	Year-to-Date ▼ 2827.02	P/R Dec	duction (\$1	34.62 Bi-V	Veekly)				
Full Name of Indiv B. Cooney, Thon	idual (Last, First, Middle Initi nas, M, MR.,	ial) or Full O	rganization Name	Date o	of Receipt						
Mailing Address 8	5 The Laurels			M = M / D = D / Y = Y = Y = Y 10 17 2018							
City		State	Zip Code	Trans	saction ID	: PR7903	77362518	\$			
Enfield		СТ	06082-2357	Amoun	nt of Each	Receipt th	nis Perioc	l			
FEC ID number of federal political co	0	С		10.95							
Name of Employe Massachusetts Mu	r (for Individual) tual Life Insurance Co		upation (for Individual) tomer Service Director	Memo Item							
Receipt For: Primary Other (speci	General (y) ▼	Aggregate	Year-to-Date ▼ , 229.95	P/R Dec	duction (\$1	0.95 Bi-We	ekly)				
Full Name of Indiv C. Curran, Thor	idual (Last, First, Middle Initi nas, P, MR.,	ial) or Full O	rganization Name	Date o	of Receipt						
Mailing Address 1	05 Munsing Rdg			10 <sup>M</sup>	1	7	2018	_			
City Granby		State MA	Zip Code 01033-9561			ecceipt th					
FEC ID number of federal political co	0	С			, ,		9	.73			
	r (for Individual) tual Life Insurance Co		ipation (for Individual) d Prevention Consultant	N	lemo Item	I					
Receipt For: Primary Other (speci	General fy)	Aggregate	Year-to-Date ▼ 204.33	P/R Dec	duction (\$9	9.73 Bi-We	ekly)				
SUBTOTAL of Rece	ipts This Page (optional)		•	ļ.			155.	.30			
TOTAL This Period	(last page this line number o	only)									

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17			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c		2 16	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe address of any political committee	erson for the	purpose	of soliciting	g cont	ributio	ons	
	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Initi Flanagan, Timothy, C., , Jr.	ial) or Full O	Organization Name	Date c	Date of Receipt					
	Mailing Address 608 BELLE MEADE CT			M N 10		D / Y 17	y 201	18		
	City WAXHAW	State NC	Zip Code 28173-7159			<b>D : PR7903</b> n Receipt tl				
	FEC ID number of contributing federal political committee.	С					11	111.10	)	
	Name of Employer (for Individual) SELF		upation (for Individual) neral Agent		lemo Iter	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2777.80	P/R Dec	duction (\$	31111.10 Mo	onthly)	I		
В.	Full Name of Individual (Last, First, Middle Initi WOOLRIDGE, Victor, , MR.,	ial) or Full O	Organization Name	Date c	of Receip	t				
	Mailing Address 146 Longhill St			10 / D D / Y Y Y Y 10 17 2018						
	City	State	Zip Code	Trans	saction I	D : PR7903	87662	518		
	Springfield	MA	01108-1438	Amour	nt of Eacl	n Receipt tl	nis Pe	riod		
	FEC ID number of contributing federal political committee.	С		26.92						
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initi Dollarhide, Jeffrey, Carl, ,	ial) or Full O	Organization Name	Date c	of Receip	t				
	Mailing Address 9646 E LAUREL LN			M 10		17	201	8		
	City SCOTTSDALE	State AZ	Zip Code 85260-5956			D: PR7903				
	FEC ID number of contributing federal political committee.	С			, ,	,	14	128.57	7	
	Name of Employer (for Individual) SELF		upation (for Individual) Ieral Agent		1emo Iter	n				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2142.87	P/R Dec	duction (\$	61428.57 M	onthly)	)		
s	UBTOTAL of Receipts This Page (optional)		•••••		. ,	,	25	566.59	)	
Т	OTAL This Period (last page this line number of	only)	•••••					-		

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
11			for each category of the Detailed Summary Page	¥ 11a 13		11b	11c		12	17
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any per ddress of any political committee	rson for the	purp purp	oose of	soliciting	cont	tributio	ons
	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Init FRANKLIN, WILLIAM, D, ,	ial) or Full O	rganization Name	Date o	Date of Receipt					
	Mailing Address 5611 ENDERLY RD			M M / D D / Y Y Y Y 10 17 2018						
	City BALTIMORE	State MD	Zip Code 21212-2958				PR79039 eceipt th			
	FEC ID number of contributing federal political committee.	С				-			25.00	0
	Name of Employer (for Individual) SELF		upation (for Individual) ırance Agent		1emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Dec	ductio	on (\$12.9	50 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Init KOWALSKI, KEN, CROYDON, ,	ial) or Full O	rganization Name	Date o	of Re	ceipt				
	Mailing Address 3620 WILLOW LAWN DR			10 / Y Y Y Y 2018						
	City	State	Zip Code	Trans	sacti	on ID : I	PR79039	97462	518	
	LYNCHBURG	VA	24503-3022	Amour	nt of	Each Re	eceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С		83.34						4
	Name of Employer (for Individual) SELF	Occi Brol	upation (for Individual) ker	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.40	P/R Deduction (\$41.67 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init TANAKA, WAYNE, Y, ,	ial) or Full O	rganization Name	Date o	of Re	ceipt				
	Mailing Address 565 ALIHI PL			M 10		D D 17	L	201		Ý
	City KAILUA	State HI	Zip Code 96734-3914				PR7903			
	FEC ID number of contributing federal political committee.	С							25.00	0
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		/lemc	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R De	ducti	on (\$12.	50 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)		•			,	y	1	133.34	4
Т	OTAL This Period (last page this line number of	only)	•			<b>,</b> .			-	

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
11			for each category of the Detailed Summary Page	<b>X</b> 11a	11b 11c	12	17			
	ny information copied from such Reports and S for commercial purposes, other than using the				rpose of solicitin					
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee	Э					
Α.	Full Name of Individual (Last, First, Middle Ini MARTIN, BRIAN, W, ,	tial) or Full O	rganization Name	Date of R	leceipt					
	Mailing Address 12217 CLEGHORN RD			10 <sup>M</sup>	/ D D / Y 17	2018	Ŷ			
	City COCKEYSVILLE	State MD	Zip Code 21030-2218		tion ID : PR7904 f Each Receipt th					
	FEC ID number of contributing federal political committee.	С			-15-	83.3	2			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Merr	io Item					
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.37	P/R Deduc	tion (\$41.66 Bi-W	eekly)				
B.	Full Name of Individual (Last, First, Middle Ini O'Sullivan, Brian, W., ,	tial) or Full O	rganization Name	Date of R	leceipt					
	Mailing Address 130 SCHOOL ST			M M 10	/ D D / Y 17	2018	Y			
	City	State	Zip Code		tion ID : PR7904					
	MARSHFIELD	MA	02050-2046	Amount o	f Each Receipt t	nis Period				
	FEC ID number of contributing federal political committee.	С				111.0	7			
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 277.87	P/R Deduct	ion (\$111.07 Mor	nthly)				
С.	Full Name of Individual (Last, First, Middle Ini COLLIER, CHRISTOPHER, E, ,	tial) or Full O	rganization Name	Date of R	leceipt					
	Mailing Address 7162 REGIMENT DR			10 <sup>M</sup>	17	2018	Y			
	City CINCINNATI	State OH	Zip Code 45244-3617		tion ID : PR7904 f Each Receipt tl					
	FEC ID number of contributing federal political committee.	С				25.0	0			
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Merr	no Item					
	Receipt For: Primary General Other (specify)	1	Year-to-Date ▼ 250.00	P/R Deduc	tion (\$12.50 Bi-W	eekly)				
s	UBTOTAL of Receipts This Page (optional)		•		y 1 1 y	219.3	9			

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

FEC Schedule A (Form 3X) Rev. 06/2016

1.

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ı <del>ب</del> ا			Use separate schedule(s)	(check only one)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16					
	y information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)								
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee					
Α.	Full Name of Individual (Last, First, Middle Init Muirhead, Benjamin, Michael, ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 600 POST OAK RD			10 17 2018					
	City	State	Zip Code	Transaction ID : PR790420762518					
	GORDON	ТХ	76453-3894	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		146.67					
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item					
	SELF		irance Agent	-					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General			P/R Deduction (\$146.67 Monthly)					
	Other (specify)		366.67						
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name						
Β.	SUNDET, SCOTT, M, ,			Date of Receipt					
	Mailing Address 4739 161 CT	Chata	Zie Oode	10 / 17 2018					
	City URBANDALE	State IA	Zip Code 50323-0013	Transaction ID : PR790425462518					
			50323-0013	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		50.00					
	Name of Employer (for Individual) SELF		upation (for Individual) Jrance Agent	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼	—					
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$25.00 Bi-Weekly)					
<u>с</u> .	Full Name of Individual (Last, First, Middle Init KARCHER, MARK, A, ,	ial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 6125 WESTMOOR RD			10 / Y Y Y Y 10 17 2018					
	City	State	Zip Code	Transaction ID : PR790427462518					
	BLOOMFIELD	MI	48301-1356	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		25.00					
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)					
⊢	UBTOTAL of Receipts This Page (optional)			221.67					

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IT.	EMIZED RECEIPTS		Use separate schedule(s)		(check only one)					
11			for each category of the Detailed Summary Page	<ul><li>✗ 11a</li><li>13</li></ul>	11b	11c 15	12 16	17		
	ny information copied from such Reports and St for commercial purposes, other than using the			rson for the	purpose of	soliciting	contribu	tions		
	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Mutual Life Insur	rance Co	ompany Political Action	Committ	ee					
А.	Full Name of Individual (Last, First, Middle Initi CADY, DEAN, S, ,	al) or Full O	Organization Name	Date of Receipt						
	Mailing Address 3554 JOSEPHINE LN			M M / D D / Y Y Y Y 10 17 2018						
	City MASON	State MI	Zip Code 48854-9568		action ID :					
	FEC ID number of contributing federal political committee.	С					26.	42		
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	M	emo Item					
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate Year-to-Date ▼ 247.13			uction (\$13.	21 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi RAPFOGEL OSTROFF, LISA, L, ,	al) or Full O	Organization Name	Date of Receipt						
	Mailing Address 6908 WINTERWOOD LN			10 <sup>M</sup>	/ D D 17	/ Y	2018	Y		
	City DALLAS	State TX	Zip Code		action ID :					
	FEC ID number of contributing federal political committee.	C	75248-5157	Amount of Each Receipt this Period						
	Name of Employer (for Individual) SELF	Occupation (for Individual) Insurance Agent			Memo Item					
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ , 250.00	P/R Deduction (\$12.50 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initi BASEHORE, COREY, LEE, ,	al) or Full O	Organization Name	Date of	Receipt					
	Mailing Address 1785 ELIZA WAY			10 <sup>M</sup>	/ D D 17	/ Y	2018	Y		
	City MECHANICSBURG	State PA	Zip Code		action ID :					
			17050-1684	Amount	t of Each R	eceipt this	s Period			
	FEC ID number of contributing federal political committee.	С			y	,	302.4	44		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	M	emo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1895.12	P/R Deduction (\$151.22 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)		<b>&gt;</b>			· · ·	353.8	36		

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

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			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13		11b	11c		2	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	A not be sold or used by any per ddress of any political committee	son for the	purp purp	oose of	soliciting	cont	ributio	ons	
	NAME OF COMMITTEE (In Full)										
$\left \right\rangle$	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi LOGAN, BRIAN, ROBERT, ,	Date of Receipt									
	Mailing Address 323 SOUTHVIEW DR				10 / Y Y Y Y 10 17 2018						
	City MECHANICSBURG	State PA	Zip Code 17055-5258		Transaction ID : PR790437062518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С	C			25.00					
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 475.00	P/R Deduction (\$25.00 Semi-Monthly)							
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DAVIS, JONATHAN, SCOTT, ,				of Re	ceipt					
	Mailing Address 7 OVERLOOK RD					D D 17	/ Y	201	8		
	City	State	Zip Code	Trans	Transaction ID : PR790448762518						
	WESTPORT	CT	06880-2327	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		83.32							
	Name of Employer (for Individual) SELF		upation (for Individual) Jrance Agent		lemo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.37	P/R Deduction (\$41.66 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GREENBERG, STEFAN, ERICH, ,					ceipt					
	Mailing Address 27 BAILIWICK RD				10 / D D / Y Y Y Y 10 17 2018						
	City GREENWICH	State CT	Zip Code 06831-3609		Transaction ID : PR790448862518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С			y .		_	50.00	)		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		/lemc	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•			,	, ,	1	158.32	2	
т	OTAL This Period (last page this line number c	only)	•			<del>.</del>			-		

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FOR LINE NUMBER:

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IT.			Use separate schedule(s)	(check or	nly or	ne)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13		11b	11c		2	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	uy not be sold or used by any pe ddress of any political committee	rson for the	e pur ontrib	pose of	soliciting	g cont	ributio	ons
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Init SEGALL, ROBERT, J, ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 9 FAITH LN			10 / D D / Y Y Y Y 10 17 2018						
	City ARDSLEY	State NY	Zip Code 10502-2510	Transaction ID : PR790450362518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		83.32						
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		/lemo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.37	P/R De	ducti	on (\$41.)	66 Bi-We	eekly)		
в.	Full Name of Individual (Last, First, Middle Init GARBUT, BRETT, M, ,	ial) or Full O	rganization Name	Date o	of Re	eceipt				
	Mailing Address 33 FARMINGTON LN			10 / Y Y Y Y 2018						
	City	State	Zip Code	Tran	sacti	on ID : I	PR79045	51362	518	
	MELVILLE	NY	11747-4016	Amour	nt of	Each R	eceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Insurance Agent			41.68					
	Name of Employer (for Individual) SELF				Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.67	P/R Deduction (\$20.84 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init SEROTTE, STEVEN, R, ,	ial) or Full O	rganization Name	Date o	of Re	eceipt				
	Mailing Address 910 VERNAL WAY			M 10		D D 17	/ Y	201		Ŷ
	City MILL VALLEY	State CA	Zip Code 94941-4422			-	PR7904			
	FEC ID number of contributing federal political committee.	С				y :	- y		83.32	2
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Nemo	) Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 833.37	P/R De	ducti	on (\$41.	66 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)		•			,	9	2	208.32	2
Т	OTAL This Period (last page this line number of	only)	•••••			-			-	

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)           X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and Sta for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Initi LEBLANC, PETER, J, ,	al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 150 CARONDELET PLZ #1902	2		10 / Y Y Y Y 10 17 2018
	City SAINT LOUIS	State MO	Zip Code 63105-3454	Transaction ID : PR790454362518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initi DENNEN, WAYNE, J, , Mailing Address 2302 VISTA MOORA AVE	al) or Full Or	rganization Name	Date of Receipt
	City	State	Zip Code	10 17 2018 Transaction ID : PR790459162518
	CHINO HILLS	CA	91709-4340	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF		upation (for Individual) irance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
c.	Full Name of Individual (Last, First, Middle Initi VAN GILDER, JUDY, DIANE, ,	al) or Full Or	rganization Name	Date of Receipt
	Mailing Address 6012 88TH PL			10 / Y Y Y Y 2018
	City LUBBOCK	State TX	Zip Code 79424-3699	Transaction ID : PR790462562518         Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)			75.00

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

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FOR LINE NUMBER:

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IT.				Use separate schedule(s)	(C	heck only	y on	e)	L			
11				for each category of the Detailed Summary Page		<b>X</b> 11a 13	$\square$	11b 14	11c		12 16	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay n Iddro	ot be sold or used by any pe ess of any political committee	rsor to s	n for the	purp htrib	ose of	solicitin	g con	ntributi	ons
	NAME OF COMMITTEE (In Full)											
$\rangle$	Massachusetts Mutual Life Insu	rance Co	m	pany Political Action	Со	ommitte	ee					
Α.	Full Name of Individual (Last, First, Middle Init SHAUGHNESSY, MICHAEL, EDWARD,		rga	nization Name		Date of	Re	ceipt				
	Mailing Address 7 WILLOW POND DR					10 <sup>M</sup>	/	D D D 17	/ Y		)18	Y
	City GOFFSTOWN	State NH		Zip Code 03045-3105	Transaction ID : PR790462962518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			26.44							4
	Name of Employer (for Individual) SELF		•	tion (for Individual) ce Agent		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 247.09		P/R Ded	uctic	on (\$13.	22 Bi-W	eekly	')	
в.	Full Name of Individual (Last, First, Middle Init SHAUGHNESSY, T J, , ,	nization Name		Date of	Re	ceipt						
	Mailing Address 133 RIVERWALK WAY			1		<sup>M</sup> 10	/	D D D 17	/ Y	20	ү 18	Y
	City MANCHESTER	State Zip Code NH 03101-2642							PR7904			
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period							0
	Name of Employer (for Individual) SELF		•	tion (for Individual) ce Agent		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ur-to-Date ▼ 750.03		P/R Ded	uctic	on (\$62.:	50 Bi-W	eekly	)	
C.	Full Name of Individual (Last, First, Middle Init KAMMERAAD, JEFFREY, W, ,	ial) or Full O	rga	nization Name		Date of	Re	ceipt				
	Mailing Address 471 S 168TH AVE			1		<sup>M</sup> 10	1	D D 17	/ Y	20	18 <sup>°</sup>	Y
	City HOLLAND	State MI		Zip Code 49424-2390					PR7904			
	FEC ID number of contributing federal political committee.	С				Ľ.		y :	. ,		55.8	8
	Name of Employer (for Individual) SELF		•	tion (for Individual) ce Agent		M	emo	Item				
Receipt For:       Aggreen         Primary       General         Other (specify)       Image: Construction of the specify in the specify in the specify in the specify in the specific of the sp			te Year-to-Date ▼ 488.22				P/R Deduction (\$27.94 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)			▶	<u> </u>	<u> </u>		,			207.3	2

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

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IT.			Use separate schedule(s)	(check on	ly one)			-			
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11b	11c		2 16	17		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the	purpose ontribution	of solicitin	g conti	ributic	ons		
$\left[ \right]$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initia CORNETT, ROBERT, M, ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 115 STEELMAN RD	1-		10 <sup>M</sup>		D / Y	201	Y Y 18			
	City PURVIS	State MS	Zip Code 39475-3325	Transaction ID : PR790467762518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		66.68							
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 666.66	P/R Dec	duction (\$3	33.34 Bi-W	eekly)				
в.	Full Name of Individual (Last, First, Middle Initia VESSELL, JERRY, DONALD, ,	al) or Full O	rganization Name	Date c	of Receipt						
	Mailing Address 911 CALLOWAY DR			10 / Y Y Y Y 2018							
	City	State	Zip Code	Trans	saction ID	) : PR7904	70162	518			
	BRENTWOOD	TN	37027-6539	Amour	nt of Each	Receipt t	nis Pei	riod			
	FEC ID number of contributing federal political committee.	C			83.30						
	Name of Employer (for Individual) SELF	Occi Insu	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 833.43	P/R Deduction (\$41.65 Bi-Weekly)							
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Podell, Kenneth, T., ,	al) or Full O	rganization Name	Date c	of Receipt						
	Mailing Address 425 REDLEAF RD			M N 10		D / Y 17	201				
	City WYNNEWOOD	State PA	Zip Code 19096-1623			D: PR7904 Receipt tl					
	FEC ID number of contributing federal political committee.	С			, ,	, , , , , , , , , , , , , , , , , , ,		113.33	3		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		1emo Iten	ו					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 313.33	P/R Dec	duction (\$	113.33 Mo	nthly)				
s	UBTOTAL of Receipts This Page (optional)					,	2	263.31			
т	OTAL This Period (last page this line number o	nly)	•••••					-			

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IT.			Use separate schedule(s)	(check on	ly or	ne)					
11			for each category of the Detailed Summary Page	¥ 11a 13		11b	11c 15		r	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any per address of any political committee	rson for the	purp	oose of	soliciting	contr	ibutic	ons	
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insur	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi HERDLER, ROBERT, C, ,	ial) or Full O	organization Name	Date o	of Re	ceipt					
	Mailing Address 222 W GLENDALE RD			10	المتنا لعدا ليتنا						
	City WEBSTER GROVES	State MO	Zip Code 63119-4019	Transaction ID : PR790508862518           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				-			25.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) ırance Agent		1emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Dec	ductio	on (\$12.8	50 Bi-We	ekly)			
В.	Full Name of Individual (Last, First, Middle Initi OFFERDAHL, KAREN, R, ,	ial) or Full O	organization Name	Date o	of Re	ceipt					
	Mailing Address 1122 ELM ST APT 503			10 / Y Y Y Y 2018							
	City	State	Trans	sacti	on ID : F	PR79051	91625	518			
	HONOLULU	HI	Amour	nt of	Each Re	eceipt th	is Per	iod			
	FEC ID number of contributing federal political committee.	С	25.00								
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
— c.	Full Name of Individual (Last, First, Middle Initi MCGEE, ROBERT, KELLY, , JR	ial) or Full O	rganization Name	Date o	of Re	ceipt					
	Mailing Address 115 W LANIER DR			M 10	/	D D 17	/ Y	2018			
	City HARTSVILLE	State SC	Zip Code 29550-3007			ion ID :					
	FEC ID number of contributing federal political committee.	C		Amour	nt of	Each Re	eceipt th		10d 25.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo	tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R De	ductio	on (\$12.	50 Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)					9			75.00	)	
т	OTAL This Period (last page this line number of	only)	····· ►						-	_	

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ıт.			Use separate schedule(s)	(check on	ly one)			-			
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c		12 16	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	L ay not be sold or used by any pe ddress of any political committee	erson for the	purpose	of solicitin	g cont	tributio	ons		
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Init Wolak, Walter, W., ,	ial) or Full O	rganization Name	Date o	Date of Receipt						
	Mailing Address 525 ANGELO DR			10	المتنتيا ليتما ليتنا						
	City BETHLEHEM	State PA	Zip Code 18017-3735	Transaction ID : PR790525762518           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				· · ·	4	416.6	5		
	Name of Employer (for Individual) SELF		upation (for Individual) Ieral Agent	N	lemo Iter	n					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1666.70	P/R Dec	duction (\$	6416.65 Mo	nthly)				
в.	Full Name of Individual (Last, First, Middle Init BELVEDERE, Robert, L., ,	ial) or Full O	rganization Name	Date o	f Receip	t					
	Mailing Address 74 WINDHAM RD			M M		17 / Y	201	8	Ŷ		
	City	State	Zip Code	Trans	saction I	D : PR7905	30262	2518			
	ROCKVILLE CENTRE	NY 11570-1232			t of Eacl	h Receipt t	his Pe	riod			
	FEC ID number of contributing federal political committee.	С	250.00								
	Name of Employer (for Individual) SELF	Occ Insu	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	P/R Dec	luction (\$	250.00 Mor	nthly)				
с.	Full Name of Individual (Last, First, Middle Init RILEY, LAURA, E, ,	ial) or Full O	rganization Name	Date o	f Receip	t					
	Mailing Address 389 COUNTY ROAD 537 W			10 <sup>M</sup>		17 <sup>/</sup> Y	201		Y		
	City COLTS NECK	State NJ	Zip Code 07722-1628			D: PR7905					
	FEC ID number of contributing federal political committee.	С			, <u>,</u>	,		25.00	0		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	N	lemo Iter	n					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Dec	duction (\$	612.50 Bi-W	′eekly)	)			
s	UBTOTAL of Receipts This Page (optional)		•		. ,	,	ę	691.65	5		
Т	OTAL This Period (last page this line number of	only)	••••••		1.95						

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ITEMIZED RE	CEIDTS		Use separate schedule(s)	(check or	nly or	ne)					
			for each category of the Detailed Summary Page	<b>X</b> 11a 13		11b 14	11c 15	12 16	17		
			ay not be sold or used by any pe ddress of any political committee	erson for the		pose of :	soliciting	g contribu	tions		
NAME OF COMM	. ,	rance Co	mpany Political Action	Commit	ttee						
Full Name of Indi	ividual (Last, First, Middle Initi SERT C	ial) or Full O	rganization Name	Date	of Pc	voint					
	8 CALLE CANGREJO			М	10 17 2018						
City SAN CLEMENTE		State CA	Zip Code 92673-6839	Transaction ID : PR790533962518           Amount of Each Receipt this Period							
FEC ID number of federal political co	0	С					-	20.	84		
Name of Employe	er (for Individual)	Occu Brok	upation (for Individual) ker	Memo Item							
Receipt For: Primary Other (spec	General cify) ▼	Aggregate	Year-to-Date ▼ 208.40	P/R De	educti	on (\$10.4	42 Bi-We	eekly)			
B. JONES, JAS		ial) or Full O	rganization Name	Date		·					
City	8555 VALEMONT DR	State Zip Code			M /	17		2018			
ATLANTA		GA 30350-2850						<b>41562518</b> his Period			
FEC ID number of federal political co	0	Occupation (for Individual) Insurance Agent				-		50.	_		
Name of Employe	er (for Individual)				Memo Item						
Receipt For: Primary Other (spec	General Sify) ▼		Year-to-Date ▼ 500.00	P/R De	ductio	on (\$25.0	00 Bi-We	ekly)			
Full Name of Indi	ividual (Last, First, Middle Initi s, S, MR.,	ial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address	208 N Farms Rd			10		D D D 17		2018			
City Florence		State MA	Zip Code 01062-1042					43962518 his Period			
FEC ID number of federal political co	5	С				<u>,</u>	9	15.	38		
	er (for Individual) TS MUTUAL LIFE INS.		upation (for Individual) President & Senior Counsel	_ U'	Memo	o Item					
Receipt For: Primary Other (spec	General cify)	Aggregate	Aggregate Year-to-Date ▼ 322.98			on (\$15.:	38 Bi-W	eekly)			
			····· •		-	,		86.	22		

FOR LINE NUMBER:

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IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only	one)					
			for each category of the Detailed Summary Page	<b>X</b> 11a 13	11b 14	11c 15	12 16	17		
	y information copied from such Reports and SI for commercial purposes, other than using the									
$\setminus$	NAME OF COMMITTEE (In Full)	_		_						
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committe	e					
<u>/</u>	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name							
Α.	O GRADY, THOMAS, D, ,			Date of Receipt						
	Mailing Address 11301 SILVERSTONE DR			10 / D D / Y Y Y Y 10 17 2018						
	City	State	Zip Code		action ID :					
	MECHANICSVILLE	VA	23116-5877	Amount	of Each F	Receipt th	nis Perio	d		
	FEC ID number of contributing federal political committee.	С					50	0.00		
	Name of Employer (for Individual)	000	upation (for Individual)	Me	emo Item					
	SELF		irance Agent		and item					
	Receipt For:	Aggregate	Year-to-Date <b>V</b>							
	Primary General	· · · ·	500.00	P/R Dedu	uction (\$25	.00 Bi-W	eekly)			
	Other (specify) V	L	300.00							
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name	Data af	Dessist					
в.	Gray, Jonathan, R, MR.,				Receipt					
	Mailing Address 152 Morningside Dr			10	17		2018	Y		
	City	State	Zip Code	Transa	action ID :	PR7905	4546251	8		
	Longmeadow	MA	01106-2316	Amount	of Each F	Receipt th	nis Perio	d		
	FEC ID number of contributing federal political committee.	С	19.25							
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) P Business Operations	Memo Item						
	Receipt For:		Year-to-Date ▼							
	Primary General	riggioguio		P/R Deduction (\$19.25 Bi-Weekly)						
	Other (specify) <b>v</b>	<u> </u>	404.25							
— c.	Full Name of Individual (Last, First, Middle Init DULCHINOS, Dean, , MR.,	ial) or Full O	rganization Name	Date of	Receipt					
	Mailing Address 20 Abbey Ln			M M 10	/ D 17		2018	Y		
	City	State	Zip Code	Trans	action ID :	PR7905	6856251	8		
	E Longmeadow	MA	01028-3206	Amount	of Each F	Receipt th	nis Perio	d		
	FEC ID number of contributing federal political committee.	С		38.50						
	Name of Employer (for Individual) Barings LLC		upation (for Individual) aging Director	Me	emo Item					
	Receipt For:	1	Year-to-Date ▼	—						
	Primary General			P/R Dedu	uction (\$38	.50 Bi-W	eekly)			
	Other (specify)	L	808.50							
⊢	UBTOTAL of Receipts This Page (optional)					, , , , , , , , , , , , , , , , , , ,	107	2.75		
T	OTAL This Period (last page this line number of	only)	····· •							

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IT.			Use separate schedule(s)	(check on	ly one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11b	11c	12	17			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for the to solicit co	purpose of ntributions	soliciting	contrib commi	utions ttee.			
$\setminus$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi Olearcek, Patrick, F, MR.,	al) or Full O	rganization Name	Date o	Date of Receipt						
	Mailing Address 321 Munger Hill Rd			10 / D / Y Y Y Y 10 17 2018							
	City Westfield	State MA	Zip Code 01085-4575	Transaction ID : PR790573162518           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		9.65							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) d of Advanced Sales		lemo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 202.65	P/R Dec	duction (\$9.6	65 Bi-Wee	ekly)				
в.	Full Name of Individual (Last, First, Middle Initi Hurley, Kerry, , MR.,	al) or Full O	rganization Name	Date o	f Receipt						
	Mailing Address 29 Lynnwood Dr			M = M         /         D = D         /         Y = Y = Y         Y           10         17         2018							
	City	State	Zip Code	Trans	saction ID :	PR79057	7636251	8			
	Longmeadow	MA 01106-2011			t of Each F	Receipt th	is Perio	d			
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) AVP Compliance			9.62						
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.				Memo Item						
	Receipt For:	Aggregate	Year-to-Date ▼ , 202.02	P/R Deduction (\$9.62 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi Hart, Karen, W, MS.,	al) or Full O	rganization Name	Date o	f Receipt						
	Mailing Address 45 Hawthorne St			M _ M 10	/ D 17		2018 Y	Y			
	City Longmeadow	State MA	Zip Code 01106-1938		saction ID : it of Each F						
	FEC ID number of contributing federal political committee.	С			. , .	. ,	g	0.62			
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		ipation (for Individual) Training		lemo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02	P/R Dec	duction (\$9.6	62 Bi-We	ekly)				
F	UBTOTAL of Receipts This Page (optional)		<b>r</b>		· · · ·	· · ·	28	.89			
т	OTAL This Period (last page this line number of	only)	····· ►								

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		Use separate schedule(s)	(check only	one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b 11c	12	17				
Any information copied from such Repor or for commercial purposes, other than u	ts and Statements ma using the name and a	y not be sold or used by any p ddress of any political committee	erson for the pu	urpose of solicitir	ng contribut	tions				
NAME OF COMMITTEE (In Full)										
Aassachusetts Mutual Lif	e Insurance Co	mpany Political Action	Committee	е						
Full Name of Individual (Last, First, M Lord, Cynthia, A, MS.,	liddle Initial) or Full O	rganization Name	Date of F	Date of Receipt						
Mailing Address 11 Sylvan Dr			10 <sup>M</sup>	10 17 2018						
City Wilbraham	State MA	Zip Code 01095-2735	Transaction ID : PR790578962518           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C				13.	16				
Name of Employer (for Individual) Massachusetts Mutual Life Insurance (		upation (for Individual) Sales Support	Men	no Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.56	P/R Deduc	ction (\$13.16 Bi-V	Veekly)					
Full Name of Individual (Last, First, M B. KRAEZ, Kathleen, L, MS.,	liddle Initial) or Full O	rganization Name	Date of F	Receipt						
Mailing Address 111 Ashford Rd			10 / D D / Y Y Y Y 10 17 2018							
City	State	Zip Code		tion ID : PR790						
Longmeadow	MA	01106-2515	Amount c	of Each Receipt	this Period					
FEC ID number of contributing federal political committee.	С		26.92							
Name of Employer (for Individual) Barings LLC		upation (for Individual) aging Director	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)							
Full Name of Individual (Last, First, M C. TREVALLION, Douglas, M,		rganization Name	Date of F	Receipt						
Mailing Address 30 Coventry Ln			M M 10	/ D D / 17	Y Y Y 2018	Y				
City Agawam	State MA	Zip Code 01001-3569		ction ID : PR790		}				
FEC ID number of contributing federal political committee.	С			y	38.4	46				
Name of Employer (for Individual) Barings LLC		ipation (for Individual) aging Director	Men	no Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.66	P/R Deduc	ction (\$38.46 Bi-V	Veekly)					
SUBTOTAL of Receipts This Page (opt	ional)			5 5	78.	54				
TOTAL This Period (last page this line	number only)	••••••								

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IT.			Use separate schedule(s)	(check only	one)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 13	11b 14	11c 15	12 16	17		
	y information copied from such Reports and St for commercial purposes, other than using the									
$\left[ \right]$	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committe	e					
Α.	Full Name of Individual (Last, First, Middle Initi ROBERGE, Roger, M, MR.,	ial) or Full O	rganization Name	Date of	Receipt					
	Mailing Address 14 Rockingham Cir			10 <sup>M</sup>	/ D D 17	/ Y	Y Y 2018	Ŷ		
	City	State MA	Zip Code		action ID :					
	East Longmeadow	IVIA	01028-3197	Amount	of Each R	eceipt th	is Perioc	1		
	FEC ID number of contributing federal political committee.	С			- JP.		38	.46		
	Name of Employer (for Individual)	Осси	upation (for Individual)	Me	mo Item					
	Barings LLC	Man	aging Director							
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General		807.66	P/R Dedu	iction (\$38.	46 Bi-We	eekly)			
	Other (specify)		507.00							
	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name							
Β.	SHETTLE, Robert, M, MR.,			Date of	Receipt					
	Mailing Address 65 Kelsey Ln			10	/ D D 17	/ Y	2018	Ŷ		
	City	State         Zip Code           CT         06033-5040			ction ID :					
	Glastonbury		Amount	of Each R	eceipt th	is Perioc	1			
	FEC ID number of contributing federal political committee.	С					19	.23		
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Memo Item						
	Receipt For:		Year-to-Date ▼	—						
	Primary General	, iggi oguto		P/R Deduction (\$19.23 Bi-Weekly)						
	Other (specify)		403.83							
с.	Full Name of Individual (Last, First, Middle Initi Newton, Edward, G, MR.,	ial) or Full O	rganization Name	Date of	Receipt					
	Mailing Address 67 Rumford St			M M 10	/ D D 17	/ Y	2018	Y		
	City	State	Zip Code	Transa	action ID :	PR7906	0016251	8		
	West Hartford	СТ	06107-3754	Amount	of Each R	eceipt th	is Period	1		
	FEC ID number of contributing federal political committee.	С			,	,	9	.62		
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) Compliance	Me	mo Item					
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		000.00	P/R Dedu	ction (\$9.6	2 Bi-We	ekly)			
	Other (specify)	<u> </u>	202.02							
F	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o				5	· · ·	67.	31		

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	ZED RECEIPTS		Use separate schedule(s)	(check only	/ one)					
			for each category of the Detailed Summary Page	<b>X</b> 11a 13	11b 14	11c 15	12 16	17		
	ormation copied from such Reports and Sta commercial purposes, other than using the									
	E OF COMMITTEE (In Full)		many Delitical Action	Committe	~~					
	ssachusetts Mutual Life Insur	ance Co	mpany Political Action	Committe	ee					
	Name of Individual (Last, First, Middle Initia hbun, George, F, MR., II	al) or Full O	rganization Name	Date of Receipt						
Maili	ng Address 127 Tunxis St			м м 10	/ D 17	D / Y	ү ү 2018	Y		
City Wind	door	State CT	Zip Code 06095-1334		action ID :					
			00095-1554	Amount	of Each F	Receipt th	nis Perioo	1		
	ID number of contributing al political committee.	С					15	.38		
Nam	e of Employer (for Individual)	Осси	upation (for Individual)	Me	emo Item					
	sachusetts Mutual Life Insurance Co	Deli	very Leader							
Rece	ipt For:	Aggregate	Year-to-Date 🔻							
	Primary General		322.98	P/R Ded	uction (\$15	.38 Bi-W	eekly)			
	Other (specify) ▼		522.90							
Full I	Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name							
	ELTZ, Jerome, J, MR.,			Date of	Receipt					
	ng Address 12 Rock Ln			10 <sup>M</sup>	/ D 17	) / Y	2018	Y		
City Guilf	and	State CT	Zip Code		action ID :					
					of Each F	Receipt th	nis Period	t		
	ID number of contributing al political committee.	С	15.38							
	e of Employer (for Individual) gs LLC	Occupation (for Individual) Managing Director			Memo Item					
Rece	ipt For:	Aggregate	Year-to-Date ▼	—						
	Primary General Other (specify) V		322.98	P/R Deduction (\$15.38 Bi-Weekly)						
	Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name							
	RVEY, Greg, A., ,			Date of	Receipt					
	ng Address 15521 KESSLER ST			10	/ 17		2018 <sup>°</sup>	_		
City	RLAND PARK	State KS	Zip Code 66221-9333		action ID :					
				Amount	of Each F	leceipt tr	nis Period	1		
	ID number of contributing al political committee.	С			. <u>y</u> .	y	100	.00		
Nam SEL	e of Employer (for Individual) =		upation (for Individual) rance Agent	Me	emo Item					
Rece	Primary General	Aggregate	Year-to-Date ▼	P/R Ded	uction (\$10	0.00 Mor	nthly)			
	Other (specify)		400.00			_				
SUBTO	OTAL of Receipts This Page (optional)		•		. , .	,	130	.76		
TOTAL	. This Period (last page this line number o	nly)	▶							

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		la 3	11b 14	11c 15	12	Γ	17		
	y information copied from such Reports and St for commercial purposes, other than using the						soliciting					
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Comm	hitte	е						
Α.	Full Name of Individual (Last, First, Middle Initi SHEA, Thomas, P, MR.,	ial) or Full O	rganization Name	Dat	e of	Receipt						
	Mailing Address 81 Greenmeadow Dr				M M / D D / Y Y Y Y 10 17 2018							
	City	State MA	Zip Code	Tr	ansa	ction ID :	PR7906	4066251	18			
	Longmeadow	IVIA	01106-2305	Am	ount	of Each F	Receipt th	nis Perio	bd			
	FEC ID number of contributing federal political committee.	С						1	0.00			
	Name of Employer (for Individual)	Occi	upation (for Individual)		Mei	no Item						
	Barings LLC	Man	naging Director									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		040.00	P/R I	Dedu	ction (\$10	.00 Bi-W	eekly)				
	Other (specify)	<u> </u>	210.00	1								
	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name									
Β.	Martini, Stefano, , MR.,			Dat	e of	Receipt						
	Mailing Address 18 Clay Creek Dr				10 <sup>M</sup>	/ D 17		2018	Y	]		
	City	State	Zip Code			ction ID :						
	Suffield	СТ	06078-1247	Am	ount	of Each F	Receipt th	nis Peric	bd			
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) CIO - MMFA			9.62							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co				Mei	mo Item						
	Receipt For:	Aggregate	Year-to-Date ▼	7								
	Primary General			P/R [	Dedu	ction (\$9.6	62 Bi-We	ekly)				
	Other (specify) <b>v</b>		202.02									
C.	Full Name of Individual (Last, First, Middle Initi Fawthrop, Roland, P, MR.,	ial) or Full O	rganization Name	Dat	e of	Receipt						
	Mailing Address 51 Horseshoe Ln				10 <sup>™</sup>	/ D 17		2018	Y	1		
	City	State	Zip Code	Т <b>Т</b>	ansa	ction ID :	: PR7906	582625	18			
	Somers	СТ	06071-2235	Am	ount	of Each F	Receipt th	nis Peric	bd			
	FEC ID number of contributing federal political committee.	С				y .	, ,	20	6.92			
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) President & Actuary		Me	mo Item						
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			P/R	Dedu	ction (\$26	6.92 Bi-W	eekly)				
	Other (specify)	565.32										
s	UBTOTAL of Receipts This Page (optional)		•			, .	, , , , , , , , , , , , , , , , , , ,	4(	6.54			
Т	OTAL This Period (last page this line number of	only)							-			

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	,	Use separate schedule(s)	(check only	/ one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c 15	12 16	17			
Any information copied from such or for commercial purposes, other	Reports and Statements ma r than using the name and ad	y not be sold or used by any pe ddress of any political committee	erson for the	purpose of s	soliciting	contribut	ions			
NAME OF COMMITTEE (In Fi										
		mpany Political Action	Committe	ee						
Full Name of Individual (Last, Bhardwaj, Rakesh, , MR.,	First, Middle Initial) or Full O	ganization Name	Date of	Receipt						
Mailing Address 96 Horizon Ln			10 <sup>M</sup>	/ D D 17	/ Y	y y 2018	Y			
City Glastonbury	State CT	Zip Code 06033-2828		action ID : F						
FEC ID number of contributing federal political committee.	C					15.3	38			
Name of Employer (for Individu Massachusetts Mutual Life Insu		pation (for Individual) and VP - Sales Support	Me	emo Item						
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 322.98	P/R Deduction (\$15.38 Bi-Weekly)							
Full Name of Individual (Last, <b>B. Morin, Jeffrey, A, MR.</b> ,	First, Middle Initial) or Full O	ganization Name	Date of	Receipt						
Mailing Address 131 Canterbu	-		M M 10	/ D D 17	/ Y	2018	Y			
City	State	Zip Code	Trans	action ID : F	PR790661	1662518				
E Longmeadow	MA	01028-5710	Amount	of Each Re	eceipt this	s Period				
FEC ID number of contributing federal political committee.	C	C Occupation (for Individual) External Wholesaler			11.54					
Name of Employer (for Individ Massachusetts Mutual Life Insu	rana Ca									
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ , 242.34	P/R Dedu	uction (\$11.5	i4 Bi-Wee	ekly)				
Full Name of Individual (Last, C. Gish, Todd, M, MR.,	First, Middle Initial) or Full O	ganization Name	Date of	Receipt						
Mailing Address 208 Long What			M M 10	/ D D 17	/ Y	y y 2018	Y			
City Stonington	State CO	Zip Code 06029-3615		of Each Re						
FEC ID number of contributing federal political committee.	C			9	,	38.4	46			
Name of Employer (for Individu Massachusetts Mutual Life Insu	· ·	pation (for Individual) President - GIC Operations	Me	emo Item						
Receipt For: Primary Genera Other (specify)		Year-to-Date ▼ 807.66	P/R Deduction (\$38.46 Bi-Weekly)							
SUBTOTAL of Receipts This Pa	ge (optional)	•		y .		65.3	38			
TOTAL This Period (last page th	is line number only)	••••••								

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			Use separate schedule(s)	(check or	nly on	e)	L			
ITEMIZED R			for each category of the Detailed Summary Page	★ 11a		11b	11c	12		17
Any information c	opied from such Reports and S	tatements ma	A not be sold or used by any pe address of any political committee	rson for the	purp	ose of	15 soliciting	contrib	oution	17 ns
	MMITTEE (In Full)									-
		rance Co	mpany Political Action	Commit	tee					
Full Name of I A. Desai, Shefa	ndividual (Last, First, Middle Init ali, , MS.,	tial) or Full O	rganization Name	Date of	of Re	ceipt				
	s 24 Meadowlark dr			M 10	العنا لعما لعنا					
City East Longmeadow		State MA	Zip Code 01028-3172		Transaction ID : PR790683162518 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.				11.12						
Massachusetts Mutual Life Insurance Co			upation (for Individual) - Sales Engineering		/lemo	Item				
			Year-to-Date ▼ 233.52	P/R Deduction (\$11.12 Bi-Weekly)						
Full Name of I B. BYERS, JC	ndividual (Last, First, Middle Init DHN, N, ,	tial) or Full O	rganization Name	Date of	of Re	ceipt				
Mailing Address 3680 JACOBS MILL RD				M 10	л /	D D 17	/ Y	y y 2018	Y	]
City		State	Zip Code 55356-9320				PR79068			
LONG LAKE		MN	Amour	nt of	Each Re	eceipt th	is Perio	bd	_	
FEC ID number federal politica	er of contributing I committee.	C	125.00							
Name of Empl SELF	oyer (for Individual)	Occi Insu		/lemo	ltem					
Receipt For: Primary Other (sp	General pecify) ▼	Aggregate	Year-to-Date ▼ 1250.00	P/R Deduction (\$62.50 Bi-Weekly)						
Full Name of I C. TETHER,	ndividual (Last, First, Middle Init JASON, M, ,	tial) or Full O	rganization Name	Date o	of Re	ceipt				
Mailing Addres	S 1029 E FAIRVIEW LN			M 10		D D 17	/ Y	2018	Y	1
City ROCHESTER	HILLS	State MI	Zip Code 48306-4123			-	PR7906		-	
FEC ID number federal politica	er of contributing I committee.	С				, .	. ,	5	2.58	
Name of Empl SELF	oyer (for Individual)		upation (for Individual) rance Agent	Ν	/lemo	Item				
Dessint For			Year-to-Date ▼ 394.84	P/R Deduction (\$26.29 Bi-Weekly)						
SUBTOTAL of F	Receipts This Page (optional)		•			,	, <u>,</u>	18	8.70	
TOTAL This Per	iod (last page this line number	only)				,	-		-	

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(Check only one)       Image: 11 a model       11 a model    <
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements mana and a	ay not be sold or used by any pe address of any political committee	rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Init MCCARTHY, DANIEL, F, , Mailing Address 22 CORTLAND DR	ial) or Full C	Organization Name	Date of Receipt
	City	State	Zip Code	10 17 2018 Transaction ID : PR790691062518
	TOLLAND	CT	06084-2157	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Init LONG, YIN, , ,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 6 KAPPELMANN DR			10 / Y Y Y Y 10 17 2018
	City GREEN BROOK	State NJ	Zip Code 08812-2157	Transaction ID : PR790702962518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
С.	Full Name of Individual (Last, First, Middle Init FEHRS, DAVID, SCOTT, ,	ial) or Full C	Organization Name	Date of Receipt
	Mailing Address 191 BUCKTHORN DR			10 / D D / Y Y Y Y 10 17 2018
	City BADEN	State PA	Zip Code 15005-2561	Transaction ID : PR790708662518 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		208.32
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2083.37	P/R Deduction (\$104.16 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	258.32
Т	OTAL This Period (last page this line number of	only)		

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)       X     11a       11b     11c       12       13     14       15     16       17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Initia CARR, ALLEN, WESLEY, , JR Mailing Address 427 RHODA DR	al) or Full O	Organization Name	Date of Receipt
	City LANCASTER	State PA	Zip Code 17601-3669	Transaction ID : PR790708862518
			17601-3009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.				50.00
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initia WIGHT, EDWARD, IRA, , JR	al) or Full O	Organization Name	Date of Receipt
Mailing Address 804 KATESFORD RD				M M / D D / Y Y Y Y 10 17 2018
	City	State	Zip Code	Transaction ID : PR790710962518
	COCKEYSVILLE	MD	21030-2246	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		83.30
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.43	P/R Deduction (\$41.65 Bi-Weekly)
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia JOHNSON, EDMOND, HOUGH, ,		Organization Name	Date of Receipt
	Mailing Address 617 DALE DR			10 / Y Y Y Y 10 17 2018
	City VIRGINIA BCH	State VA	Zip Code 23452-1848	Transaction ID : PR790712762518           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		26.50
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼ 247.18	P/R Deduction (\$13.25 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		•	159.80
Т	OTAL This Period (last page this line number of	nly)	•••••	

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IT	EMIZED RECEIPTS		1	for each category of the Detailed Summary Page	`_	heck onl X 11a 13		e) 11b 14	11c	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r					for the	purpo	ose of s	olicitin	g contrib	utions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	ance Co	omj	pany Political Action	Со	mmitt	ee				
Α.		al) or Full O	Irga	nization Name	_	Date o	f Rec	eipt			
	Mailing Address 10029 ORANGE GROVE DR					<sup>M</sup> 10	/	D D 17	/ Y	2018	Y
	City TAMPA	State FL		Zip Code 33618-4014	_					2106251 nis Perio	
	FEC ID number of contributing federal political committee.	С				[.			-	25	5.00
			•	tion (for Individual) ce Agent		M	emo l	ltem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 250.00		P/R Ded	luctior	า (\$12.5	60 Bi-We	eekly)	
в.	Full Name of Individual (Last, First, Middle Initia WAHL, MICHAEL, T, ,	al) or Full O	rga	nization Name		Date o	f Rec	eipt			
Mailing Address 4 TODMORDEN LN						10	1	D D 17	/ Y	2018	Y
	City ROSE VALLEY	State PA		Zip Code 19086-6729	_					2336251	
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Insurance Agent				[.				140	
	Name of Employer (for Individual) SELF				_	М	emo I	ltem			
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				P/R Deduction (\$70.25 Bi-Weekly)					
<u></u> с.	Full Name of Individual (Last, First, Middle Initia GULLICKSON, PAUL, R, ,	al) or Full O	rga	nization Name		Date o	f Rec	eipt			
	Mailing Address 4210 E 59TH ST			1		10 <sup>M</sup>		D D 17	I L	ү ү 2018	
	City DAVENPORT	State IA		Zip Code 52807-2901						2806251	
	FEC ID number of contributing federal political committee.	С				<u> </u>	. ,			25	5.00
	Name of Employer (for Individual) SELF		•	tion (for Individual) ce Agent		M	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00				P/R Dec	luctior	n (\$12.5	50 Bi-W	eekly)	
s	UBTOTAL of Receipts This Page (optional)			•			. ,			190	.50
т	OTAL This Period (last page this line number or	וy)		•	•						

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11b	11c	12	17		
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any per address of any political committee	rson for the	purpose of ntributions	soliciting	g contribu	utions		
$\square$	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Committ	ee					
Α.		ial) or Full O	Organization Name	Date o	f Receipt					
Mailing Address 12 LIGHTHOUSE LN				10 <sup>M</sup>	10 17 2018 Transaction ID : PR790729362518					
	City THIRD LAKE	State IL	Zip Code 60030-2638		<b>action ID :</b> t of Each F					
	FEC ID number of contributing federal political committee.	С		25.00						
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	м	emo Item					
	Receipt For:         Primary       General         Other (specify) ▼	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
в.	Full Name of Individual (Last, First, Middle Init THOMALLA, KENNETH, C, ,	ial) or Full O	Organization Name	Date of	f Receipt					
	Mailing Address 122 FOREST EDGE DR			M M 10	/ D 17	) / Y	2018	Y		
	City	State	Zip Code	Trans	action ID :	PR79073	31162518	3		
	PALOS PARK	IL	60464-1933	Amoun	t of Each F	Receipt th	is Period	t		
	FEC ID number of contributing federal political committee.	С	208.32							
	Name of Employer (for Individual) SELF	Occi Insu	M	emo Item						
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 2083.37	P/R Deduction (\$104.16 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Init FOSTER, LARRY, W, ,	ial) or Full O	Organization Name	Date o	f Receipt					
	Mailing Address 45 LAKE POINTE			M M 10	/ D 17		ү ү 2018	Y		
	City DECATUR	State IL	Zip Code 62521		saction ID :					
FEC ID number of contributing federal political committee.					t of Each F	receipt th		5.00		
	Name of Employer (for Individual) SELF		upation (for Individual) ırance Agent	м	emo Item					
Paggint For:			Year-to-Date ▼ 250.00	P/R Dec	luction (\$12	.50 Bi-We	ekly)			
F	<b>OTAL</b> This Period (last page this line number of				<u>y</u>	5	258	.32		
1 '	CIAL THIS I CHOU (IASI PAYE THIS IIIE HUITIDE C	····y/·····	•••••••••••••••••••••••••••••••••••••••	and the second se			أسيابها والمسال			

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11			for each category of the Detailed Summary Page	¥ 11a 13		11b	11c		2 6	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for the	e pur ontrib	pose of	soliciting	cont	ributio	ons	
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi PFAFF, DONOVAN, D, ,	al) or Full O	rganization Name	Date of	of Re	eceipt					
	Mailing Address 1101 RED TAIL DR			M 10	VI /	D D 17	/ Y	y 201	8	Ý	
	City VERONA	State WI	Zip Code 53593-7961				PR7907: eceipt th				
FEC ID number of contributing federal political committee.				25.00							
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		/lemo	tem					
Receipt For:       Aggreg         Primary       General         Other (specify) ▼			Year-to-Date ▼ 250.00	P/R De	ducti	on (\$12.	50 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initi MATT, CHARLES, C., ,	al) or Full O	rganization Name	Date o	of Re	eceipt					
	Mailing Address 803 SILVER SPRUCE ST			10	л /	D D 17	/ Y	201	8		
	City	State	Zip Code	Tran	sacti	on ID : I	PR79074	2662	518		
	SAN ANTONIO	TX	78232-2732	Amour	nt of	Each R	eceipt th	is Pe	riod		
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Insurance Agent			47.22						
	Name of Employer (for Individual) SELF				/lemo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 205.59	P/R Dec	ductio	on (\$23.6	61 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initi OWENS, LILBURN, HORACE, , JI		rganization Name	Date o	of Re	eceipt					
	Mailing Address 734 HIGHLAND CIR			10	И /	D D 17	/ Y	201		Ŷ	
	City TUPELO	State MS	Zip Code 38804-2006			-	PR7907				
	FEC ID number of contributing federal political committee.	С				, .	9		41.66	6	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		/lemo	o Item					
Receipt For:     Aggrega       Primary     General       Other (specify)			Year-to-Date ▼ 416.64	P/R Deduction (\$20.83 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		►			, .	9	1	13.88	3	
т	OTAL This Period (last page this line number c	only)	•••••						-		

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17				
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements ma the name and a	ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
Aassachusetts Mutual Life Ir	nsurance Co	mpany Political Action	Committee				
Full Name of Individual (Last, First, Middl A. Morin, Vanessa, B, MS.,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 131 Canterbury Cir			10 / Y Y Y Y 10 17 2018				
City E Longmeadow	State MA	Zip Code 01028-5710	Transaction ID : PR790790362518           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		30.77				
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) d of Advisor Services	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 646.17	P/R Deduction (\$30.77 Bi-Weekly)				
Full Name of Individual (Last, First, Middl B. Zielinski, Greta, A, MS.,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 894 Bernie Ave			10 17 2018				
City	State	Zip Code	Transaction ID : PR790804662518				
W Springfield	MA	01089-4415	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		15.38				
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) Consultant	Memo Item				
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$15.38 Bi-Weekly)				
Other (specify) V		322.98					
Full Name of Individual (Last, First, Middl C. Afonso, Moises, X, MR.,	e Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 82 Reservoir Rd			10 / D D / Y Y Y Y 10 17 2018				
City Ludlow	State MA	Zip Code 01056-1693	Transaction ID : PR790806062518 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		9.62				
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) Audit	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)				
SUBTOTAL of Receipts This Page (optional	I)		55.77				
TOTAL This Period (last page this line num	ber only)						

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	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	ance Co	ompany Political Action	Committee
Α.	Full Name of Individual (Last, First, Middle Initia Allen, David, S, MR., Mailing Address 8 Winhall Ln	ll) or Full C	Drganization Name	Date of Receipt
		State	Zip Code	10 / 17 / 2018
	City Hartford	CT	06105-1000	Transaction ID : PR790809762518           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		С		57.70
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		cupation (for Individual) P - DGC Dispute Resolution & Leg	al Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1211.70	P/R Deduction (\$57.70 Bi-Weekly)
в.	Full Name of Individual (Last, First, Middle Initia PICCONE, Scott, , MR.,	ll) or Full C	Drganization Name	Date of Receipt
	Mailing Address 33 Trotwood Dr			10 / Y Y Y Y 10 17 2018
	City West Horfford	State CT	Zip Code	Transaction ID : PR790815862518
	West Hartford           FEC ID number of contributing         federal political committee.	C	06117-1644	Amount of Each Receipt this Period
	Name of Employer (for Individual) Barings LLC		cupation (for Individual) maging Director	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 403.83	P/R Deduction (\$19.23 Bi-Weekly)
С.	Full Name of Individual (Last, First, Middle Initia KENDE, STEPHEN, J, ,	ll) or Full C	Drganization Name	Date of Receipt
	Mailing Address 41 HAMILTON ST			10 / D D / Y Y Y Y 10 17 2018
	City PLATTSBURGH	State NY	Zip Code 12901-3008	Transaction ID : PR790846762518           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) SELF	Bro		Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)
s	UBTOTAL of Receipts This Page (optional)		••••••	101.93
Т	OTAL This Period (last page this line number or	וy)	•	

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Any information copied from such Reports and Statements may not be sold or used by any person or for commercial purposes, other than using the name and address of any political committee to s         NAME OF COMMITTEE (In Full)         Massachusetts Mutual Life Insurance Company Political Action Co         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. JARVIS, HAROLD, F., III         Mailing Address 190 MAIN ST         City       State         CHCHESTER         Name of Employer (for Individual)         SELF         Primary         Other (specify)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         Aggregate Year-to-Date         Primary         General         Other (specify)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. WOOLMAN, GARY, BRUCE, ,         Mailing Address 10523 INDIAN RIDGE DR         City       State         PRC ID number of contributing federal political committee.         Diagram       City         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         City       State         Primary       General         Other (specify)       C <th>solicit contributions from such committee.</th>	solicit contributions from such committee.					
or for commercial purposes, other than using the name and address of any political committee to s         NAME OF COMMITTEE (In Full)         Massachusetts Mutual Life Insurance Company Political Action Co         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. JARVIS, HAROLD, F., III         Mailing Address 190 MAIN ST         City       State         City CHICHESTER         Name of Employer (for Individual)         SELF         Receipt For:         Primary         General         Other (specify)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. WOOLMAN, GARY, BRUCE, ,         Mailing Address 10523 INDIAN RIDGE DR         City       State         PEC ID number of contributing federal political committee.         Dubar of contributing federal political committee.         Primary       General         Other (specify)       State         Zip Code         FORT WAYNE       In         Halling Address 10523 INDIAN RIDGE DR         City       State         Primary       General         Other (specify)       Occupation (for Individual)         Insurance Agent       Aggregate Year-to-Date	solicit contributions from such committee.         Date of Receipt         10       17         2018         Transaction ID : PR790849862518         Amount of Each Receipt this Period         25.00         Memo Item         P/R Deduction (\$12.50 Bi-Weekly)         Date of Receipt         Memo / D D / YYYYY					
Massachusetts Mutual Life Insurance Company Political Action Co         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. JARVIS, HAROLD, F., III         Mailing Address 190 MAIN ST         City       State         CHCHESTER       NH         Occupation (for Individual)         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       Aggregate Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       B         WOOLMAN, GARY, BRUCE, ,       Mailing Address 10523 INDIAN RIDGE DR         City       Fort MAYNE       In         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General       Other (specify) ▼         Oth	Date of Receipt 10 / 17 / 2018 Transaction ID : PR790849862518 Amount of Each Receipt this Period 25.00 Memo Item P/R Deduction (\$12.50 Bi-Weekly) Date of Receipt					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. JARVIS, HAROLD, F, , III         Mailing Address 190 MAIN ST         City       State       Zlp Code         CHICHESTER       NH       03258-6511         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual) Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. WOOLMAN, GARY, BRUCE, , Mailing Address 10523 INDIAN RIDGE DR         City       State       Zlp Code         FORT WAYNE       IN       46814-9090         FEC ID number of contributing federal political committee.       Occupation (for Individual) Insurance Agent         Name of Employer (for Individual)       Occupation (for Individual) Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General       Occupation (for Individual) Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Individual	Date of Receipt 10 / 17 / 2018 Transaction ID : PR790849862518 Amount of Each Receipt this Period 25.00 Memo Item P/R Deduction (\$12.50 Bi-Weekly) Date of Receipt					
A. JARVIS, HAROLD, F, , III         Mailing Address 190 MAIN ST         City       State       Zip Code         CHICHESTER       NH       03258-6511         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Insurance Agent         Receipt For:       Primary         Other (specify) ▼       Aggregate Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. WOOLMAN, GARY, BRUCE, ,         Mailing Address 10523 INDIAN RIDGE DR         City       State       Zip Code         FORT WAYNE       IN       46814-9090         FEC ID number of contributing federal political committee.       C       Insurance Agent         Name of Employer (for Individual)       Occupation (for Individual) Insurance Agent       Insurance Agent         Receipt For:       Primary       General       Occupation (for Individual) Insurance Agent         Receipt For:       Primary       General       Other (specify) ▼       Aggregate Year-to-Date ▼         Primary       General       Other (specify) ▼       Aggregate Year-to-Date ▼       250,00         Full Name of Individual (Last, First, Middle Initial) or Full Organ	Mmm       /       D       /       2018         Transaction ID : PR790849862518         Amount of Each Receipt this Period         25.00         25.00         Memo Item					
City       State       Zip Code         NH       03258-6511         FEC ID number of contributing       C         ideral political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. WOOLMAN, GARY, BRUCE, ,         Mailing Address 10523 INDIAN RIDGE DR         City       State       Zip Code         FC ID number of contributing       C       46814-9090         FEC ID number of contributing       C       46814-9090         FEC ID number of contributing       C       1000000000000000000000000000000000000	10       17       2018         Transaction ID : PR790849862518         Amount of Each Receipt this Period       25.00         25.00       25.00         Memo Item         P/R Deduction (\$12.50 Bi-Weekly)         Date of Receipt         Memo / Dub / Yuryuy					
CHICHESTER       NH       03258-6511         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. WOOLMAN, GARY, BRUCE, ,         Mailing Address 10523 INDIAN RIDGE DR         City       State         FORT WAYNE       IN         46814-9090         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         SELF         Name of Employer (for Individual)         SELF         Name of Employer (for Individual)         Occupation (for Individual)         SELF         Name of Employer (for Individual)         SELF         Name of Employer (for Individual)         Occupation (for Individual)         Insurance Agent         Receipt For:         Other (specify) ▼         Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼         Aggregate Year-to-Da	Amount of Each Receipt this Period 25.00 Memo Item P/R Deduction (\$12.50 Bi-Weekly) Date of Receipt					
federal political committee.       C         Name of Employer (for Individual)       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. WOOLMAN, GARY, BRUCE, ,         Mailing Address 10523 INDIAN RIDGE DR         City       State         FORT WAYNE       IN         46814-9090         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         SELF         Name of Employer (for Individual)         Occupation (for Individual)         SELF         Name of Employer (for Individual)         SELF         Name of Employer (for Individual)         SELF         Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name	Memo Item P/R Deduction (\$12.50 Bi-Weekly) Date of Receipt					
SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       8.         WOOLMAN, GARY, BRUCE, ,       Mailing Address 10523 INDIAN RIDGE DR         City       State       Zip Code         FORT WAYNE       IN       46814-9090         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name	P/R Deduction (\$12.50 Bi-Weekly) Date of Receipt					
Primary       General         Other (specify)       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. WOOLMAN, GARY, BRUCE, ,         Mailing Address 10523 INDIAN RIDGE DR         City       State         FORT WAYNE         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         SELF         Name of Employer (for Individual)         SELF         Primary         General         Other (specify) ▼	Date of Receipt					
B.       WOOLMAN, GARY, BRUCE, ,         Mailing Address 10523 INDIAN RIDGE DR         City       State       Zip Code         FORT WAYNE       IN       46814-9090         FEC ID number of contributing federal political committee.       C       IN         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregatic Year-to-Date ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name	M M / D D / Y Y Y Y					
Mailing Address 10523 INDIAN RIDGE DR         City       State       Zip Code         FORT WAYNE       IN       46814-9090         FEC ID number of contributing federal political committee.       C       Indext Control         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       ✓         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name	M M / D D / Y Y Y Y					
FORT WAYNE       IN       46814-9090         FEC ID number of contributing federal political committee.       C       C         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General Other (specify) ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name	10 17 2018					
FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name	Transaction ID : PR790998662518					
federal political committee.       Image: Committee of the second	Amount of Each Receipt this Period					
SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name	25.00					
Primary       General         Other (specify) ▼       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name	Memo Item					
	P/R Deduction (\$12.50 Bi-Weekly)					
	Date of Receipt					
Mailing Address 3260 COX RD	10 / D D / Y Y Y Y 10 17 2018					
CityStateZip CodeLOUISVILLETN37777-3700	Transaction ID : PR791040062518 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	26.44					
Name of Employer (for Individual)Occupation (for Individual)SELFInsurance Agent	Memo Item					
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       247.09	P/R Deduction (\$13.22 Bi-Weekly)					
SUBTOTAL of Receipts This Page (optional)	76.44					

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16							
Any information copied from such Reports or for commercial purposes, other than usi	and Statements mang the name and a	L ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions the to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)	_									
Aassachusetts Mutual Life	Insurance Co	mpany Political Actior	n Committee							
A. SCHROEDER, MARY, JANE, ,		rganization Name	Date of Receipt							
Mailing Address 4740 ALTA CANYADA			10 / Y Y Y Y 10 17 2018							
City LA CANADA	State CA	Zip Code 91011-2027	Transaction ID : PR791115962518 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		50.00							
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)							
Full Name of Individual (Last, First, Mide B. NAGLE, David, L, MR.,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2219 Sarah Marks Ave.			10 17 2018							
City	State	Zip Code	Transaction ID : PR791148462518							
Charlotte	NC	28203-5755	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		15.38							
Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.98	P/R Deduction (\$15.38 Bi-Weekly)							
Full Name of Individual (Last, First, Mid C. Casineau, Susan, M, MS.,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3 Fernwood Dr			10 / Y Y Y Y 10 17 2018							
City Wilbraham	State MA	Zip Code 01095-1503	Transaction ID : PR791152562518 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		9.62							
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) very Leader	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	nal)		75.00							
TOTAL This Period (last page this line nu	mber only)									

FOR LINE NUMBER:

(check only one)

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TTEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life In	surance Co	mpany Political Action	Committee
A. Distribution and the second	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 591 Main St	State	Zip Code	10 17 2018
Concord	MA	01742-3303	Transaction ID : PR791165962518 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		19.23
Name of Employer (for Individual) Barings LLC		pation (for Individual) aging Director	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 403.83	P/R Deduction (\$19.23 Bi-Weekly)
Full Name of Individual (Last, First, Middle B. DILTS, MATTISON, A, ,	e Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 8025 LAKE SHORE DR	State	Zip Code	10 / D D / Y Y Y Y 2018
GARY	IN	46403-1339	Transaction ID : PR791177462518 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 292.90	P/R Deduction (\$15.00 Bi-Weekly)
Full Name of Individual (Last, First, Middle C. CHAMBERS, CRAIG, DOUGLA		rganization Name	Date of Receipt
Mailing Address 32565 SW JULIETTE DR			10 / Y Y Y Y 2018
City WILSONVILLE	State OR	Zip Code 97070-7402	Transaction ID : PR791183162518
		31010-1402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		69.88
Name of Employer (for Individual) SELF	Occu Brok	ipation (for Individual) er	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 460.22	P/R Deduction (\$34.94 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	)	•	119.11

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

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IТ			Use separate schedule(s) ((				(check only one)						
11	EMIZED RECEIPTS			category of the Summary Page		¥ 11a 13		11b 14	11c 15		12 16	17	
	ny information copied from such Reports and S for commercial purposes, other than using the					n for the		oose of	soliciting	g cont	tributio	ons	
	NAME OF COMMITTEE (In Full)												
	Massachusetts Mutual Life Insu	rance Co	ompany F	Political Action	Сс	ommitt	ee						
Α.	Full Name of Individual (Last, First, Middle Init SHAUGHNESSY, THOMAS, E., ,	ial) or Full O	rganization I	Name		Date of	f Re	ceipt					
	Mailing Address 4404 S ORANGE AVE # 7401	1				<sup>M</sup> 10	/	D D 17	/ Y	۲ 20	18	Ý	
	City BROKEN ARROW	State OK	Zip Coo 74011			Transaction ID : PR791185162518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) SELF		Occupation (for Individual) Insurance Agent										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	827.82		P/R Ded	uctio	on (\$55.	55 Bi-W	eekly)	)		
в.	Full Name of Individual (Last, First, Middle Init Collins, Stephen, K., ,	ial) or Full O	rganization I	Name		Date of	f Re	ceipt					
	Mailing Address 236 STANFORD DR						/	D D 17	/ Y	y 201	8	ŕ	
	City	State	Zip Coo		Transaction ID : PR791191562						2518		
	SAN ANTONIO	TX	78212	-2010	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C						555.57					
	Name of Employer (for Individual) SELF	Occupation (for Individual) General Agent				Memo Item							
	Receipt For:	Aggregate	Year-to-Date	• 🔻									
	Other (specify)		4	1388.87	P/R Deduction (\$555.57 Monthly)								
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Taylor, Douglas, W, MR.,	ial) or Full O	rganization I	Name		Date of	f Re	ceipt					
	Mailing Address 68 Northfield Road					<sup>M</sup> 10	/	D D 17	/ Y	201	8	Ŷ	
	City Longmeadow	State MA	Zip Coc 01106-		_				PR7911 eceipt th			_	
	FEC ID number of contributing federal political committee.	С						9	, j		26.92	2	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for President &	Individual) Appointed Actuary		М	emo	Item					
	Receipt For: Primary General Other (specify)	Year-to-Date	P/R Ded					P/R Deduction (\$26.92 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)							7	, ,	(	693.59	)	

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

FEC Schedule A (Form 3X) Rev. 06/2016

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FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$					
	y information copied from such Reports and St for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee					
Α.	Full Name of Individual (Last, First, Middle Initi Waterman, Robert, C, MR., Mailing Address 5 Drury Ln	al) or Full C	Organization Name	Date of Receipt					
	<u></u>	Ctoto	Zin Codo	10 17 2018					
	City Longmeadow	State MA	Zip Code 01106-3209	Transaction ID : PR791195562518 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) P Business Operations	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 323.40	P/R Deduction (\$15.40 Bi-Weekly)					
в.	Full Name of Individual (Last, First, Middle Initi Goldberg, Andrew, M, MR.,	al) or Full C	Organization Name	Date of Receipt					
	Mailing Address 172 Captain Rd	Ototo	Zin Oode	10 / D D / Y Y Y Y 10 17 2018					
	City Longmeadow	State MA	Zip Code 01106-2546	Transaction ID : PR791207062518 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С							
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		cupation (for Individual) P & Counsel	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.98	P/R Deduction (\$15.38 Bi-Weekly)					
С.	Full Name of Individual (Last, First, Middle Initi GOETZ, ADAM, , ,	al) or Full C	Organization Name	Date of Receipt					
	Mailing Address 604 QUINCY LANE			10 / D D / Y Y Y Y Y 2018					
	City WEXFORD	State PA	Zip Code 15090-6836	Transaction ID : PR791213162518 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		64.70					
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 590.59	P/R Deduction (\$32.35 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)		••••••	95.48					
Г	OTAL This Period (last page this line number o	nly)		1 1 7 1 1 7 1 1 <b>T</b>					

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170			Use separate schedule(s)	(check only one)									
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a		11b	11c		2	17			
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe ddress of any political committee	rson for the	e pur	pose of	soliciting	cont	ributio	ons			
	NAME OF COMMITTEE (In Full)												
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee								
Α.	Full Name of Individual (Last, First, Middle Initi DEBOER, BRUCE, A, ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 6839 RIDGEWOOD TRL			10	M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M       M								
	City TOLEDO	State OH	Zip Code 43617-1181										
	FEC ID number of contributing federal political committee.	С							70.58	3			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Vemo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 658.85	P/R De	ducti	on (\$35.:	29 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Initi WRIGHT, DARREN, J, ,	al) or Full O	rganization Name	Date of	of Re	eceipt							
	Mailing Address 6020 E CALLE DEL MEDIA			M 10		D D 17	/ Y	201	8 8				
	City	State	Zip Code	Tran	sacti	ion ID :	PR79122	21262	518				
	SCOTTSDALE	AZ	85251-3018	Amour	nt of	Each R	eceipt th	is Pe	riod				
	FEC ID number of contributing federal political committee.	C			83.30								
	Name of Employer (for Individual) SELF	Occi Insu	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.43	P/R Deduction (\$41.65 Bi-Weekly)									
с.	Full Name of Individual (Last, First, Middle Initi CLAYSON, MATTHEW, A, ,	al) or Full O	rganization Name	Date of	of Re	eceipt							
	Mailing Address 167 TOWER AVE			M 10		D D D 17	/ Y	201					
	City NEEDHAM HEIGHTS	State MA	Zip Code 02494-1945				PR79124 eceipt th						
	FEC ID number of contributing federal political committee.	С				, .	y		25.00	)			
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Memo	o Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)									
s	UBTOTAL of Receipts This Page (optional)		•			, .	5	1	178.88	3			
т	OTAL This Period (last page this line number o	nly)							-				

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)						
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Cor	mpany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Initia BIRD, JULIE, L, , Mailing Address 2273 E CONTINENTAL #120	al) or Full Or	ganization Name	Date of Receipt						
	City SOUTHLAKE	State TX	Zip Code 76092-9799	10     17     2018       Transaction ID : PR791255862518       Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С								
	Name of Employer (for Individual) SELF		pation (for Individual) ance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate N	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia Milka, Terrence, , MR.,	al) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 10 Woods Ln			10 / Y Y Y Y Y 2018						
	City Simsbury	State CT	Zip Code 06070-2441	Transaction ID : PR791279362518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		15.38						
	Name of Employer (for Individual) MassMutual Trust Company, FSB		pation (for Individual) and VP Trust Company	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322,98	P/R Deduction (\$15.38 Bi-Weekly)						
с.	Full Name of Individual (Last, First, Middle Initia _DOWD, Christopher, P, MR.,	al) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 35 Sunset Ter			10 / D D / Y Y Y Y Y 10 17 2018						
	City West Hartford	State CT	Zip Code 06107-2737	Transaction ID : PR791281162518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		19.23						
	Name of Employer (for Individual) Barings LLC Receipt For:	Mana	pation (for Individual) aging Director	Memo Item						
	Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 403.83	P/R Deduction (\$19.23 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			84.61						
Т	OTAL This Period (last page this line number o	nly)								

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17			Use separate schedule(s)	(check only one)							
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗     11a     11b     11c     12       13     14     15     16     17							
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions							
$\left[ \right]$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee							
Α.	Full Name of Individual (Last, First, Middle Init WOOD, GREG, PAUL, ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 1249 E 26TH ST			10 / Y Y Y Y 10 17 2018							
	City TULSA	State OK	Zip Code 74114-2603	Transaction ID : PR791295762518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		83.30							
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.43	P/R Deduction (\$41.65 Bi-Weekly)							
В.	Full Name of Individual (Last, First, Middle Init Lacomb, Kevin, , MR.,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 39 Christian Hill Rd			10 17 2018							
	City	State	Zip Code	Transaction ID : PR791326662518							
	Higganum	СТ	06441-4031	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		26.95							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) Tax Planning and Strategy	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.95	P/R Deduction (\$26.95 Bi-Weekly)							
— C.	Full Name of Individual (Last, First, Middle Init Casiello, Christina, A, MS.,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 63 Hillside Dr			10 17 2018							
	City E Longmeadow	State MA	Zip Code 01028-2505	Transaction ID : PR791327362518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		9.61							
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) m Director	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 201.81	P/R Deduction (\$9.61 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			119.86							
Т	OTAL This Period (last page this line number of	only)									

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ודרי			Use separate schedule(s)	(check only one)								
	MIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c	12	Г	17			
Any or fo	information copied from such Reports and Sta r commercial purposes, other than using the r	atements maname and a	l ay not be sold or used by any pe ddress of any political committee	rson for the	purpose of	soliciting	contril	butio	ns			
<u> </u>	AME OF COMMITTEE (In Full)											
	Assachusetts Mutual Life Insur	ance Co	mpany Political Action	Committ	ee							
	ull Name of Individual (Last, First, Middle Initia HASLAM III, JOHN, H, , III	al) or Full O	rganization Name	Date of Receipt								
_	ailing Address 125 GOETTE TRL			10	/ D 17		2018		]			
	ity AVANNAH	State GA	Zip Code 31410-1056		Transaction ID : PR791343062518 Amount of Each Receipt this Period							
	EC ID number of contributing deral political committee.	C					4	6.14				
S	ame of Employer (for Individual) ELF		upation (for Individual) Irance Agent	M	lemo Item							
	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 407.75	P/R Dec	duction (\$23	.07 Bi-We	ekly)					
	ull Name of Individual (Last, First, Middle Initia Chicares, Elizabeth, , MS.,	al) or Full O	rganization Name	Date of Receipt								
M	ailing Address 186 Belle Woods Dr			M M 10	/ D 17		2018	Ý	]			
	ity	State	Zip Code	Trans	action ID :	PR79135	517625 <sup>,</sup>	18	_			
G	lastonbury	СТ	06033-1667	Amoun	t of Each F	Receipt th	is Perio	bc				
	EC ID number of contributing deral political committee.	С					9	6.16				
	ame of Employer (for Individual) assachusetts Mutual Life Insurance Co	Occupation (for Individual) EVP - CFO & Chief Actuary			Memo Item							
R	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2019.36	P/R Deduction (\$96.16 Bi-Weekly)								
	ull Name of Individual (Last, First, Middle Initia JOHNSON, JOHN, ANTHONY, ,	al) or Full O	rganization Name	Date o	f Receipt							
Μ	ailing Address 1 WILLOW RIDGE RD			10 <sup>M</sup>	/ D 17		2018		]			
	ity BAYVILLE	State NY	Zip Code 11709-3010		saction ID : t of Each F			-				
	EC ID number of contributing deral political committee.	С			, <u>,</u> ,	. ,	2	25.00				
S	ame of Employer (for Individual) ELF		upation (for Individual) rance Agent		lemo Item							
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)								
SUE	<b>BTOTAL</b> of Receipts This Page (optional)		•	Γ.	, ,	. ,	16	7.30				
тот	TAL This Period (last page this line number of	nly)	•			-		-				

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one)       X     11a       11b     11c       12       13     14       15     16       17						
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements mana and a	ay not be sold or used by any pound any pound by any pound by any political committee	erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Initi DEFRANCIS, Christopher, , MR.,	al) or Full C	organization Name	Date of Receipt						
	Mailing Address 41 Maynard Rd			10 / D D / Y Y Y Y Y 10 17 2018						
	City Northampton	State MA	Zip Code 01060-2809	Transaction ID : PR791365062518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		57.70						
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1211.70	P/R Deduction (\$57.70 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initi HUTCHESON, Matthew, Dean, ,	al) or Full C	organization Name	Date of Receipt						
	Mailing Address 903 S WILSON BLVD			10 / Y Y Y Y 2018						
	City NASHVILLE	State TN	Zip Code 37215-1041	Transaction ID : PR791374762518						
	FEC ID number of contributing federal political committee.	С	37213-1041	Amount of Each Receipt this Period						
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	P/R Deduction (\$133.33 Monthly)						
с.	Full Name of Individual (Last, First, Middle Initi BRINKMAN, NATHAN, G, ,	al) or Full C	organization Name	Date of Receipt						
	Mailing Address 9217 EAGLEWOOD DR			10 / D D / Y Y Y Y 2018						
	City VERONA	State WI	Zip Code 53593-7803	Transaction ID : PR791379562518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		25.00						
	Name of Employer (for Individual)		upation (for Individual) rance Agent	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)						
s	UBTOTAL of Receipts This Page (optional)			216.03						
т	OTAL This Period (last page this line number o	nly)	•							

FOR LINE NUMBER:

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170			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c	12	Г	17			
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the	purpose	of solicitin	g contri	ibutio	ns			
<u>,</u>	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee							
Α.	Full Name of Individual (Last, First, Middle Initi BALINT, WILLIAM, F, ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 21 ELMCREST DR			M N 10	/ D	D / Y 17	2018	ү ү 8	]			
	City CHICOPEE	State MA	Zip Code 01013-3300	Transaction ID : PR791395262518 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С				· · ·	ę	50.00				
	Name of Employer (for Individual) SELF	Occu Broł	upation (for Individual) ker	N	lemo Iter	m						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Dec	duction (S	\$25.00 Bi-W	eekly)					
в.	Full Name of Individual (Last, First, Middle Init HILL, RYAN, M, ,	ial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 1426 AUTUMNMIST DR			M N 10	/ D	17 / Y	2018		]			
	City	State	Zip Code			D : PR7914						
	ALLEN	TX	75002-4956	Amour	nt of Eac	h Receipt t	nis Peri	iod				
	FEC ID number of contributing federal political committee.	C			44.58							
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 410.83	P/R Deduction (\$22.29 Bi-Weekly)								
с.	Full Name of Individual (Last, First, Middle Initi CARROCCIO, HOLLY, BROWN, ,		rganization Name	Date c	of Receip	t						
	Mailing Address 2101 MAPLE LEAF DR			M N 10	/ D	D / Y 17	2018		1			
	City PLANO	State TX	Zip Code 75075-3112			I <b>D : PR7914</b> h Receipt tl						
	FEC ID number of contributing federal political committee.	С						50.00				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo Ite	m						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•		. ,	,	14	44.58				
Т	OTAL This Period (last page this line number of	only)	••••••					-				

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#### SCHEDULE A (FEC Form 3X) \_\_\_\_\_

FOR LINE NUMBER:

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IТ	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
11			for each category of the Detailed Summary Page	<b>X</b> 11a 13	11b	11c 15	12 16	17			
	y information copied from such Reports and S for commercial purposes, other than using the			son for the	purpose of	soliciting	contribu	itions			
$\setminus$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committ	ee						
Α.	Full Name of Individual (Last, First, Middle Init WEHR, JAMES, MICHAEL, ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 17485 FRANCIS FARM PL			M M 10	/ D D 17	/ Y	ү 2018	Ŷ			
	City HAMILTON	State VA	Zip Code 20158-3461		action ID : t of Each R						
	FEC ID number of contributing federal political committee.	С			-	-	50.	.00			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	M	emo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Ded	uction (\$25.	00 Bi-We	ekly)				
B.	Full Name of Individual (Last, First, Middle Inite Roether, Daniel, G., ,	tial) or Full O	rganization Name	Date of	Receipt						
	Mailing Address 7015 N 23RD PL			10	/ D D 17	/ Y	ү ү 2018	Ŷ			
	City PHOENIX	State AZ	Zip Code		action ID :						
		AZ.	85020-5615	Amount	t of Each R	eceipt th	is Period	1			
	FEC ID number of contributing federal political committee.	С		133.33							
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.33	P/R Deduction (\$133.33 Monthly)							
	Full Name of Individual (Last, First, Middle Ini	tial) or Full O	rganization Name								
C.	ROMAN, RICHARD, WAYNE, , Mailing Address 594 FAIRWAY DR			M M	Receipt	/ Y	Y Y	Y			
	City	State	Zip Code	10 Trans	17 action ID :	PR79143	2018 5262518	R			
	NOVATO	CA	94949-5837		t of Each R			-			
	FEC ID number of contributing federal political committee.	С			 	.,	25.				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	М	emo Item						
	Receipt For:		Year-to-Date ▼	1							
	Primary General Other (specify)		250.00	P/R Deduction (\$12.50 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•		, , , , , ,	- y	208.	33			

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

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)       Image: 11 transform       11 transf				
	y information copied from such Reports and Sta for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Committee				
Α.	Full Name of Individual (Last, First, Middle Initia HEIDT, JAMES, MASON, ,	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 836 MERRIWEATHER DR	Chata	Zin Oode	10 / D D / Y Y Y Y 10 17 2018				
	City SAVANNAH	State GA	Zip Code 31406-3219	Transaction ID : PR791496662518 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		33.30				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item				
	Receipt For: Primary General Other (specify) ▼	I	Year-to-Date ▼ 233.41	P/R Deduction (\$16.65 Bi-Weekly)				
R	Full Name of Individual (Last, First, Middle Initia Rogers, Susan, , MS.,	al) or Full O	rganization Name	Date of Receipt				
0.	Mailing Address 32 Pleasant View Rd			10 / 17 2018				
	City Wilbraham	State MA	Zip Code 01095-2756	Transaction ID : PR791510462518 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		9,62				
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) tegic Consultant	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)				
<u> </u>	Full Name of Individual (Last, First, Middle Initia MORRISON, Russell, D, MR.,	al) or Full O	rganization Name	Date of Receipt				
	Mailing Address 5419 Gorham Dr			10 / Y Y Y Y 10 17 2018				
	City Charlotte	State NC	Zip Code 28226-6411	Transaction ID : PR791511162518 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		26.92				
	Name of Employer (for Individual) Barings LLC		ipation (for Individual) aging Director	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 565.32	P/R Deduction (\$26.92 Bi-Weekly)				
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o			69.84				

FOR LINE NUMBER:

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IT.			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 13		1b	11c 15	12	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any per address of any political committee	son for the	purpo	se of so	liciting	contribu	tions		
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Init FINKE, Thomas, M, MR.,	ial) or Full O	Organization Name	Date of Receipt							
	Mailing Address 4920 Hardison Rd			10	/	D D 17	/ Y	ү ү 2018	Y		
	City Charlotte	State NC	Zip Code 28226-6418	Transaction ID : PR791511962518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С						192.	30		
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	M	lemo It	em					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4038.30	P/R Dec	duction	(\$192.3	0 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Init Gallop, Mark, , MR.,	ial) or Full O	Organization Name	Date of Receipt							
	Mailing Address 157 Fairway Xing			M M 10	1	D D 17	/ Y	y y 2018	Y		
	City	State	Zip Code	Trans	saction	ID : PR	791513	3762518			
	Glastonbury	СТ	06033-1468	Amoun	nt of Ea	ach Rec	eipt this	Period			
	FEC ID number of contributing federal political committee.	С		38.50							
	Name of Employer (for Individual) MASSMUTUAL INTERNATIONAL		upation (for Individual) hior Managing Director - MMI	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 808.50	P/R Deduction (\$38.50 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Init DAMERON, JOHN, S, ,	ial) or Full O	Organization Name	Date o	of Rece	ipt					
	Mailing Address 5306 ALLISON LN			10 <sup>M</sup>	1	D D 17	/ Y	2018	Y		
	City CHARLOTTE	State NC	Zip Code 28277-2609			n <b>ID : PF</b> ach Rec					
	FEC ID number of contributing federal political committee.	С			. y		y	25.	00		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		1emo It	em					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)				. ,		9	255.	80		
Т	OTAL This Period (last page this line number of	only)	•••••								
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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one)       X     11a       11b     11c       12       13     14       15     16       17				
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee				
Α.	Full Name of Individual (Last, First, Middle Initia Waterman, Karen, , MS.,	al) or Full (	Drganization Name	Date of Receipt				
	Mailing Address 5 Drury Ln	State	Zip Code	10 17 2018				
	Longmeadow	MA	01106-3209	Transaction ID : PR791541062518           Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		11.55				
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		cupation (for Individual) ategic Consultant	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	P Year-to-Date ▼ 242.55	P/R Deduction (\$11.55 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Initia Murtagh, Gary, , MR.,	al) or Full C	Drganization Name	Date of Receipt				
	Mailing Address 5609 Lands End Ct			10 / Y Y Y Y Y 10 17 2018				
	City Wilmington	State NC	Zip Code 28409-2377	Transaction ID : PR791542662518				
	FEC ID number of contributing federal political committee.	С	20405-2317	Amount of Each Receipt this Period				
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		cupation (for Individual) & Assistant General Counsel	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)				
с.	Full Name of Individual (Last, First, Middle Initia THOMPSON, Paul, , MR.,	al) or Full C	Drganization Name	Date of Receipt				
	Mailing Address 189 Mayfair Rd			10 / D D / Y Y Y Y 10 17 2018				
	City Mooresville	State NC	Zip Code 28117-6022	Transaction ID : PR791591462518           Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		57.70				
	Name of Employer (for Individual) Barings LLC		cupation (for Individual) naging Director	Memo Item				
	Receipt For:	Aggregate	e Year-to-Date ▼ 1163.63	P/R Deduction (\$57.70 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)			78.87				
т	OTAL This Period (last page this line number o	nly)	•					

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17						
Any information copied from such Reports an	nd Statements ma	Ay not be sold or used by any p ddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Massachusetts Mutual Life Ir	nsurance Co	mpany Political Action	Committee						
Full Name of Individual (Last, First, Middle A. Goldstein, Richard, , MR.,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 197 Lynnwood Dr			10 17 Y Y Y Y Y 2018						
City Longmeadow	State MA	Zip Code 01106-2013	Transaction ID : PR791591662518 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.46						
Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) President - HR Operations	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.66	P/R Deduction (\$38.46 Bi-Weekly)						
Full Name of Individual (Last, First, Middle B. BAVARO, Paul, A., ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6022 LAS COLINAS CIR			10 / Y Y Y Y 10 17 2018						
City	State FL	Zip Code	Transaction ID : PR791594062518						
	FL	33463-6560	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		133.33						
Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.33	P/R Deduction (\$133.33 Monthly)						
Full Name of Individual (Last, First, Middle C. SAPERSTEIN, JOEL, W, ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 708 WINDSWEPT LN			10 / D D / Y Y Y Y 10 17 2018						
City FRANKLIN LAKES	State NJ	Zip Code 07417-1431	Transaction ID : PR791610262518 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		25.00						
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional	)		196.79						
TOTAL This Period (last page this line num	ber only)								

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IT.			Use separate schedule(s)	(check only one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗     11a     11b     11c     12       13     14     15     16     17						
	y information copied from such Reports and Si for commercial purposes, other than using the			rson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)		,,							
$\left \right\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Init BOUDREAU, Lawrence, , MR.,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 39 Riverview Dr			10 / Y Y Y Y 10 17 2018						
	City Suffield	State CT	Zip Code 06078-1419	Transaction ID : PR791623462518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		15.38						
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 322.98	P/R Deduction (\$15.38 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Init CONLON, KEVIN, J., ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 584 HADDON LN			10 / Y Y Y Y 10 17 2018						
		State NY	Zip Code	Transaction ID : PR791626662518						
	EAST MEADOW	INI	11554-4714	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		33.40						
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 233,22	P/R Deduction (\$16.70 Bi-Weekly)						
<u>с</u> .	Full Name of Individual (Last, First, Middle Init FIKES, DONOVAN, C, ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 8460 NOBLE LARK DR			10 / Y Y Y Y 10 17 2018						
	City BOERNE	State TX	Zip Code 78015-4440	Transaction ID : PR791766462518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		25.00						
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)						
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		<b>r</b>	73.78						

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118				ch category of the ed Summary Page	×	-	11		11c	12	<b></b>	
An	y information copied from such Reports and S	tatements ma	ay not be	sold or used by any pe	erson f	0r the	urpos	e of so	15 Diciting	contribu	tions	
<u> </u>	for commercial purposes, other than using the	name and a	ddress of	any political committee	e to sol	licit cor	ntributio	ons fror	m such	commit	tee.	
$\rangle$	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insu	rance Co	ompany	Political Action	Con	nmitte	ee					
Α.	Full Name of Individual (Last, First, Middle Init Ferrari, Gwendolyn, , MS.,	tial) or Full O	rganizatic	n Name	[	Date of	Recei	pt				
	Mailing Address 1511 Canyon Ridge Dr					10 17 2018						
	City Broad Brook	State CT	Zip ( 06	Code 016-5610						6462518 s Perioc		
	FEC ID number of contributing federal political committee.	С					-		- <b>1</b> 9-	9	.61	
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (f	or Individual) nce		Me	emo Ite	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-D	ate ▼ 201.81	P	/R Ded	uction	(\$9.61 E	Bi-Weel	kly)		
В.	Full Name of Individual (Last, First, Middle Init Block, Mary, S, MS.,	tial) or Full O	rganizatic	n Name		Date of	Recei	pt				
	Mailing Address 67 Pershing Rd							17	/ Y	ү ү 2018	Ŷ	
	City Windsor Locks	State     Zip Code       CT     06096-2122								4462518		
	FEC ID number of contributing federal political committee.					Amount of Each Receipt this Period 38.46						
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.	Occupation (for Individual) VP & Assistant General Counsel				Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-D	ate ▼ 807.66	P/	'R Dedi	uction (	\$38.46	Bi-Wee	ekly)		
	Full Name of Individual (Last, First, Middle Init Silvanic, William, , MR.,	tial) or Full O	rganizatic	n Name	[	Date of	Recei	pt				
	Mailing Address 120 Creamery Hill Rd					<sup>M</sup> 10	ΙL	17		2018	_	
	City Granby	State CT	Zip ( 060	Code 35-1702	<i>F</i>					0462518 s Perioc	-	
	FEC ID number of contributing federal political committee.	С					, ,		g	38	.46	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Occupation (for Individual) SVP - Product & Marketing					emo Ite	əm				
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 807.66					uction	(\$38.46	8 Bi-We	ekly)		
s	UBTOTAL of Receipts This Page (optional)			•••••		_			9	86.	53	

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)       Image: Mark 11 a mark 11 b mark 11 c mark 12 mark 13 mark 12 mark 15 mark 16 mark 17 mark 13 mark 12 mar						
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and ac	y not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Committee						
Α.	Full Name of Individual (Last, First, Middle Initi Tenny, Shane, , , Mailing Address 8317 PRINCE GEORGE RD	al) or Full Or	ganization Name	Date of Receipt						
	City	State	Zip Code	10 17 2018 Transaction ID : PR791822962518						
	CHARLOTTE	NC	28210-4229	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		133.33						
	Name of Employer (for Individual) SELF		pation (for Individual) rance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 333.33	P/R Deduction (\$133.33 Monthly)						
в.	Full Name of Individual (Last, First, Middle Initi $HOLEC,DALE,T,,$	al) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 2590 W RIDGE RD			10 17 Y Y Y Y 2018						
	City	State	Zip Code	Transaction ID : PR791825162518						
	GLADWIN	MI	48624-9701	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		12.50						
	Name of Employer (for Individual) SELF		ipation (for Individual) rance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 237.50	P/R Deduction (\$12.50 Semi-Monthly)						
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi MILLER, STEVEN, A, ,	al) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 10797 EAGLE CREST LN			10 / Y Y Y Y 10 17 2018						
	City PARKER	State CO	Zip Code 80138-3070	Transaction ID : PR791864262518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С								
	Name of Employer (for Individual) SELF		pation (for Individual) ance Agent	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)						
F	UBTOTAL of Receipts This Page (optional)		· ·	170.83						
11	OTAL This Period (last page this line number o	niiy)	••••••							

FEC Schedule A (Form 3X) Rev. 06/2016

FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)       Image: 11 transform       11 transf				
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements m name and a	hay not be sold or used by any pe address of any political committee	erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Committee				
Α.	Full Name of Individual (Last, First, Middle Initi Gamache, Shannon, , MS., Mailing Address 57 Laurel Ln	al) or Full C	Organization Name	Date of Receipt				
	City Columbia	State CT	Zip Code 06237-1013	10     17     2018       Transaction ID : PR791870762518       Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		9.62				
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		cupation (for Individual) 'P & Counsel	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 202.02	P/R Deduction (\$9.62 Bi-Weekly)				
в.	Full Name of Individual (Last, First, Middle Initi KNOTTS, JANN, G, ,	al) or Full C	Organization Name	Date of Receipt				
	Mailing Address 7301 E HWY 9	State	Zip Code	10 / D / Y Y Y 10 17 2018				
	NORMAN	OK	73026-3966	Transaction ID : PR791880362518 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		31.26				
	Name of Employer (for Individual) SELF		cupation (for Individual) surance Agent	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 237.51	P/R Deduction (\$15.63 Bi-Weekly)				
с.	Full Name of Individual (Last, First, Middle Initi KIM, JONGSIK, , ,	al) or Full C	Organization Name	Date of Receipt				
	Mailing Address 4536 WILSHIRE BLVD #4	State	Zin Oodo	10 / 17 / 2018				
	City LOS ANGELES	CA	Zip Code 90010-3836	Transaction ID : PR791881862518 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		30.00				
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 292.90	P/R Deduction (\$15.00 Bi-Weekly)				
s	UBTOTAL of Receipts This Page (optional)		•	70.88				
т	OTAL This Period (last page this line number o	nly)	•••••					

# SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

# Use separate schedule(s)

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	LIVIZED RECEIPTS		for each category of the Detailed Summary Page	<b>★</b> 11a 11b 11c 12							
			Detailed Summary Page	13 14 15 16 17							
An or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee							
۱.	Full Name of Individual (Last, First, Middle Init ABOWD, ERIC, STEVEN, ,		rganization Name	Date of Receipt							
	Mailing Address 9900 WILBUR MAY PKWY AF			10 / D D / Y Y Y Y 10 17 2018							
	City	State NV	Zip Code	Transaction ID : PR791913762518							
	RENO		89521-3087	_ Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		83.32							
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item							
	Receipt For:		Year-to-Date ▼								
	Primary General Other (specify) ▼	Aggregate	833.37	P/R Deduction (\$41.66 Bi-Weekly)							
	Full Name of Individual (Last, First, Middle Init WALLACE, Linda, Lea, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name WALLACE, Linda, Lea, ,									
	Mailing Address 290 CORONA AVE	Date of Receipt 10 17 2018									
	City	State	Zip Code	Transaction ID : PR791914562518							
	LONG BEACH	CA	90803-1821	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		33.33							
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 233.33	P/R Deduction (\$33.33 Monthly)							
	Full Name of Individual (Last, First, Middle Init Dias, Amy, , MS.,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 120 Cislak Dr			10 17 2018							
	City	State	Zip Code	Transaction ID : PR791926962518							
	Ludlow	MA	01056-1546	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		38.50							
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) d of HR Consulting & Talent Dev	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 820.50	P/R Deduction (\$38.50 Bi-Weekly)							
	JBTOTAL of Receipts This Page (optional)		F	155.15							

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>★</b> 11a 11b 11c 12						
Any information copied from such Reports and or for commercial purposes, other than using t									
NAME OF COMMITTEE (In Full)									
Massachusetts Mutual Life Ins	surance Co	mpany Political Action	Committee						
Full Name of Individual (Last, First, Middle   BOWLING, FRANK, FERRELL, ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1130 SUNSET DR	-		10 / Y Y Y Y 10 17 2018						
City GALLATIN	State TN	Zip Code 37066-5736	Transaction ID : PR791932962518           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		25.00						
Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I B. KYLE, THOMAS, HARLAN, ,	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 407 W ALTA VISTA ST			M M / D D / Y Y Y Y 10 17 2018						
City SHERMAN	State TX	Zip Code 75092-2626	Transaction ID : PR791934062518 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		33.94						
Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 232.15	P/R Deduction (\$16.97 Bi-Weekly)						
Full Name of Individual (Last, First, Middle I C. Monroe Jr, William, F, MR., Jr	nitial) or Full C	rganization Name	Date of Receipt						
Mailing Address 225 General Hobbs Rd			10 / D D / Y Y Y Y Y 10 17 2018						
City Jefferson	State MA	Zip Code 01522-1565	Transaction ID : PR791969162518         Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.47						
Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) President - MMLISI	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 807.87	P/R Deduction (\$38.47 Bi-Weekly)						
SUBTOTAL of Receipts This Page (optional)			. 97.41						
TOTAL This Period (last page this line number	er only)								

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ıт		Use separate schedule(s)				(check only one)						
	EMIZED RECEIPTS			or each category of the etailed Summary Page		<b>४</b> 11a 13		11b 14	11c		12 16	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay no .ddre	ot be sold or used by any pe ss of any political committee	ersor to s	n for the solicit co	pur pur	pose of outions f	solicitir	ng coi ch co	ntributi mmitte	ions e.
$\square$	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insur	ance Co	mp	any Political Action	Со	ommit	tee					
Α.	Full Name of Individual (Last, First, Middle Initia JORDAN, William, , MR.,	al) or Full O	rgan	ization Name		Date of Receipt						
	Mailing Address 25 Harvest Hill Rd					10 / Y Y Y Y 10 17 2018						
	City West Simsbury	State CT		Zip Code 06092-2224				ion ID : Each F				
	FEC ID number of contributing federal political committee.	С						- <b>J</b> -			10.0	0
	Name of Employer (for Individual) Barings LLC		•	on (for Individual) g Director		N	lemo	o Item				
	Receipt For: Primary General	Aggregate	Year	-to-Date ▼		P/R Dec	ducti	on (\$10	00 Bi-V	Vookh	V)	
	Other (specify) V		-	210.00		T // Doc	2000	οπ (φτο	.00 Di V	veeni	*)	
в.	Full Name of Individual (Last, First, Middle Initia Morris, Maureen, , MS.,	al) or Full O	rgan	ization Name		Date o	of Re	eceipt				
	Mailing Address 10 Woodland PI					10 <sup>M</sup>	/	D D D D 17			)18	Y
	City	ty State				Trans	sact	ion ID :	PR791	96946	32518	_
	Ludlow	MA		01056-1680		Amoun	nt of	Each R	leceipt	this P	'eriod	
	FEC ID number of contributing federal political committee.	C					11.54					
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Occupation (for Individual) AVP Treasury					Memo Item					
	Receipt For:	Aggregate	Year	r-to-Date ▼								
	Other (specify) ▼		,	242.34		P/R Deduction (\$11.54 Bi-Weekly)						
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Thomas, Frances, , MS.,	al) or Full O	rgan	ization Name		Date o	of Re	eceipt				
	Mailing Address 1109 Roxboro Dr NE					10 <sup>M</sup>	/	D D D D D D D D D D D D D D D D D D D			) 18	Y
	City Atlanta	State GA		Zip Code 30324-2912				ion ID :				
				50524-2912	-	Amoun	nt of	Each F	leceipt	this P	'eriod	
	FEC ID number of contributing federal political committee.	С				Ľ.	_	y			9.6	5
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co	Occu AVP		on (for Individual) es		N	/lemo	o Item				
	Receipt For:	Aggregate	Year	-to-Date ▼			ducti	on (¢0 6		ookhv	<b>`</b>	
	Other (specify)		-	202.65	P/R Deduction (\$9.65 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)			••••••				<b>y</b>	. ,		31.1	9
Т	OTAL This Period (last page this line number o	nly)		••••••	-							

# SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

# Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		Detailed Summary Page	<b>X</b> 11a 11b 11c 12						
			13 14 15 16 17						
Any information copied from such Report or for commercial purposes, other than	orts and Statements ma using the name and a	ay not be sold or used by any pe ddress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Aassachusetts Mutual Li	fe Insurance Co	mpany Political Action	Committee						
Full Name of Individual (Last, First, CONANT, JAMES, ARTHUR, ,	Middle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 1120 UNIVERSITY	DR NE		10 17 Y Y Y Y 10 17						
City	State	Zip Code	Transaction ID : PR792024062518						
ATLANTA	GA	30306-3317	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		35.72						
Name of Employer (for Individual) SELF	Occ Bro	upation (for Individual) ker	Memo Item						
Receipt For:		Year-to-Date ▼							
Primary General Other (specify) ▼		228.58	P/R Deduction (\$17.86 Bi-Weekly)						
Full Name of Individual (Last, First, B. HOUSTON, Linda, C, MS.,									
Mailing Address 321 Merrimac St			10 17 2018						
City	State	Zip Code	Transaction ID : PR792038762518						
Newburyport	MA	01950-2033	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		26.95						
Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.95	P/R Deduction (\$26.95 Bi-Weekly)						
Full Name of Individual (Last, First, C. BOUCHARD, JANINE, M,		rganization Name	Date of Receipt						
Mailing Address 34 L ST			10 / Y Y Y Y 10 17 2018						
City	State	Zip Code	Transaction ID : PR792053362518						
HULL	MA	02045-1706	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		25.00						
Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)						
SUBTOTAL of Receipts This Page (op TOTAL This Period (last page this line	,	, , , , , , , , , , , , , , , , , , ,	87.67						

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17			Use separate schedule(s)	(check on	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c	12	17				
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any pe ddress of any political committee	rson for the	purpose of	soliciting	contrib	utions				
	NAME OF COMMITTEE (In Full)											
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	ee							
Α.	Full Name of Individual (Last, First, Middle Initi KIMPEL, COLIN, W, ,	ial) or Full O	rganization Name	Date o	f Receipt							
	Mailing Address 6201 WALHONDING RD			10	10 17 2018							
	City BETHESDA	State MD	Zip Code 20816-2138		saction ID : t of Each F							
	FEC ID number of contributing federal political committee.	С					50	0.00				
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	M	lemo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Dec	duction (\$25	.00 Bi-We	eekly)					
в.	Full Name of Individual (Last, First, Middle Initi HARTMAN, Jonathan, , ,	ial) or Full O	rganization Name	Date o	f Receipt							
	Mailing Address 14806 MCCORMICK ST			10	/ D [	) / Y	2018	Y				
	City	State	Zip Code		action ID :							
	SHERMAN OAKS	CA	91411-4032	Amoun	t of Each F	Receipt th	is Perio	d				
	FEC ID number of contributing federal political committee.	С		111.07								
	Name of Employer (for Individual) SELF	Occi Brol	upation (for Individual) ker	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 277.87	P/R Deduction (\$111.07 Monthly)								
с.	Full Name of Individual (Last, First, Middle Initi CHOWDHRY, ASHISH, M, ,	ial) or Full O	rganization Name	Date o	f Receipt							
	Mailing Address 2 2ND ST APT 3306			10	M M / D D / Y Y Y Y Y							
	City JERSEY CITY	State NJ	Zip Code 07302-7025		saction ID : t of Each F							
	FEC ID number of contributing federal political committee.	С			y	, y	33	3.32				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 333.37	P/R Deduction (\$16.66 Bi-Weekly)								
s	UBTOTAL of Receipts This Page (optional)		•		. , .	. ,	194	1.39				
Т	OTAL This Period (last page this line number of	only)	•									

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ITEMIZED RECEIPTS       to each category of the Deteiled summary Page       Ita i	17			Use separate schedule(s)	(check on	(check only one)						
any information copied from such Reports and Statements may not be exide viewed by any person for the purpose of colloting controlutions from such committee.         NAME_CC COMMITTEE (in Full)         Massachusetts Mutual Life Insurance Company Political Action Committee         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. SNOCK, George, A., Malling Address 502 SARAH CT         City       State         City       State         Mailing Address 502 SARAH CT         City       State         City       State         Machael Company       Political Actions Company         Piel Name of Employer (for Individual)       Company         State       Company         Piel Name of Individual (Last, First, Middle Initial) or Full Organization Name       Aggregate Vear-to-Date ♥         Piel Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. PRATHER, KEVEN, P., Malling Address 10761 CLARK RD       City         City       General       Occupation (for Individual)         Piel Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Piel Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Name of Employer (for Individual)       Coupation (for Individual)	111			for each category of the Detailed Summary Page			4 -	-			17	
Massachusetts Mutual Life Insurance Company Political Action Committee         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. SINOOK, George, A.,.         Mailing Address 502 SARAH CT         City         Difference         PA         TOSO-7231         FEC ID, number of contributing federal political committee.         City         Pint Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. PRATHER, KEVEN, P.,         Mailing Address 10761 CLARK RD         City	An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for the	pur pontrik	pose of	soliciting	cont	ributio	ons	
Massachusetts Mutual Life Insurance Company Political Action Committee         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. SINOOK, George, A.,.         Mailing Address 502 SARAH CT         City         Difference         PA         TOSO-7231         FEC ID, number of contributing federal political committee.         City         Pint Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. PRATHER, KEVEN, P.,         Mailing Address 10761 CLARK RD         City		NAME OF COMMITTEE (In Full)										
A.       SNOCK, George, A., .       Date of Receipt         Mailing Address 502 SARAH CT       Transaction DJ: PR72283362518         City       State       Zip Code         MECHANICSBURG       PA       T050-7231         Primary       General       Occupation (for Individual)         SELF       Insurance Agent       Aggregate Year-to-Date ▼         Primary       General       Other (specify) ▼       State         Put Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B.       PRATHER, KEVEN, P., .       Mailing Address 10761 CLARK RD         City       Other (specify) ▼       General       Other Address 10761 CLARK RD         Fee ID number of contributing federal political committee.       C       Transaction D.: PR73208862518.         Name of Employer (for Individual)       Cccupation (for Individual)       Transaction D.: PR73208862518.         Name of Employer (for Individual)       Cccupation (for Individual)       Marount of Each Receipt Mis Period         State       Zip Code       Marount of Each Receipt Mis Period         Primary       General       Cccupation Name       P/R Deduction (\$12.50 Bi-Weekly)         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$12.50 Bi-Weekly)         Ci		· ,	ance Co	mpany Political Action	Commit	tee						
City       State       Zip Code         MECHANICSBURG       PA       17050-7231         FEC. ID number of contributing       C       Amount of Each Receipt this Period         SELF       Insurance Agent       300.00         Primary       General       Aggregate Year-to-Date ▼         Other (specify) ▼       \$00.00       P/R Deduction (\$300.00 Monthly)         PRATHER, KEVEN, P.,       Maling Address 10761 CLARK RD       Transaction ID: PR79208652518         City       State       Zip Code       Aggregate Year-to-Date ▼         Primary       General       Oftor (specify) ▼       Date of Receipt         Maling Address 10761 CLARK RD       Other (specify) ▼       Date of Receipt this Period         City       State       Zip Code       Amount of Each Receipt this Period         Gity       Other (specify) ▼       Date of Receipt this Period       Transaction ID: PR79208652518         Amount of Each Receipt this Period       C       Transaction ID: PR79208652518       Transaction ID: PR79208652518         Amount of Each Receipt this Period       Size       Primary       General       Primary       Zip Code         City       Size       C       Aggregate Year-to-Date ▼       Primary       Primary       Zip Code       Transactinon ID: PR79208652518 </td <td>Α.</td> <td></td> <td>al) or Full O</td> <td>rganization Name</td> <td>Date o</td> <td>of Re</td> <td>eceipt</td> <td></td> <td></td> <td></td> <td></td>	Α.		al) or Full O	rganization Name	Date o	of Re	eceipt					
MECHANICSBURG       PA       17050-7231       Amount of Each Receipt this Period         FEC ID number of contributing tederal political committee.       C       300.00         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       Memo Item         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$300.00 Monthly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B       PRATHER, KEVEN, P,       Date of Receipt         Mailing Address 10761 CLARK RD       C       10       17       2018         City       State       Zip Code       Transaction ID: EP72006652518         OHA 44024-9779       FeC ID number of contributing tederal political committee.       Date of Receipt       25.00         Name of Employer (for Individual)       Occupation (for Individual)       EP72006562518       Amount of Each Receipt this Period         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       P/R Deduction (\$12.50 Bi-Weekly)       P/R Deduction (\$12.50 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       10       17       2018         Gity       C       Aggregate Year-to-Date ▼       9/R Deduction (\$12.50 Bi-Weekly)       10		Mailing Address 502 SARAH CT				И /		/ Y				
federal political committee.       300.00         Name of Employer (for Individual) SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         P/II Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. PRATHER, KEVEN, P, , Mailing Address 10761 CLARK RD       Of 17       2018         City       State       Zip Code       10       17       2018         FEC ID number of contributing federal political committee.       Occupation (for Individual) Insurance Agent       P/R Deduction (\$12.50 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       P/R Deduction (\$12.50 Bi-Weekly)         FEC ID number of contributing federal political committee.       Quegate Year-to-Date ▼       P/R Deduction (\$12.50 Bi-Weekly)         FEU Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       10       17       2018         Transaction ID : PR79209062518       Anount of Each Receipt this Period       25.00       P/R Deduction (\$12.50 Bi-Weekly)       25.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       10       17       2018         Transaction ID : PR792090462518       Anount of Each Receipt this Period       219       22.14       10       17       201		-										
SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         P/R Deduction (\$300.00 Monthly)         Date of Receipt         Tansaction ID: PR79208662518         Amount of Each Receipt this Period         P/E Di number of contributing         C ID number of contributing         Primary       General         Primary       General         P/R Deduction (\$12.50 Bi-Weekly)         Date of Receipt		5	С					-	3	300.00	)	
Primary       General         Other (specify)       P/R Deduction (\$300.00 Monthly)         Date of Receipt         10       17         2018       Transaction ID : PR7208662518         Amount of Each Receipt this Period         P/R Deduction (\$12.50 Bi-Weekly)         P/R Deduction (\$16.07 Bi-Weekly)		SELF				/lemo	tem Item					
B. PRATHER, KEVEN, P, ,       Date of Receipt         Mailing Address 10761 CLARK RD       10 / 17 / 2018         City       State       Zip Code         OH       44024-9779         FEC ID number of contributing tederal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         Insurance Agent       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       250,00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City       State       Zip Code         Address 3331 PARAISO WAY       CA       91214-1250         FEC ID number of contributing tederal political committee.       C       91214-1250         Name of Employer (for Individual)       Occupation (for Individual)       Transaction ID : PR792090462518         Amount of Each Receipt His Period       32.14         Mailing Address 3331 PARAISO WAY       C       91214-1250         City       State       Zip Code       32.14         Mame of Employer (for Individual)       Occupation (for Individual)       P/R Deduction (\$16.07 Bi-Weekly)         SELF       Insurance Agent       Aggregate Year-to-Date ▼       P/R Deduction (\$16.07 Bi-Weekly)      <		Primary General	Aggregate		P/R De	ducti	on (\$300	).00 Mon	thly)			
City       State       Zip Code         CHARDON       OH       44024-9779         FEC ID number of contributing federal political committee.       C       Transaction ID : ER792086662518         Name of Employer (for Individual)       Occupation (for Individual)       25.00         SELF       Occupation (for Individual)       Insurance Agent         Receipt For:       C       25.00         Primary       General       Off 420.00         Other (specify)       C       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       P/R Deduction (\$12.50 Bi-Weekly)         City       State       Zip Code         LA CRESCENTA       State       Zip Code         Name of Employer (for Individual)       Occupation (for Individual)       Insurance Agent         Receipt For:       C       91214-1250         Name of Employer (for Individual)       Occupation (for Individual)       32.14         Insurance Agent       Memo Item         Receipt For:       Other (specify)       Aggregate Year-to-Date ▼         Primary       General       Occupation (for Individual)         SELF       Insurance Agent       P/R Deduction (\$16.07 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional) <td< td=""><td>в.</td><td></td><td>al) or Full O</td><td>rganization Name</td><td>Date o</td><td>of Re</td><td>eceipt</td><td></td><td></td><td></td><td></td></td<>	в.		al) or Full O	rganization Name	Date o	of Re	eceipt					
CHARDON       OH       44024-9779         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       Memo Item         Receipt For:       Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$12.50 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       Date of Receipt         City       State       Zip Code       Transaction ID : PR792090462518         Amount of Each Receipt this Period       State       2ip Code         City       State       Zip Code       Transaction ID : PR792090462518         Amount of Each Receipt this Period       State       2ip Code         FEC ID number of contributing federal political committee.       C       Aggregate Year-to-Date ▼         Name of Employer (for Individual)       Occupation (for Individual)       Amount of Each Receipt this Period         SELF       Name of Employer (for Individual)       Occupation (for Individual)       Aggregate Year-to-Date ▼         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$16.07 Bi-Weekly)       P/R Deduction (\$16.07 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional)		Mailing Address 10761 CLARK RD				И /		/ Y				
FEC ID number of contributing federal political committee.       C       25.00         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       Memo Item         Primary       General       Aggregate Year-to-Date ▼       P/R Deduction (\$12.50 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City       State       Zip Code         LA CRESCENTA       C       91214-1250         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       Amount of Each Receipt         Name of Employer (for Individual) SELF       C       91214-1250         FEC ID number of contributing federal political committee.       C       32.14         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       P/R Deduction (\$16.07 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional)       219.64       P/R Deduction (\$16.07 Bi-Weekly)												
federal political committee.       25.00         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       Memo Item         Receipt For: Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$12.50 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City       State       Zip Code         LA CRESCENTA       CA       91214-1250         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       Memo Item         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       P/R Deduction (\$16.07 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional)		CHARDON	ОН	44024-9779	Amour	nt of	Each R	eceipt th	is Pe	riod		
SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       P/R Deduction (\$12.50 Bi-Weekly)         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C.       RHO, Sean, , ,         Mailing Address 3331 PARAISO WAY       Date of Receipt         City       State       Zip Code         LA CRESCENTA       CA       91214-1250         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       Aggregate Year-to-Date ▼         SUBTOTAL of Receipts This Page (optional)       357.14		5	С	25.00						D		
Primary       General         Other (specify)       250.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. RHO, Sean, , ,       Mailing Address 3331 PARAISO WAY       Date of Receipt         City       State       Zip Code       Transaction ID : PR792090462518         LA CRESCENTA       CA       91214-1250       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       32.14         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         SELF       Aggregate Year-to-Date       P/R Deduction (\$16.07 Bi-Weekly)         SubtrotAL of Receipts This Page (optional)				· · · · · ·	Memo Item							
C. RHO, Sean, , ,       Mailing Address 3331 PARAISO WAY       Date of Receipt         Mailing Address 3331 PARAISO WAY       10       17       2018         City       State       Zip Code       Transaction ID : PR792090462518         LA CRESCENTA       CA       91214-1250       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       32.14         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         SELF       Aggregate Year-to-Date ▼       P/R Deduction (\$16.07 Bi-Weekly)         Other (specify)       219.64       219.64		Primary General	Aggregate		P/R Deduction (\$12.50 Bi-Weekly)							
City       State       Zip Code       Transaction ID : PR792090462518         LA CRESCENTA       CA       91214-1250       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       32.14         Name of Employer (for Individual)       Occupation (for Individual)       32.14         SELF       Aggregate Year-to-Date ▼       Primary       General         Other (specify)       219.64       P/R Deduction (\$16.07 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional)	<u>с.</u>		al) or Full O	rganization Name	Date o	of Re	eceipt					
LA CRESCENTA       CA       91214-1250       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       32.14         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$16.07 Bi-Weekly)         SUBTOTAL of Receipts This Page (optional)		Mailing Address 3331 PARAISO WAY						/ Y			ſ	
federal political committee.       32.14         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       219.64         SUBTOTAL of Receipts This Page (optional)												
SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Other (specify)       219.64         SUBTOTAL of Receipts This Page (optional)		6	С				<u>,</u>	- y	_	32.14	4	
Primary       General         Other (specify)       219.64         SUBTOTAL of Receipts This Page (optional)						/lemo	o Item					
		Primary General	Aggregate	219.64	P/R Deduction (\$16.07 Bi-Weekly)							
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ı <del>ب</del>			Use separate schedule(s)	(check on	ly on	e)	L							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a		11b	11c		Г	17				
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	rson for the	purp	ose of	soliciting	contr	ributio	ons				
<u>,</u>	NAME OF COMMITTEE (In Full)													
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee									
Α.	Full Name of Individual (Last, First, Middle Initi Starks, MacArthur, , MR.,	al) or Full O	Drganization Name	Date of Receipt										
	Mailing Address 34 Nottingham Dr			M N 10	1 /	D D 17	/ Y	y 201	Y Y 8					
	City East Longmeadow	State MA	Zip Code 01028-2630	Transaction ID : PR792096562518 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				<b>,</b>			12.50	)				
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		cupation (for Individual) e President - Fin Plng & Analysis		1emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 262.50	P/R Dec	ductic	on (\$12.9	50 Bi-We	ekly)						
B.	Full Name of Individual (Last, First, Middle Initi LAU, JONATHAN, D, ,	al) or Full O	Drganization Name	Date o	of Red	ceipt								
	Mailing Address 275 ASPEN RD			M N 10	/	D D 17	/ Y	2018	ү ү З					
	City	State	Zip Code				PR79210		<b>362518</b> Period					
	BIRMINGHAM	MI	48009-3705	Amour	nt of I	Each Re	eceipt th	is Per	iod					
	FEC ID number of contributing federal political committee.	С							50.00	)				
	Name of Employer (for Individual) SELF		cupation (for Individual) surance Agent	P/R Deduction (\$25.00 Bi-Weekly)										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00											
с.	Full Name of Individual (Last, First, Middle Initi DOMINGUE, MICHAEL, , ,	al) or Full O	Drganization Name	Date o	of Red	ceipt								
	Mailing Address 107 SHELBURNE CIR			M 10	1 /	D D 17	/ Y	2018						
	City LAFAYETTE	State LA	Zip Code 70508-6440			-	PR79210 eceipt th							
	FEC ID number of contributing federal political committee.	С				y	y		26.22	2				
	Name of Employer (for Individual) SELF	Occi Brok	cupation (for Individual) ker		/lemo	Item								
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 247.59	P/R De	ductic	on (\$13.	11 Bi-We	ekly)						
⊢	UBTOTAL of Receipts This Page (optional)			[.		,	,		88.72	2				
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IT	EMIZED RECEIPTS		1	for each category of the Detailed Summary Page	) `_	neck on X 11a 13		e) 11b 14	11c				
	y information copied from such Reports and Sta for commercial purposes, other than using the					for the	purp	ose of :	soliciting	g contr	ibutions		
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur	ance Co	m	pany Political Action	Co	mmit	tee						
Α.			rga	nization Name		Date of Receipt							
	Mailing Address 3135 ABOVE STRATFORD PL					10		D D 17	/ Y	201	8		
	City AUSTIN	State TX		Zip Code 78746-4600				on ID : I Each Re					
	FEC ID number of contributing federal political committee.	С	C					,			25.00		
	Name of Employer (for Individual) SELF		•	tion (for Individual) ce Agent		N	lemo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 250.00		P/R Dec	ductio	n (\$12.ŧ	50 Bi-W	eekly)			
в.	Full Name of Individual (Last, First, Middle Initi O'Connor, Michael, , MR.,	al) or Full O	rga	nization Name		Date c	f Rec	eipt					
	Mailing Address 17 Twin Hill Rd					M N 10		D D 17	/ Y	2018			
	City Hubbardston	State MA		Zip Code 01452-1216									
	FEC ID number of contributing federal political committee.	С				192.				92.30			
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.			tion (for Individual) I Counsel		Ν	lemo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 4038.30	P/R Deduction (\$192.30 Bi-Weekly)								
С.	Full Name of Individual (Last, First, Middle Initi MacWade, Lenore, T, MS.,	al) or Full O	rga	nization Name		Date c	f Rec	ceipt					
	Mailing Address 20 Mountain Hill Rd					<sup>M</sup> 10		D D 17	/ Y	2018	3		
	City N Grosvenordl	State CT		Zip Code 06255-1603				<b>on ID : I</b> Each Re					
	FEC ID number of contributing federal political committee.	С						7			11.54		
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		•	tion (for Individual) ous Improvement Consultant		N	lemo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ear-to-Date ▼ 242.34				P/R Deduction (\$11.54 Bi-Weekly)					
s	UBTOTAL of Receipts This Page (optional)					ļ.		,		2	28.84		
Т	OTAL This Period (last page this line number o	nly)		····· •				7					

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IT.			Use separate schedule(s)	(check on	ly one)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11b	11c 15	12		17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for the to solicit co	purpose of ontributions	soliciting	g contri h comr	ibutic nittee	ons e.	
$\setminus$	NAME OF COMMITTEE (In Full)									
$\left \right\rangle$	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Initi LAYSON, DOLFORD, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 2081 HAVENVIEW CT			10 / Y Y Y Y 10 17 2018						
	City SNELLVILLE	State GA	Zip Code 30078-7795	Transaction ID : PR792124362518           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С			1 7 1		2	25.00		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	P/R Dec	duction (\$12	.50 Bi-W	eekly)			
B	Full Name of Individual (Last, First, Middle Initi Matthews, Stacy, S., ,	al) or Full O	rganization Name	Date o	of Receipt					
	Mailing Address 20 PARK AVE APT 3F			10	y 2018	Y Y				
	City	State	Zip Code	Trans	saction ID :	PR79212	278625	18		
	NEW YORK	NY	10016-3846	Amoun	t of Each F	Receipt th	nis Peri	od		
	FEC ID number of contributing federal political committee.	С		20.00						
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 260.00	P/R Ded	duction (\$20	.00 Montl	nly)			
с.	Full Name of Individual (Last, First, Middle Initi Allard, Thomas, , MR.,	al) or Full O	rganization Name	Date o	of Receipt					
	Mailing Address 16 Grandview St			10 <sup>M</sup>	/ D 17		۲ 2018			
	City South Hadley	State MA	Zip Code 01075-2943		saction ID : it of Each F					
	FEC ID number of contributing federal political committee.	С				,		12.50		
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) d Analyst		lemo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 262.50	P/R Dec	duction (\$12	.50 Bi-W	eekly)			
⊢	UBTOTAL of Receipts This Page (optional)		<b>r</b>				Ę	57.50		

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			Use separate schedule(s)	(check onl	y one)					
	D RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c 15	12	17		
Any informat	tion copied from such Reports and Sta ercial purposes, other than using the r	tements ma	ay not be sold or used by any pe	rson for the	purpose of	soliciting	contribu	itions		
	F COMMITTEE (In Full)									
	achusetts Mutual Life Insura	ance Co	mpany Political Action	Committ	ee					
	e of Individual (Last, First, Middle Initia Ellen, S, MS.,	l) or Full O	rganization Name	Date of Receipt						
	ddress 20 Wellesley Dr			M M 10	/ D D 17	/ Y	ү 2018	Ŷ		
City Longmea	adow	State MA	Zip Code 01106-2833	Transaction ID : PR792129562518 Amount of Each Receipt this Period						
	umber of contributing olitical committee.	С					26.	.92		
MASSAC	Employer (for Individual) HUSETTS MUTUAL LIFE INS.		upation (for Individual) & Assistant General Counsel	м	emo Item					
	or: nary General er (specify) ▼	Aggregate	Year-to-Date ▼ 565.32	P/R Ded	luction (\$26.	92 Bi-We	ekly)			
	e of Individual (Last, First, Middle Initia IANO, EDUARDO, J, ,	ll) or Full O	rganization Name	Date o	f Receipt					
	ddress 10197 CAMELBACK LN			M M 10	/ D D 17	/ Y	ү 2018	Y		
City		State	Zip Code		action ID :					
BOCA R	ATON	FL	33498-4716	Amoun	t of Each R	eceipt th	is Period	1		
	number of contributing plitical committee.	С						.14		
Name of SELF	Employer (for Individual)	Occupation (for Individual) Broker			Memo Item					
	or: nary General er (specify) ▼	Aggregate	Year-to-Date ▼ , 235.73	P/R Deduction (\$16.07 Bi-Weekly)						
	e of Individual (Last, First, Middle Initia SS, MICHAEL, S, ,	ll) or Full O	rganization Name	Date o	f Receipt					
Mailing A	ddress 115 WHITE COLUMNS DR			<sup>M</sup> 10	/ D D 17	/ Y	2018 Y	Y		
City ALPHAR	ETTA	State GA	Zip Code 30004-3057		saction ID : t of Each R					
	umber of contributing plitical committee.	С			. , .	. y	25.	.00		
SELF	Employer (for Individual)		upation (for Individual) rance Agent	M	emo Item					
	For: nary General er (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Deduction (\$12.50 Bi-Weekly)						
SUBTOTAL	of Receipts This Page (optional)					9	84.	06		
TOTAL This	s Period (last page this line number or	ıly)	•							

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ı <del>ب</del>			Use separate schedule(s)	(check on	ly one	e)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a		11b	11c 15		2	17	
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	A not be sold or used by any pe address of any political committee	rson for the	purp	ose of :	soliciting	cont	ributio	ons	
<u>,</u>	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi MILLER, JOHN, J, ,	al) or Full O	Organization Name	Date o	Date of Receipt						
	Mailing Address 13 WHIPPANY AVE			10 <sup>M</sup>	/	D D 17	/ Y	y 201	8		
	City WARREN	State NJ	Zip Code 07059-5774				PR79250 eceipt th				
	FEC ID number of contributing federal political committee.	С					- 45-		83.32	2	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		lemo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.37	P/R Dec	ductio	n (\$41.6	6 Bi-We	ekly)			
в.	Full Name of Individual (Last, First, Middle Initi FERRANTE, PAUL, DAVID, ,	al) or Full O	Organization Name	Date o	of Rec	eipt					
	Mailing Address 648 SHORE ACRES DR			10 <sup>M</sup>	1	D D 17	/ Y	201	Y Y 8		
	City	State	Zip Code				PR79254				
	MAMARONECK	NY	10543-4011	Amoun	nt of E	Each Re	eceipt th	is Pe	riod		
	FEC ID number of contributing federal political committee.	С		Memo Item					130.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 740.00	P/R Dec	luctior	n (\$65.0	)0 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initi KENNY, BRENDAN, J, ,	al) or Full O	Organization Name	Date o	of Rec	eipt					
	Mailing Address 27 HILLSIDE RD			10	/	D D 17	/ Y	201		ſ	
	City SOUTHAMPTON	State NY	Zip Code 11968-3731				PR79254 eceipt th				
	FEC ID number of contributing federal political committee.	С			. ,	,	. y		50.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		1emo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	P/R Dec	ductio	n (\$25.0	00 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•		. ,		. ,	2	263.32	2	
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17			Use separate schedule(s)	(check o	nly o	ne)	L				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12	Г	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any pe ddress of any political committee	erson for the	e pur	pose of	soliciting	, contri	ibutio	ns	
	NAME OF COMMITTEE (In Full)										
$\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commi	ttee	•					
Α.	Full Name of Individual (Last, First, Middle Initi ROLNICK, RUSSELL, J, ,	ial) or Full O	rganization Name	Date	Date of Receipt						
	Mailing Address 8 TALL PINES CT			M 10		D D 17	/ Y	۲ 2018	Y Y B		
	City WEST NYACK	State NY	Zip Code 10994-1341		Transaction ID : PR792728162518 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С							41.68		
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		Memo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.67	P/R De	educti	ion (\$20.	84 Bi-We	eekly)			
в.	Full Name of Individual (Last, First, Middle Initi LARGE, BRIAN, C, ,	ial) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 141 WOLFPIT AVE			10 / Y Y Y Y 10 17 2018							
	City	State	Zip Code	Trar	sact	ion ID :	PR79273	326625	i18		
	NORWALK	СТ	06851-3429	Amou	nt of	Each R	eceipt th	is Peri	iod		
	FEC ID number of contributing federal political committee.	С		50.00							
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	P/R Deduction (\$25.00 Bi-Weekly)							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00								
с.	Full Name of Individual (Last, First, Middle Initi Karlitz, Paul, E., ,	ial) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 1908 VIA ESTUDILLO			M 10		D D 17	/ Y	2018			
	City PALOS VERDES ESTATES	State CA	Zip Code 90274-1910			-	PR79297 eceipt th				
	FEC ID number of contributing federal political committee.	С				y	y	1(	00.00		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Mem	o Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 400.00	P/R De	educt	ion (\$10(	).00 Mon	ithly)			
s	UBTOTAL of Receipts This Page (optional)		•••••			,	,	19	91.68		
т	OTAL This Period (last page this line number of	only)	••••••						-		

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177			Use separate schedule(s)	(check on	ly one)					
116	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a	11b	11c	12	Γ	17	
An	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson for the	purpose of	soliciting	contrib	oution hittee.	าร	
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insu	ance Co	mpany Political Action	Commit	tee					
	Full Name of Individual (Last, First, Middle Initi KATES, DAVID, S, ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 88 MIDDLE RD			10	/ D 17	) / Y	2018	Y		
	City SANDS POINT	State NY	Zip Code 11050-2634	Transaction ID : PR793060562518           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		30.00						
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	M	lemo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	P/R Dec	duction (\$15	.00 Bi-We	ekly)			
	Full Name of Individual (Last, First, Middle Initi KRASNIPOL, STEVEN, E, ,	al) or Full O	rganization Name	Date o	f Receipt					
	Mailing Address 820 ARBORETUM DR			10	/ D 17	) / Y	2018	Y		
	City	State	Zip Code	Trans	saction ID :	PR79319	416251	18		
	WILMINGTON	NC	28405-5220	Amoun	t of Each F	Receipt th	is Perio	bd		
	FEC ID number of contributing federal political committee.	С		25.00						
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	P/R Deduction (\$12.50 Bi-Weekly)						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 250.00							
	Full Name of Individual (Last, First, Middle Initi SELIGMAN, STEPHEN, MARC, ,	al) or Full O	rganization Name	Date o	f Receipt					
	Mailing Address 269 SHADYBROOK LN			10 <sup>M</sup>	/ D 17		2018	Y		
	City PRINCETON	State NJ	Zip Code 08540-4137		saction ID : It of Each F					
	FEC ID number of contributing federal political committee.	С					2	5.00		
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	N	lemo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Dec	duction (\$12	.50 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•		. , .	. ,	8	0.00		
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
ILEWIZED KEGEIPIS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
Any information copied from such Reports	and Statements ma	ay not be sold or used by any p	13     14     15     16     1       verson for the purpose of soliciting contributions							
or for commercial purposes, other than us			e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)		nen en e Delitie et Astieu								
Assachusetts Mutual Life	Insurance Co	mpany Political Action	Committee							
Full Name of Individual (Last, First, Mic	dle Initial) or Full O	rganization Name								
A. GOLISH, GLEN, R, ,			Date of Receipt							
Mailing Address 22261 HOLLYHOCK T	RL		M M / D D / Y Y Y Y 10 17 2018							
City	State	Zip Code	Transaction ID : PR793450562518							
BOCA RATON	FL	33433-4865	Amount of Each Receipt this Period							
FEC ID number of contributing	С		45.45							
federal political committee.	0									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item							
SELF	Insu	rance Agent								
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify) ▼		770.12	P/R Deduction (\$41.66 Bi-Weekly)							
			·							
Full Name of Individual (Last, First, Mic B. GEORGE, IAN, R, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 600 CLEMSON DR										
			10 17 2018							
City	State	Zip Code	Transaction ID : PR793621462518							
PITTSBURGH	PA	15243-1736	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		83.32							
Name of Employer (for Individual) SELF	Occ Bro	upation (for Individual) ker	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General		000.07	P/R Deduction (\$41.66 Bi-Weekly)							
Other (specify) ▼		833.37	1							
Full Name of Individual (Last, First, Mic C. GERDELMANN, MARK, J, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 206 COVENTRY RD			M M / D D / Y Y Y Y							
	1 -		10 17 2018							
City CHALFONT	State PA	Zip Code 18914-2970	Transaction ID : PR793654762518							
		10914-2970	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		25.00							
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item							
SELF	Insu	rance Agent								
Receipt For:	Aggregate	Year-to-Date ▼								
Other (specify)		250.00	P/R Deduction (\$12.50 Bi-Weekly)							
SUBTOTAL of Receipts This Page (option	nal)		153.77							
TOTAL This Period (last page this line nu	umber only)									

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IT.			Use separate schedule(s)	(check	only	one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 1 <sup>1</sup>	1a 3	11b 14	11c	12	17				
	y information copied from such Reports and St for commercial purposes, other than using the								utions				
$\square$	NAME OF COMMITTEE (In Full)	0		0	•								
	Massachusetts Mutual Life Insur	ance Co	mpany Political Action	Comn	nitte	e							
Α.	Full Name of Individual (Last, First, Middle Initi Kaltenbach, Gregory, Linn, ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 1 RAND COURT				10 <sup>™</sup>	/ D 17		ү ү 2018	Y				
	Coto de caza	State CA	Zip Code 92679-5148										
	FEC ID number of contributing federal political committee.	С	С					59	.53				
	Name of Employer (for Individual) SELF		ipation (for Individual) eral Agent		Mei	mo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.13	P/R	Dedu	ction (\$59	).53 Bi-W	eekly)					
в.	Full Name of Individual (Last, First, Middle Initi COHN, SETH, MICHAEL, ,	al) or Full O	rganization Name	Dat	e of	Receipt							
	Mailing Address 247 UNDERWOOD DR			10 / D D / Y Y Y Y Y 10 17 2018									
	City	State GA	Zip Code					16       17         iing contributions uch committee.       17         2018       17         3731562518       18         3731562518       59.53         this Period       59.53         4231462518       17         this Period       50.00         Weekly)       2018         4231462518       10         this Period       50.00         4231462518       10         this Period       2018         4427862518       11         this Period       25.00					
		- GA	30328-2942	Am	ount	of Each F	Receipt ti	nis Perio	d				
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)									
<u>с</u>	Full Name of Individual (Last, First, Middle Initi FOX, AMIE, L, ,	al) or Full O	rganization Name	Dat	te of	Receipt							
	Mailing Address 20138 ENNIS DR			M	™ 10	/ D 17			Y				
	City STRONGSVILLE	State OH	Zip Code 44149-0992										
	FEC ID number of contributing federal political committee.	С			_	9	. ,	25	.00				
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		Me	mo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R	Dedu	ction (\$12	2.50 Bi-W	eekly)					
s	UBTOTAL of Receipts This Page (optional)					9	. ,	134	.53				
Т	OTAL This Period (last page this line number c			-									

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ıт.			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17							
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions							
$\square$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Committee							
Α.	Full Name of Individual (Last, First, Middle Initi MCKEAN, Ryan, P., ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 1080 NICHOLSON AVE			10 17 Y Y Y Y 10 17 2018							
	City LAKEWOOD	State OH	Zip Code 44107-1403	Transaction ID : PR794428062518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		33.33							
	Name of Employer (for Individual) SELF		ipation (for Individual) rance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 233.33	P/R Deduction (\$33.33 Monthly)							
В.	Full Name of Individual (Last, First, Middle Initi DORMAN, MARK, J, ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 3980 FAIRWAY DR			10 17 2018							
	City	State	Zip Code	Transaction ID : PR794449362518							
	MEDINA	OH	44256-7847	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		50.00							
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi PERME, CHRISTOPHER, A., ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 11676 STATE ROUTE 88			M M / D D / Y Y Y Y 10 17 2018							
	City GARRETTSVILLE	State OH	Zip Code 44231-9105	Transaction ID : PR794455162518 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		100.78							
	Name of Employer (for Individual) SELF		ipation (for Individual) rance Agent	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 798.45	P/R Deduction (\$50.39 Bi-Weekly)							
s	UBTOTAL of Receipts This Page (optional)		•	184.11							
т	OTAL This Period (last page this line number of	only)									

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)     ▼     11a     11b     11c     12       13     14     15     16     17						
	y information copied from such Reports and Sta for commercial purposes, other than using the r									
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	ance Co	mpany Political Action	Committee						
A.	Full Name of Individual (Last, First, Middle Initia OCWIEJA, JOHN, F, , Mailing Address 300 N CANAL ST APT 3603	l) or Full Or	ganization Name	Date of Receipt						
				10 17 2018						
	City CHICAGO	State IL	Zip Code	Transaction ID : PR794655562518						
	CHICAGO		60606-1311	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		83.32						
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item						
	SELF	Insur	ance Agent							
	Receipt For: Primary General	Aggregate `	Year-to-Date ▼							
	Other (specify) ▼		833.37	P/R Deduction (\$41.66 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initia Powers, Timothy, W., ,	l) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 1810 CHADSWORTH DR			10 / Y Y Y Y 2018						
	City	State	Zip Code	Transaction ID : PR794959162518						
	SUN PRAIRIE	WI	53590-3554	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		555.57						
	Name of Employer (for Individual) SELF		pation (for Individual) eral Agent	Memo Item						
	Receipt For:	Aggregate `	Year-to-Date ▼							
	Primary General Other (specify) ▼		, 1388.87	P/R Deduction (\$555.57 Monthly)						
с.	Full Name of Individual (Last, First, Middle Initia PEEPLES, Jason, L., ,	l) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 3526 SHIRLWOOD AVE	_		10 / D D / Y Y Y Y 10 17 2018						
	City MEMPHIS	State TN	Zip Code 38122-4568	Transaction ID : PR795097462518						
	FEC ID number of contributing		30122-4300	Amount of Each Receipt this Period						
	federal political committee.	С		133.33						
	Name of Employer (for Individual) SELF		pation (for Individual) ance Agent	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 333.33	P/R Deduction (\$133.33 Monthly)						
⊢	UBTOTAL of Receipts This Page (optional)			772.22						

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IT.			Use separate schedule(s)	(check on	ly one)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	¥ 11a 13	11b	11c	12	Γ	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pel address of any political committee	rson for the to solicit co	purpose of	soliciting	contrib	outior ittee	าร		
$\square$	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Init COHAN, DENNIS, ALAN, ,	ial) or Full O	organization Name	Date of Receipt							
	Mailing Address 2707 QUENBY AVE			10 <sup>M</sup>	/ D 17	) / Y	y y 2018	Y	]		
	City HOUSTON	State TX	Zip Code 77005-2429	Transaction ID : PR795315062518           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С					66	6.66			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		1emo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 466.64	P/R Dec	duction (\$33	.33 Bi-We	ekly)				
в.	Full Name of Individual (Last, First, Middle Initi STEPHENS, DAVID, R, ,	ial) or Full O	organization Name	Date c	of Receipt						
	Mailing Address 209 79TH ST UNIT B			M N 10	/ D 17	) / Y	2018	Y	]		
	City	State	Zip Code	Trans	saction ID :	PR79533	876251	8	_		
	VIRGINIA BCH	VA	23451-1973	Amour	nt of Each F	Receipt th	is Perio	d			
	FEC ID number of contributing federal political committee.	С		50.00							
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Deduction (\$25.00 Bi-Weekly)							
с.	Full Name of Individual (Last, First, Middle Initi KATZ, WALTER, E, ,	ial) or Full O	organization Name	Date c	of Receipt						
	Mailing Address 1401 RICHMOND AVE STE 20			10 <sup>M</sup>	/ D 17		2018 <sup>°</sup>	Y	]		
	City HOUSTON	State TX	Zip Code 77006-5480		saction ID : nt of Each F						
	FEC ID number of contributing federal political committee.	С					83	3.32			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		lemo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 833.37	P/R Dee	duction (\$41	.66 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)		▶			,	199	9.98			
т	OTAL This Period (last page this line number of	only)	•••••					-			

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City       State       Zip Code         SUGAR LAND       Tx       77479-6294         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual) INSURANCE BROKER       Memo Item         Primary       General       Occupation (for Individual)       P/R Deduction (\$222.20 Month         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. ROBERTSON, MICHAEL, S, ,       Mailing Address 569 SHANES LN       Image: State Tx       Zip Code Tx         City       State       Zip Code Tx       Transaction ID : PR795364         Mailing Address 569 SHANES LN       Image: State Tx       Zip Code Tx       Transaction ID : PR795374         Mailing Address 569 SHANES LN       C       Image: State Tx       Zip Code Tx       Transaction ID : PR795374         Mailing Address 569 SHANES LN       C       Image: State Tx       Zip Code Tx       Transaction ID : PR795374         Receipt For:       Primary       General Oticical committee.       Occupation (for Individual) Insurance Agent       Memo Item         Receipt For:       Primary       General Other (specify) Image: State	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting of or commercial purpose, other than using the name and address of any political committee to solicit contributions from such of or commercial purpose, other than using the name and address of any political Action Committee to solicit contributions from such of any political Action Committee to solicit contributions from such of the full of	12 16 17
NAME OF COMMITTEE (in Full)         MAME 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. HERNANDEZ, CARLOS,         Mailing Address 1211 WiLDEWOOD CT         Oity         SUGAR LAND         FEC ID number of contributing federal political committee.         Other (specify) ▼         Resign For:         Other (specify) ▼         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. ROBERTSON, MICHAEL, S, .         Mailing Address 569 SHANES LN         City         WEATHERFORD         SELF         Primary         General         Other (specify) ▼         B. ROBERTSON, MICHAEL, S, .         Mailing Address 569 SHANES LN         City         WEATHERFORD         SELF         Primary       General         Other (specify) ▼         Aggregate Year-to-Date ▼         P/R Deduction (\$41.66 Bi-Weel         Name of Individual (Last, First, Middle Initial) or Full Organization Name         Receipt For:         Primary       General         Oth	contributions
Massachusetts Mutual Life Insurance Company Political Action Committee         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         A. HERNANDEZ, CARLOS, , ,         Mailing Address 1211 WILDEWOOD CT         City         SUGAR LAND         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         SELF         NSURANCE EROKER         Receipt For:         Primary         Gity         State         City         B. ROBERTSON, MICHAEL, S, ,         Mailing Address 669 SHANES LN         City         Mailing Address 669 SHANES LN         City         Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. ROBERTSON, MICHAEL, S, ,         Mailing Address 669 SHANES LN         City         Weat THERFORD         Tax         Transaction ID : PR795324         Annount of Each Receipt Inst         Mailing Address 6223 N PONDEROSA WAY         City         Mailing Address 6223 N PONDEROSA WAY         City         Mailing Address 6223 N PONDEROSA WAY         City         Mailing Address 6223 N PONDEROSA WAY	
A.       HERNANDEZ, CARLOS,         Mailing Address 1211 WILDEWOOD CT         City       State         SUGAR LAND       TX         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) SELF       C         Receipt For:       Other (specify) ▼         Primary       General         Other (specify) ▼       State         Zip Code       TX         RoeBERTSON, MICHAEL, S, .         Mailing Address 569 SHANES LN         City       State         Zip Code         TX       76087-7133         FEC ID number of contributing federal political committee.         Name of Employer (for Individual) SELF         Receipt For:         Name of Employer (for Individual) federal political committee.         Name of Employer (for Individual) SELF         Receipt For:         Name of Employer (for Individual) SELF         Receipt For:         Name of Employer (for Individual) SELF         Receipt For:         Name of Individual (Last, First, Middle Initial) or Full Organization Name         C       THOMAS, GREGORY, B, .         Mailing Address 6223 N PONDEROSA WAY         City       State       Zip Code	
City       State       Zip Code       Transaction ID : PR793364         FEC ID number of contributing       C       Amount of Each Receipt this         FEC ID number of contributing       C       Memo Item         SELF       INSURANCE BROKER         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$222.20 Month         City       State       Zip Code         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$222.20 Month         B. ROBERTSON, MICHAEL, S, ,       Mailing Address 569 SHANES LN       Date of Receipt         City       State       Zip Code       Transaction ID : PR795324         Mailing Address 569 SHANES LN       C       Transaction ID : PR7953274         City       State       Zip Code       Transaction ID : PR7953274         Receipt For:       C       Memo Item       Memo Item         FEC ID number of contributing federal political committee.       C       Memo Item       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel       P/R Deduction (\$41.66 Bi-Weel         Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel       Totach Receipt this         City       State       Zip Code       Transaction ID : PR795765       A	
SUGAR LAND       TX       77479-6294       Amount of Each Receipt this         FEC ID number of contributing rederal political committee.       C       Amount of Each Receipt this         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         SELF       INSURANCE BROKER       P/R Deduction (\$222.20 Month         Primary       General       Offer (specify) ▼       P/R Deduction (\$222.20 Month         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. ROBERTSON, MICHAEL, S, ,       Mailing Address 569 SHANES LN       Date of Receipt         City       TX       76087-7133       Transaction ID : PR795374         FEC ID number of contributing federal political committee.       C       Memo Item         Name of Employer (for Individual)       Occupation (for Individual) Insurance Agent       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         Primary       General       Ofter (specify) ▼       Aggregate Year-to-Date ▼         Primary       General       Occupation (for Individual)       Memo Item         SELF       Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         City       THOMAS, GREGORY, B, ,       Mailing Address 6223 N PONDERO	Y Y Y 2018
rederal political committee.       V         Name of Employer (for Individual)       Occupation (for Individual)         SELF       INSURANCE BROKER         Receipt For:       Other (specify) ▼         Other (specify) ▼       S55.60         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         B. ROBERTSON, MICHAEL, S, .       Mailing Address 569 SHANES LN       Date of Receipt         City       State       Zip Code         TX       76087-7133       Transaction ID : PR795374         FEC ID number of contributing federal political committee.       Occupation (for Individual) Insurance Agent       Memo Item         Name of Employer (for Individual)       Occupation (for Individual) Insurance Agent       P/R Deduction (\$41.66 Bi-Weel         Primary       General       Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         City       Mailing Address 6223 N PONDEROSA WAY       City       State       Zip Code       Transaction ID : PR795765         Amount of Each Receipt (for Individual)       State       Zip Code       Transaction ID : PR795765         Amount of Each Receipt (for Individual)       State       Zip Code       Transaction ID : PR795765         Amount of Each Receipt (for Individual)       City       Sta	
SELF       INSURANCE BROKER         Receipt For:       Aggregate Year-to-Date ▼         Cher (specify) ▼       S55.60         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City       State       Zip Code         Transaction ID : PR795374       Amount of Each Receipt this         City       State       Zip Code         WEATHERFORD       TX       76087-7133         FEC ID number of contributing federal political committee.       C         Primary       General       Occupation (for Individual)         Insurance Agent       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         P/R Deduction (\$41.66 Bi-Weel       To 10 / 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0 / 0	222.20
Primary       General       Prigrogue tour to bout *         Other (specify) ▼       P/R Deduction (\$222.20 Month         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         Mailing Address 569 SHANES LN       Tx         City       State       Zip Code         TX       76087-7133         FEC ID number of contributing tederal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         Insurance Agent       Receipt For:         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         P/R Deduction (\$41.66 Bi-Weel         City       State         Zip Code         Transaction ID : PR795374         Amount of Each Receipt this         Insurance Agent         Receipt For:         Primary       General         Other (specify) ▼         Mailing Address 6223 N PONDEROSA WAY         City       State         FEC ID number of contributing tederal political committee.         Name of Employer (for Individual)         State       Zip Code         Receipt this         Mailing Address 6223 N PONDEROSA WAY         City </td <td></td>	
B. ROBERTSON, MICHAEL, S, ,       Date of Receipt         Mailing Address 569 SHANES LN       TX         City       State       Zip Code         Transaction ID :: PR795374       Amount of Each Receipt this         FEC ID number of contributing       C         rederal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Aggregate Year-to-Date       P/R Deduction (\$41.66 Bi-Weel         Mailing Address 6223 N PONDEROSA WAY       Tasaction ID : PR795765         City       State       Zip Code         PARKER       C       Transaction ID : PR795765         Amount of Each Receipt this       Mailing Address 6223 N PONDEROSA WAY         City       State       Zip Code         PARKER       C       Bita Code         Name of Employer (for Individual)       C       Transaction ID : PR795765         Amount of Each Receipt this       Mailing Address 6223 N PONDEROSA WAY       Mailing Address 6223 N PONDEROSA WAY         City       State       Zip Code       Amount of Each Receipt this         Mailing Address       6223 N PONDEROSA WAY       Mailing Address       Mailing Address         SELF       Name of Employer (for Individual)       Occupation (for Individual)       Memo	ily)
City       State       Zip Code         WEATHERFORD       TX       76087-7133         FEC ID number of contributing       C       Amount of Each Receipt this         SELF       C       Memo Item         Primary       General       Occupation (for Individual) Insurance Agent       P/R Deduction (\$41.66 Bi-Weel         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       P/R Deduction (\$41.66 Bi-Weel         City       State       Zip Code         Mailing Address 6223 N PONDEROSA WAY       Tarasaction ID : PR795765         Amount of Each Receipt this       Tarasaction ID : PR795765         Amount of Each Receipt this       Memo Item         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual) SELF       State       Zip Code         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         FEC ID number of contributing federal political committee.       C       Memo Item         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         SLF       Insurance Agent       Memo Item	
WEATHERFORD       TX       76087-7133       TX       Amount of Each Receipt this         FEC ID number of contributing tederal political committee.       C       Amount of Each Receipt this       Amount of Each Receipt this         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       Memo Item         Primary       General       Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       Date of Receipt         City       State       Zip Code       Rount of Each Receipt this         FEC ID number of contributing federal political committee.       C       State       Zip Code         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         Mailing Address 6223 N PONDEROSA WAY       C       Memo Item       Memo Item         FEC ID number of contributing federal political committee.       C       Memo Item       Memo Item         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         SELF       Occupation (for Individual)       Memo Item	2018
FEC ID number of contributing federal political committee.       C       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         Name of Employer (for Individual) SELF       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         C.       THOMAS, GREGORY, B, ,       Bata field         Mailing Address 6223 N PONDEROSA WAY       Transaction ID : PR795765         City       State       Zip Code         PARKER       C       80134-5623         FEC ID number of contributing federal political committee.       Occupation (for Individual) Insurance Agent       Memo Item         Mame of Employer (for Individual)       C       Memo Item       Memo Item	
federal political committee.       C         Name of Employer (for Individual) SELF       Occupation (for Individual) Insurance Agent       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         Other (specify) ▼       Aggregate Year-to-Date ▼       P/R Deduction (\$41.66 Bi-Weel         C. THOMAS, GREGORY, B, ,       Mailing Address 6223 N PONDEROSA WAY       Date of Receipt         City       State       Zip Code       Transaction ID : PR795765         PARKER       Co       80134-5623       Amount of Each Receipt this         FEC ID number of contributing federal political committee.       Occupation (for Individual) Insurance Agent       Memo Item         Name of Employer (for Individual)       Occupation (for Individual) Insurance Agent       Memo Item	Period
SELF       Insurance Agent         Receipt For:       Aggregate Year-to-Date ▼         Other (specify) ▼       Aggregate Year-to-Date ▼         P/R Deduction (\$41.66 Bi-Weel         C. THOMAS, GREGORY, B, ,         Mailing Address 6223 N PONDEROSA WAY         City       State         PARKER       Co         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)       Occupation (for Individual)         Insurance Agent       Memo Item	83.32
Primary       General         Other (specify) ▼       P/R Deduction (\$41.66 Bi-Weel         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C.       THOMAS, GREGORY, B, ,         Mailing Address 6223 N PONDEROSA WAY       Date of Receipt         City       State       Zip Code         PARKER       CO       80134-5623         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         SELF       Insurance Agent	
C. THOMAS, GREGORY, B, ,       Date of Receipt         Mailing Address 6223 N PONDEROSA WAY       Image: Constraint of the constraint o	kly)
City     State     Zip Code       PARKER     CO     80134-5623       FEC ID number of contributing     C       federal political committee.     C       Name of Employer (for Individual)     Occupation (for Individual)       SELF     Insurance Agent	
PARKER     CO     80134-5623       FEC ID number of contributing federal political committee.     C       Name of Employer (for Individual) SELF     Occupation (for Individual) Insurance Agent	2018
FEC ID number of contributing federal political committee.     C       Name of Employer (for Individual)     Occupation (for Individual)       SELF     Insurance Agent	
SELF Insurance Agent	50.00
Receipt For: Aggregate Year-to-Date ▼	
Primary     General       Other (specify)     500.00	kly)
SUBTOTAL of Receipts This Page (optional)	355.52

FOR LINE NUMBER:

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check or	(check only one)						
			for each category of the Detailed Summary Page	<b>×</b> 11a		11b	11c		2 6 [	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	L ay not be sold or used by any pe ddress of any political committee	erson for the	e purp ontrib	oose of	soliciting	conti	ributic	ons	
	NAME OF COMMITTEE (In Full)										
$\left \right\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi MU, CATHY, , ,	ial) or Full O	rganization Name	Date of	Date of Receipt						
	Mailing Address 3273 WITHERS AVE			10	M M / D D / Y Y Y Y Y 10 17 2018						
	City LAFAYETTE	State CA	Zip Code 94549-1942				PR79584 eceipt th				
	FEC ID number of contributing federal political committee.	С				-			30.00	)	
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		/lemo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 242.46	P/R De	ductio	on (\$15.)	00 Bi-We	ekly)			
B.	Full Name of Individual (Last, First, Middle Initi FURSTNER, ERIC, C, ,	ial) or Full O	rganization Name	Date of	of Re	ceipt					
	Mailing Address 10 CASOLYN RANCH CT			M 10	И /	D D 17	/ Y	2018	ү ү 8		
	City	State CA	Zip Code				PR79596				
	DANVILLE		94506-4756	Amour	nt of	Each R	eceipt th	is Per	ʻiod		
	FEC ID number of contributing federal political committee.	C		1 Li	-				50.00	)	
	Name of Employer (for Individual) SELF	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	P/R Dec	ductio	on (\$25.0	00 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initi WIRTZ, EDWARD, J, ,	ial) or Full O	rganization Name	Date o	of Re	ceipt					
	Mailing Address 12 BRANDING IRON LN			M 10		D D 17	/ Y	2018			
	City ROLLING HILLS ESTATES	State CA	Zip Code 90274-2501			-	PR7960 eceipt th				
	FEC ID number of contributing federal political committee.	С				y .	y		83.30	)	
	Name of Employer (for Individual) SELF	Insurance Agent									
	Receipt For: Primary General Other (specify)	Aggregate	P/R De	ductio	on (\$41.	65 Bi-We	ekly)				
s	UBTOTAL of Receipts This Page (optional)		•			y 1	,	1	63.30	)	
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check or	(check only one)					
			for each category of the Detailed Summary Page	<b>×</b> 11a		11b 14	11c		r	17
Ar	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or used by any pe address of any political committee	erson for the	e purp	oose of	soliciting	contr	ributic	ons
	NAME OF COMMITTEE (In Full)		······································							-
$\left \right\rangle$	Massachusetts Mutual Life Insu	rance Co	ompany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Init WHITMORE, EDGAR, F, , III	ial) or Full O	Organization Name	Date of	Date of Receipt					
	Mailing Address 25471 PRADO DE ORO			M 10	И /	D D 17	/ Y	ү 201	ү ү 8	
	City CALABASAS	State CA	Zip Code 91302-3664				PR79601 eceipt th			
	FEC ID number of contributing federal political committee.	С				7			83.30	)
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent		/lemo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.43	P/R Deduction (\$41.65 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Init STEARNS, CRAIG, E, ,	ial) or Full O	Organization Name	Date o	of Re	ceipt				
	Mailing Address 136 HENRY ST			M 10	/	D D 17	/ Y	2018	ү ү З	
	City	State	Zip Code				PR79604			
	FAIRFIELD	СТ	06824-2820	Amour	nt of	Each Re	eceipt th	is Per	iod	
	FEC ID number of contributing federal political committee.	С	52.94						1	
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 494.11	P/R Dec	ductic	on (\$26.4	47 Bi-We	ekly)		
с.	Full Name of Individual (Last, First, Middle Initi BENNETT, DAVID, W., ,	ial) or Full O	Organization Name	Date o	of Re	ceipt				
	Mailing Address 22371 CANYON CREST DR			M 10		D D 17	/ Y	2018		
	City MISSION VIEJO	State CA	Zip Code 92692-4532				PR7960			
	FEC ID number of contributing federal political committee.	С				y 1			35.10	)
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		/lemo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date  229.81	P/R De	ductio	on (\$17.	55 Bi-We	eekly)		
s	UBTOTAL of Receipts This Page (optional)		•			7	, ,	1	71.34	
т	OTAL This Period (last page this line number of	only)							- 10	

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			Use separate schedule(s)	(check only						
11			for each category of the Detailed Summary Page		¥ 11a 13	11b 14	11c 15	12	ſ	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by an address of any political comm	y pers ittee to	on for the posolicit con	ourpose of tributions	soliciting	g contr h comi	ibutic mittee	ons e.
	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Mutual Life Insur	ance Co	ompany Political Acti	on C	Committe	e				
Α.	Full Name of Individual (Last, First, Middle Initi ADAMS, MAX, A, ,	al) or Full O	Organization Name	Date of Receipt						
	Mailing Address 600 NE 27TH ST APT 1603			м м 10	/ D 17	D / Y	Y 201	8		
	City	State	Zip Code	Trans	action ID :	PR7963	24662	518		
	MIAMI	FL	33137-5093		Amount	of Each F	Receipt th	nis Per	iod	
	FEC ID number of contributing federal political committee.	С				-			83.32	2
	Name of Employer (for Individual)	Осси	upation (for Individual)		Me	mo Item				
	SELF	Insu	urance Agent							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		000.07	- T	P/R Dedu	ction (\$41	.66 Bi-W	eekly)		
	Other (specify) <b>v</b>		833.37							
	Full Name of Individual (Last, First, Middle Initi	al) or Full O	Pragnization Namo							
В.	McCarron, Patrick, , MR.,		nganization Name		Date of	Receipt				
	Mailing Address 35 Sovereign Dr			M M 10	/ 17		ې 2018	ү ү 3	Γ	
	City	State	Zip Code		Transa	ction ID :	PR7964	162625	518	_
	Flanders	NJ	07836-0230		Amount	of Each F	Receipt th	nis Per	iod	
	FEC ID number of contributing federal political committee.	С				-			11.54	1
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) ernal Wholesaler		Me	mo Item				
	Receipt For:	Aggregate	Year-to-Date V							
	Primary General	33 - 3		-	P/R Dedu	ction (\$11	.54 Bi-W	eekly)		
	Other (specify) <b>v</b>	L	, 242.34							
C.	Full Name of Individual (Last, First, Middle Initi Smith, Christopher, , MR.,	al) or Full O	Organization Name		Date of	Receipt				
	Mailing Address 38 Bailey Ln				<sup>M</sup> 10	/ D 17		2018		7
	City	State	Zip Code		Trans	action ID :	PR7965	17262	518	
	Somers	СТ	06071-1686		Amount	of Each F	Receipt th	nis Per	iod	
	FEC ID number of contributing federal political committee.	С				,	,		9.62	2
	Name of Employer (for Individual)	Осси	upation (for Individual)		Me	mo Item				
	MassMutual Trust Company, FSB	Exte	ernal Wholesaler							
	Receipt For:	Aggregate	Year-to-Date <b>V</b>							
	Other (specify)		202.02	P/R Deduction (\$9.62 Bi-Weekly)						
⊢	UBTOTAL of Receipts This Page (optional)					<b>9</b>	· · ·	1(	04.48	3

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ITEMIZED RECEIPTS			Use separate schedule(s)	(check on	(check only one)					
			for each category of the Detailed Summary Page	<b>×</b> 11a 13	11b	11c	12	Г	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any per address of any political committee	son for the	purpose c	f soliciting	g contri	ibutio	ns	
	NAME OF COMMITTEE (In Full)									
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Initi TOWILL, William, F, MR.,	al) or Full O	Organization Name	Date o	f Receipt					
	Mailing Address 44 Zenith Ln			10 <sup>M</sup>	10 17 2018					
	City Glastonbury	State CT	Zip Code 06033-2827		saction ID It of Each					
	FEC ID number of contributing federal political committee.	С						11.54	ļ	
	Name of Employer (for Individual) Barings LLC		upation (for Individual) naging Director		lemo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 242.34	P/R Dec	duction (\$1	1.54 Bi-We	eekly)			
В.	Full Name of Individual (Last, First, Middle Initi MILGRAM, ARKADY, , ,	al) or Full O	Organization Name	Date o	f Receipt					
	Mailing Address 1391 OAK TRAIL ST			M M	/ D		2018	Y Y	]	
	City	State	Zip Code	Trans	saction ID	: PR7966	666625	518		
	NEWBURY PARK	CA	91320-5918	Amoun	t of Each	Receipt th	nis Peri	iod		
	FEC ID number of contributing federal political committee.	С		69.64						
	Name of Employer (for Individual) SELF		cupation (for Individual) urance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 460.70	P/R Dec	luction (\$34	4.82 Bi-We	eekly)			
с.	Full Name of Individual (Last, First, Middle Initi Finnegan, Kevin, O, MR.,	al) or Full O	Organization Name	Date o	f Receipt					
	Mailing Address 37 Charter Ridge Dr			10 <sup>M</sup>	1	7	2018	3		
	City Sandy Hook	State CT	Zip Code 06482-1573		saction ID					
	FEC ID number of contributing federal political committee.	С			- y			9.62	2	
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) ? & Deputy General Couns RS Law		lemo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 202.02	P/R Dec	duction (\$9	.62 Bi-We	ekly)			
s	UBTOTAL of Receipts This Page (optional)		•••••	Γ.	,	5	ę	90.80		
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			Use separate schedule(s)	(check or	(check only one)					
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c	12	· []	7	
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any pe ddress of any political committee	erson for the	e purpose o ontributions	f soliciting	g contrib	utions		
$\left[ \right]$	NAME OF COMMITTEE (In Full)									
$\left \right\rangle$	Massachusetts Mutual Life Insu	rance Co	mpany Political Action	Commit	tee					
Α.	Full Name of Individual (Last, First, Middle Initi NELSON, DAVID, R., , III	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 4794 BORDAGES RD			10	M M / D D / Y Y Y Y Y 10 17 2018					
	City BEAUMONT	State TX	Zip Code 77705-7675		saction ID					
	FEC ID number of contributing federal political committee.	С					63	3.72	]	
	Name of Employer (for Individual) SELF		upation (for Individual) rance Agent		lemo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 403.90	P/R De	duction (\$3 <sup>.</sup>	1.86 Bi-W	eekly)			
В.	Full Name of Individual (Last, First, Middle Initi Hirschberg, Michael, , MR.,	ial) or Full O	rganization Name	Date	of Receipt					
	Mailing Address 122 Pasadena Pl			10	/ D	D / Y	2018	Y		
	City	State	Zip Code	Tran	saction ID	PR8114	4496251	8		
	Hawthorne	NJ	07506-2806	Amou	nt of Each	Receipt th	nis Perio	d		
	FEC ID number of contributing federal political committee.	С					19	9.25	]	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) ernal Wholesaler		lemo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 404.25	P/R De	duction (\$19	9.25 Bi-We	ekly)			
с.	Full Name of Individual (Last, First, Middle Initi Janco, Paul, , MR.,	ial) or Full O	rganization Name	Date	of Receipt					
	Mailing Address 335 Cedar Ln			10			2018 <sup>°</sup>	Y		
	City New Hartford	State CT	Zip Code 06057-2911		nsaction ID					
	FEC ID number of contributing federal political committee.	С			y		19	9.25	]	
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		ıpation (for Individual) s Manager		Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 415.45	P/R De	duction (\$1	9.25 Bi-W	eekly)			
F	CUBTOTAL of Receipts This Page (optional)			<u>[</u> .	- y -		102	2.22	]	
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check onl	(check only one)					
			for each category of the Detailed Summary Page	★ 11a	11b	11c	12	Г	17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	A point be sold or used by any per address of any political committee	son for the	purpose of	soliciting	g contrib	oution	ns	
$\square$	NAME OF COMMITTEE (In Full)									
$\rangle$	Massachusetts Mutual Life Insur	rance Co	ompany Political Action	Committ	ee					
Α.	Full Name of Individual (Last, First, Middle Initi PLANK, JOSHUA, RYAN, ,	al) or Full O	Date of Receipt							
	Mailing Address 9330 TIMBERWOLF LN			M M 10	/ D 17	D / Y	2018	Y	]	
	City ZIONSVILLE	State IN	Zip Code 46077-8322		saction ID : t of Each F					
	FEC ID number of contributing federal political committee.	С					8	3.32		
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	M	lemo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 833.37	P/R Deduction (\$41.66 Bi-Weekly)						
в.	Full Name of Individual (Last, First, Middle Initi ECKART, SCOTT, WENDELL, ,	al) or Full O	Organization Name	Date o	f Receipt					
	Mailing Address 4559 SUNFLOWER CT			M M 10	/ D 17		2018	Y	]	
	City	State	Zip Code		saction ID :					
	ZIONSVILLE	IN	46077-8118	Amoun	t of Each F	Receipt th	is Perio	bd		
	FEC ID number of contributing federal political committee.	С					5	0.00		
	Name of Employer (for Individual) SELF		upation (for Individual) urance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	eceipt For: Aggregate Year-to-Date ▼ Primary General								
с.	Full Name of Individual (Last, First, Middle Initi Young, Jeanne, G, MS.,	al) or Full O	Organization Name	Date o	f Receipt					
	Mailing Address 10 Pondview Ln			M M 10	/ D 17		2018	Y	1	
	City Southwick	State MA	Zip Code 01077-9264		saction ID : t of Each F			-		
	FEC ID number of contributing federal political committee.	С						8.50		
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) President Corp Business Resou		lemo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 808.50	P/R Dec	duction (\$38	8.50 Bi-We	eekly)			
s	UBTOTAL of Receipts This Page (optional)		•	Ę.	, , , ,	· · ·	17	1.82	-	
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ITEMIZED RECEIPTS			Use separate schedule(s)	(check on	(check only one)						
			for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c	12	Г	17		
Ar or	y information copied from such Reports and Stafor commercial purposes, other than using the	atements ma name and a	I ay not be sold or used by any pe address of any political committee	erson for the	purpose o	of soliciting	g contri	butio	ns		
	NAME OF COMMITTEE (In Full)										
	Massachusetts Mutual Life Insur	ance Co	ompany Political Action	Commit	tee						
Α.	Full Name of Individual (Last, First, Middle Initi Zuber, Lee, M, MR.,	al) or Full C	Organization Name	Date o	of Receipt						
	Mailing Address 5 Andrew Cir			10	10 / Y Y Y Y 10 17 2018						
	City Hampden	State MA	Zip Code 01036-9538		saction ID						
	FEC ID number of contributing federal political committee.	С					1	5.40			
	Name of Employer (for Individual) Massachusetts Mutual Life Insurance Co		upation (for Individual) P Agency Focus Team		lemo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 328.32	P/R Dec	duction (\$1	5.40 Bi-W	eekly)				
в.	Full Name of Individual (Last, First, Middle Initi Belmore, Cindy, , MS.,	al) or Full C	Organization Name	Date o	of Receipt						
	Mailing Address 7 Crystal Dr							r Y	]		
	City Southwick	State MA	Zip Code 01077-9613		saction ID						
	FEC ID number of contributing federal political committee.	C		Amour	nt of Each	Receipt tr		00 26.93			
	Name of Employer (for Individual) MASSACHUSETTS MUTUAL LIFE INS.		upation (for Individual) e President - Compliance		lemo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 565.53	P/R Dec	duction (\$2	6.93 Bi-We	eekly)				
С.	Full Name of Individual (Last, First, Middle Initi GOLDY, JASON, RYAN, ,	al) or Full C	Organization Name	Date o	of Receipt						
	Mailing Address 614 OLD HOLLOW CT			M 10	1	7	2018		]		
	City CLOVER	State SC	Zip Code 29710-6305		saction ID						
	FEC ID number of contributing federal political committee.	С			. , .	. ,	2	25.00			
	Name of Employer (for Individual) SELF		upation (for Individual) Irance Agent		lemo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	P/R Dee	duction (\$1	2.50 Bi-W	eekly)				
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# SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$					
An or	y information copied from such Reports and Stater for commercial purposes, other than using the nar	ments ma ne and ac	ay no Iddre	ot be sold or used by any pe ass of any political committee	ersor to s	for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurar	nce Co	omp	any Political Action	Co	ommittee					
Α.	Full Name of Individual (Last, First, Middle Initial) MassMutual Political Action Committee Mailing Address 1295 State Street	or Full Or	rgan	ization Name	Date of Receipt						
	City	State		Zip Code		10 05 2018 Transaction ID : 78847592					
	Springfield FEC ID number of contributing federal political committee.			01111	_	Amount of Each Receipt this Period 255.71					
	Name of Employer (for Individual)	Occu	upati	on (for Individual)		Memo Item					
	Receipt For:     An       Primary     General       Other (specify) ▼	ggregate `	Year	r-to-Date ▼ 4207.80		Refund of Sept-18 Fed Operating Expenditures					
в.	Full Name of Individual (Last, First, Middle Initial) Mailing Address	or Full Or	rgan	ization Name		Date of Receipt					
	City	State		Zip Code	_	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C									
	Name of Employer (for Individual)	Occu	upati	ion (for Individual)		Memo Item					
	Receipt For:       At         Primary       General         Other (specify) ▼	ggregate `	Year	r-to-Date ▼							
c.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rgan	ization Name		Date of Receipt					
	Mailing Address City	State		Zip Code							
		C				Amount of Each Receipt this Period					
	Name of Employer (for Individual)	Occu	upati	on (for Individual)		Memo Item					
	Receipt For:     And the second	ggregate	Year	r-to-Date ▼							
s	UBTOTAL of Receipts This Page (optional)			•		255.71					
т	OTAL This Period (last page this line number only	)			-	255.71					

FOR LINE NUMBER:

PAGE 250 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
ILEIVIILED KEGEIFIJ		for each category of the Detailed Summary Page	
			13     14     15     ¥     16     17       berson for the purpose of soliciting contributions       e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		duress of any pointcar commute	
Massachusetts Mutual Life Ir	nsurance Co	ompany Political Actior	n Committee
Full Name of Individual (Last, First, Middle Elise For Congress	e Initial) or Full C	organization Name	Date of Receipt
Mailing Address PO Box 500			10 / Y Y Y Y 2018
City Glens Falls	State NY	Zip Code 12801	Transaction ID : 78846333 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0547893	1000.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Receipt For: 2013 Primary ★ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	Refund of 18G contribution
Full Name of Individual (Last, First, Middle B. Georgians For Isakson	e Initial) or Full C	organization Name	Date of Receipt
Mailing Address Post Office Box 250116			10 / Y Y Y Y 10 15 2018
City Atlanta	State GA	Zip Code 30325	Transaction ID : 78847590 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C cod	0384693	2500.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Receipt For: 2022 Primary ★ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	Refund of contribution - orig. dated 11/1/17
Full Name of Individual (Last, First, Middle C. Georgians For Isakson	e Initial) or Full C	organization Name	Date of Receipt
Mailing Address Post Office Box 250116			10 / D D / Y Y Y Y 10 15 2018
City Atlanta	State GA	Zip Code 30325	Transaction ID : 78847591 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0384693	2500.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
Receipt For: 2022 Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00	Refund of contribution - orig. dated 10/19/17
SUBTOTAL of Receipts This Page (optiona	)		6000.00
TOTAL This Period (last page this line num	ber only)		6000.00

Any information copied from such Reports and States or for commercial purposes, other than using the in NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insur Full Name (Last, First, Middle Initial) - American Express Merchant Ser	for each Detailed atements may name and add	ress of any politica	d by Il con	nmittee to	22     23     26     27       28b     28c     29     30b       on for the purpose of soliciting contributions solicit contributions from such committee.			
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American Express Merchant Ser	ance Com vices	ress of any politica	l con	nmittee to	solicit contributions from such committee.			
Massachusetts Mutual Life Insur Full Name (Last, First, Middle Initial) American Express Merchant Ser	Vices		l Ad	ction C				
Full Name (Last, First, Middle Initial) • American Express Merchant Ser	Vices			ction C				
American Express Merchant Ser	State				Date of Disbursement			
		1						
Mailing Address P.O. Box 53852					10 / D D / Y Y Y Y 2018			
City Phoenix				FEC Identification Number				
Purpose of Disbursement AMEX Processing Fees - Sept-18		85072	0	01	C Transaction ID : 78846813			
Candidate Name	date Name Categ Typ							
Office Sought: House Disbur Senate President	sement For: Primary Other (spe	General		<u>, , , , , , , , , , , , , , , , , , , </u>	49.99 AMEX Processing Fees - S			
State: District:		Ciry) V			Memo Item			
Full Name (Last, First, Middle Initial) Chase PaymenTech					Date of Disbursement			
Mailing Address P.O. Box 29534				10 / D D / Y Y Y Y 10 11 2018				
City Phoenix	State AZ	Zip Code 85038			FEC Identification Number			
Purpose of Disbursement Chase PaymenTech Processing Fee	-		C	001	C Transaction ID : 78847490			
Candidate Name				egory/	Amount of Each Disbursement this Period			
Office Sought: House Disbur Senate President	Senate Primary General							
State: District:					Memo Item			
Full Name (Last, First, Middle Initial)					Date of Disbursement			
Mailing Address								
City	State	Zip Code			FEC Identification Number			
Purpose of Disbursement					С			
Candidate Name				egory/ ype	Amount of Each Disbursement this Period			
Office Sought: House Disbur Senate President	sement For: Primary Other (spe	General						
State: District:		·· ·			Memo Item			
SUBTOTAL of Disbursements This Page (optiona	l)			····· ►	60.58			
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	y information copied from such Reports and State for commercial purposes, other than using the na				
$\setminus$	NAME OF COMMITTEE (In Full)	<u>^</u>	<b>B</b> 144		
	Massachusetts Mutual Life Insural	nce Com	ipany Politica	ai Action C	ommittee
A.	Full Name (Last, First, Middle Initial) Friends Of Mark Warner	Date of Disbursement			
	Mailing Address 201 North Union Street Suite 300				10 12 2018
	City Alexandria	State VA	Zip Code 22314		FEC Identification Number
	Purpose of Disbursement Event: Nov. 28, 2018			011	C C00438713 Transaction ID : 78556256
	Candidate Name Warner, Mark, , ,			Category/	Amount of Each Disbursement this Period
	Office Sought: House Disburse	Туре	3000.00		
	State: VA District:	Primary Other (spe	¥ General cify) ▼		Event: Nov. 28, 2018 Memo Item
B.	Full Name (Last, First, Middle Initial) Friends Of Don Beyer Mailing Address 1751 Potomac Greens Drive				Date of Disbursement
	City Alexandria	State VA	Zip Code 22314		FEC Identification Number
	Purpose of Disbursement In-district Event; Oct 29 2018	011	C C00555888 Transaction ID : 78626093		
	Candidate Name Beyer, Don, , Rep.,	Category/ Type	Amount of Each Disbursement this Period		
	Office Sought:     X     House     Disburse       Senate     President	Туре	2500.00 In-district Event; Oct 29 2018 Memo Item		
_	Full Name (Last, First, Middle Initial)				
C.	Republican Majority Fund				Date of Disbursement
	Mailing Address 1316 Alexandria Avenue				10 04 2018
	City Alexandria	State VA	Zip Code 22308		FEC Identification Number
	Purpose of Disbursement Event: October 4, 2018	•		011	C C00296640
	Candidate Name	Category/ Type	Transaction ID : 78644769 Amount of Each Disbursement this Period		
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3500.00 Event: October 4, 2018 Memo Item
					9000.00
	<b>UBTOTAL</b> of Disbursements This Page (optional).			•••••	3000.00
т	OTAL This Period (last page this line number only	/)		••••••	

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			Summary Page			21b 28a	22 28b	-	23 28c		26 29	$\left  - \right $	27 30b	
	y information copied from such Reports and State for commercial purposes, other than using the na				any p	persor	n for the	purpo	ose o	f soli	citing		ntributio	
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)	-				_	-							
	Massachusetts Mutual Life Insura	nce Com	pany Politica	al Ac	tior	n Co	ommitte	ee						
Α.	Full Name (Last, First, Middle Initial) Graves For Congress						Date of	Disb	oursei		Y	Y	YYY	
	Mailing Address PO Box 335						10		01				18	
	City Calhoun	State GA	Zip Code 30703				FEC Ide	entific	cation	Num	nber			
	Purpose of Disbursement Event: October 5, 2018			1	U		16255	1.0		404				
	Candidate Name			Cate	gory	/	Amount		<b>tion</b> ach l				this Pe	eriod
	Graves, Tom, , Rep.,			Ту				_	-		-	2	500.00	
	Office Sought:        X     House     Disbursement For: 2013       Senate     Primary     X       President     Other (specify)							mo It		vent	Octo	_	500.00 5, 201	
	State: GA District: 14						IVIE	mo It	lem					
B.	Full Name (Last, First, Middle Initial) Motor City PAC		Date of	Disb	oursei		Y	Y	YY	-				
	Mailing Address 611 Pennsylvania Ave SE Suite 143		10 08 2018											
	City State Zip Code Washington DC 20003							entific	cation	Nun	nber			
	Purpose of Disbursement 2018 PAC Support	01	11	1	C C00507574									
	Candidate Name		Cate Ty		/	Transaction ID: 78655311 Amount of Each Disbursement this Period				eriod				
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General				5000.00 2018 PAC Support							
	State: District:		(ing)				Me	mo It	tem					
C.	Full Name (Last, First, Middle Initial) Friends Of Cheri Bustos						Date of Disbursement							
	Mailing Address 1050 17th St Nw Ste 590		м м 10	/	05		Y		18					
	City Washington	State DC	Zip Code 20036				FEC Ide	entific	cation	Num	nber			
	Purpose of Disbursement Event: October 2, 2018	11	1	0		19856 stion	1.0	8659	183					
	Candidate Name Category/ Type							Transaction ID : 78659183 Amount of Each Disbursement this Period						
	Office Sought: X House Disbursement For: 2013								3500.00					
	State: IL District: 17 Senate Primary ★ General Other (specify) ▼							Event: October 2, 2018 Memo Item						
	UBTOTAL of Disbursements This Page (optional).							-	_	-		11	1000.00	)
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SC	HEDULE B (FEC Form 3X)			F	OR L	INE	NUMBER: PAGE 254 OF 261				
ITI	EMIZED DISBURSEMENTS	Use sepa for each		heck		/ one) □ 22					
		Detailed	Summary Page			210 28a	22 <b>x</b> 23 20 27 28b 28c 29 30b				
or	y information copied from such Reports and State for commercial purposes, other than using the na										
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)	0				~					
	Massachusetts Mutual Life Insura	nce Com	ipany Politica	al Ac		n C	ommittee				
	Full Name (Last, First, Middle Initial) Blum For Congress						Date of Disbursement				
	Mailing Address 2728 Asbury Road Suite 400										
	City	State	Zip Code				FFO Identification Number				
	Dubuque	IA	52001				FEC Identification Number				
	Purpose of Disbursement 2018 Candidate Support			0	11	٦	C C00543926				
	Candidate Name			Cate	egory	/	Transaction ID : 78690979 Amount of Each Disbursement this Period				
	Blum, Rod, , Rep.,			Ty	ype						
	Office Sought: X House Disburse	ement For: 2	2013 X General				2500.00 2018 Candidate Support				
	State: IA District: 01	President Other (specify)									
_	State: IA District: 01 Full Name (Last, First, Middle Initial)										
В.	Buddy Carter For Congress						Date of Disbursement				
	Mailing Address PO Box 10570		10 02 2018								
	City	State GA	Zip Code 31412		FEC Identification Number						
	Savannah Purpose of Disbursement		C C00543967								
	2018 Candidate Support Candidate Name	C	)11		Transaction ID : 78690984						
	Carter, Buddy, , Rep.,				egory ype	/	Amount of Each Disbursement this Period				
		ment For:	2013	.,	, , , , , , , , , , , , , , , , , , , ,		5000.00 2018 Candidate Support				
	Senate	Primary	<b>x</b> General								
	State: GA District: 01	Other (spec	city)				Memo Item				
-	Full Name (Last, First, Middle Initial)						Date of Disbursement				
0.	Comstock For Congress						M M / D D / Y Y Y Y				
	Mailing Address PO Box 831						10 04 2018				
	City Mc Lean	State VA	Zip Code 22101				FEC Identification Number				
	Purpose of Disbursement 2018 Candidate Support						C C00554261				
	Candidate Name				11 egory		Transaction ID: 78690985 Amount of Each Disbursement this Period				
	Comstock, Barbara, J., Rep.,	7									
	Office Sought: X House Disburse Senate				5000.00						
	President						2018 Candidate Support				
_	State: VA District: 10						Memo Item				
s	UBTOTAL of Disbursements This Page (optional).					•	12500.00				
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	CHEDULE B (FEC Form 3X)	Use sepa			INE N	IUMBER:		P	AGE	255 O	F 261	
	EMIZED DISBURSEMENTS	for each o	category of the Summary Page			21b 28a	22 28b	<b>X</b> 23 28c	26 29		27 30b	
	y information copied from such Reports and Staten for commercial purposes, other than using the nam											
	NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insuran	ice Com	pany Politica	I Ac	ctior	n Co	ommitte	e				
Α.	Full Name (Last, First, Middle Initial) Carlos Curbelo Congress		Date of Disbursement					Ŷ				
	Mailing Address 8724 Sunset Dr #355		10	C	4	_2	018					
	Miami	State FL					_	entificatio	n Numbe	er	_	
	Purpose of Disbursement 2018 Candidate Support		U	C005468 nsaction	46 ID : 786	9098	6					
	Candidate Name Curbelo, Carlos, , Rep.,	//	Amount	of Each	Disburse							
	Office Sought: Senate President State: FL District: 26	President Other (specify)						2500.00 2018 Candidate Support Memo Item				
В.	Full Name (Last, First, Middle Initial)		Date of Disbursement									
	Mailing Address PO Box 387		10		)3		018					
	City     State     Zip Code       West Point     GA     31833       Purpose of Disbursement							FEC Identification Number C C00607838 Transaction ID : 78691213 Amount of Each Disbursement this Period				
	2018 Candidate Support     011       Candidate Name     Category/ Type											
	And Second Prime     And Second Prime       Office Sought:     Image: And Second Prime       Image: And Second Prime     Image: And Second Prime       Image						2500.00 2018 Candidate Support Memo Item					and the second se
C.	Full Name (Last, First, Middle Initial) Jaime For Congress							Date of Disbursement				
	Mailing Address PO Box 1614		10 / D D / Y Y Y Y 2018					Y				
	City Sidgefield Support Suppor		FEC Identification Number C C00472704 Transaction ID : 78691226 Amount of Each Disbursement this Period									
	Herrera-Beutler, Jaime, , ,       Category/ Type         Office Sought:       x       House       Disbursement For: 2013         President       Primary       x       General         State:       WA       District: 03       Other (specify)							no Item	2018 Ca		2500.00	)
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			category of the Summary Page			21b	22	<b>X</b> 23		26		27		
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	NAME OF COMMITTEE (In Full)													
/	Massachusetts Mutual Life Insurar	nce Com	pany Politica	I Ac		n C	ommit	tee						
	Full Name (Last, First, Middle Initial)						Data							
А.	Pete King For Congress Committe		Date of Disbursement											
Ī	Mailing Address PO Box 1428		10		08			018	Ŷ					
	City Seaford	State NY	Zip Code 11783				FEC lo	lentifica	tion	Numbe	r			
	Purpose of Disbursement								221	1				
	2018 Candidate Support		C	C0027	1.0	1.00	400	<u> </u>						
Ī	Candidate Name	/				D:7869 Disburse		-	eriod					
	King, Pete, T., Rep.,				-									
(	~ <u>~</u>	ment For: 2									-	2500.00	)	
	Senate President	Primary	General						2	018 Car	ndida	te Supp	ort	
(	State: NY District: 02	Other (spec	city) 🔻				Me	emo Ite	m					
	Full Name (Last, First, Middle Initial)													
	Cooper For Congress						Date o	f Disbu	rser	nent				
-	Mailing Address D.O. Day 100107											Y	Y	
-	Mailing Address P.O. Box 198497								09		2	018		
	5		FEC lo	lentifica	tion	Numbe	r							
_	Nashville Purpose of Disbursement		С	00007		-								
	2018 Candidate Support	Ш												
(	Candidate Name		/	Transaction ID : 78691228 Amount of Each Disbursement this Period					eriod					
	Cooper, Jim, , Rep.,				egory /pe									
(		ment For: 2										2500.00	)	
	Senate	Primary	<b>x</b> General				2018 Candidate Support					oort		
ç	State: TN District: 05	Other (spec	ciry)				Me	emo Ite	m					
	Full Name (Last, First, Middle Initial)					-								
	Texans For Henry Cuellar Congres	ssional C	Campaign					of Disbu			~ ~		V	
I	Mailing Address 1519 Washington Street Suite 200						10 D D / Y Y Y Y 2018							
	5	State	Zip Code				FEC lo	lentifica	tion	Numbe	r			
	Laredo	ТХ	78040									-		
	Purpose of Disbursement 2018 Candidate Support 011								C C00371302 Transaction ID : 78691242					
(	Cueller Henry Rep				gory	/	Amour	it of Ea	ch [	Disburse	men	t this P	eriod	
7	Cuellar, Henry, , Rep., Type								2500.00					
,	Office Sought:     X     House     Disbursement For: 2013       Senate     Primary     X							2500.00 2018 Candidate Support					- 1	
	President	Other (spec	·							2018 Cai	ndida	ite Supp	oort	
ę	State: TX District: 28						IVIE	emo Ite	m					
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 257 OF 261				
ITEMIZED DISBURSEMENTS	for each	rate schedule(s) category of the Summary Page	(check on 21b 28a	22 🗶 23 🗌 26 🗌 27				
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan								
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insuran	nce Com	pany Politica	al Action (	Committee				
Full Name (Last, First, Middle Initial) A. Davis For Congress/Friends Of Da Mailing Address 5956 W. Race Avenue	Date of Disbursement							
City Chicago								
Purpose of Disbursement 2018 Candidate Support Candidate Name			011	C C00172619 Transaction ID : 78691248				
Davis, Danny, K., Rep.,	ment For: 2 Primary	2013	Category/ Type	Amount of Each Disbursement this Period 3000.00 2018 Candidate Support				
State: IL District: 07	President Other (specify)							
Full Name (Last, First, Middle Initial) B. Valadao For Congress Mailing Address 5132 North Palm Avenue								
#227 City Fresno Purpose of Disbursement 2018 Candidate Support	FEC Identification Number							
Candidate Name Valadao, David, G., Rep., Office Sought: X House Disburser Senate President State: CA District: 21	Candidate Name     Catego Type       Valadao, David, G., Rep.,     Disbursement For: 2013       Office Sought:     x       President     Primary       X     General       Other (specify)							
Full Name (Last, First, Middle Initial) C. Walker 4 Nc				Date of Disbursement				
Mailing Address PO Box 99247		Zip Code		10 10 2018				
City Raleigh Purpose of Disbursement 2018 Candidate Support Candidate Name	011 Category/ Type	FEC Identification Number C C00543231 Transaction ID : 78698850 Amount of Each Disbursement this Period						
Walker, Mark, , Rep.,         Office Sought:       x       House       Disburser         Senate       President       Image: Construct to the senate       Image: Construct to the senate         State:       NC       District:       06	2500.00 2018 Candidate Support Memo Item							
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			F	8000.00				

S	CHEDULE B (FEC Form 3X)			F	DR I		IUMBER:	PAGE 258 OF	261			
IT	EMIZED DISBURSEMENTS	Use sepa for each			only	one)						
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	for commercial purposes, other than using the nan								5			
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)		n a ma Daliti a									
	Massachusetts Mutual Life Insurar	ice Com	pany Politica				ommittee					
Δ	Full Name (Last, First, Middle Initial)		Date of Disbursement									
Λ.	Loebsack For Congress											
	Mailing Address PO Box 3013		10	05 2018								
	5	State	Zip Code				FEC Identifica	ation Number				
	Iowa City Purpose of Disbursement	IA	52244				0 00044	4040				
	2018 Candidate Support			0	11		C C0041	A CONTRACTOR OF				
	Candidate Name			Cate	egory			Transaction ID: 78699063 bunt of Each Disbursement this Period				
	Loebsack, David, Wayne, Rep.,	y/			ou							
	Office Sought: 🗶 House Disburser	ment For: 2	2013					2500.00				
	Senate	Primary	<b>X</b> General					2018 Candidate Support	t			
	State: IA District: 02	Other (spec	city) 🔻				Memo Ite					
	Full Name (Last, First, Middle Initial)											
В.		Sherman For Congress										
	Chemian of Congress		M M /									
	Mailing Address 777 S. Figueroa Street Suite 4050		10 09 2018									
	City		FEC Identifica	ation Number								
	Los Angeles Purpose of Disbursement		0 00000	0740								
	2018 Candidate Support		C C0030	A CONTRACTOR OF								
	Candidate Name						Transaction ID : 78699125 Amount of Each Disbursement this Period					
	Sherman, Brad, , Rep.,				egory /pe	,	2500.00					
		ment For: 2										
	Senate	Primary	<b>x</b> General				2018 Candidate Support					
	State: CA District: 30	Other (spec	ciry)				Memo Ite	em				
	Full Name (Last, First, Middle Initial)											
C.	Mark Takano For Congress						Date of Disbursement					
	Mailing Address PO Box 5214											
	City	State	Zip Code				FEC Identifica	ation Number				
	Riverside	CA	92517									
	Purpose of Disbursement 2018 Candidate Support			0	11		C C0049	98667 ion ID : 78699126				
	Candidate Name				gor	y/	Amount of Ea	ach Disbursement this Perio	od			
	Takano, Mark, , Rep.,Office Sought:rrHouseDisburser	ment For: 2	2012	Ę	/pe			2500.00				
	Office Sought: X House Disburser				_							
	President	Primary Other (spec	<b>x</b> General (ify) <b>▼</b>				Memo Ite	2018 Candidate Support	ι			
	State: CA District: 41											
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SCHEDULE B (FEC Form 3	BX)			FC	DR LIN	E NUMBER: PAGE 259 OF 261				
ITEMIZED DISBURSEMENTS	6	for each	arate schedule(s) category of the Summary Page			nly one) b 22 X 23 26 27				
						rson for the purpose of soliciting contributions to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life	Insurar	nce Com	pany Politic	al Ac	tion	Committee				
Full Name (Last, First, Middle Initial) A. Tenney For Congress						Date of Disbursement				
Mailing Address 28 Robinson Road PO Box 128										
City Clinton	:	State NY	Zip Code 13323			FEC Identification Number				
Purpose of Disbursement 2018 Candidate Support				0	11	C C00561183 Transaction ID : 78699129				
Candidate Name Tenney, Claudia, , Rep.,					egory/ /pe	Amount of Each Disbursement this Period				
Office Sought: Senate President State: NY District: 22	ment For: 2 Primary Other (spec	X General			2500.00 2018 Candidate Support Memo Item					
Full Name (Last, First, Middle Initial) B. Brian Higgins For Congress Mailing Address P.O. Box 28	3					Date of Disbursement				
City Buffalo Purpose of Disbursement 2018 Add'I Candidate Support		State NY	Zip Code 14220	0	11	FEC Identification Number				
Candidate Name Higgins, Brian, M., Rep., Office Sought: Senate President State: NY District: 26	Disburser		gory/ vpe	Transaction ID : 78712227 Amount of Each Disbursement this Period 2500.00 2018 Add'I Candidate Suppor Memo Item						
Full Name (Last, First, Middle Initial) C. Insured Retirement Institute	PAC					Date of Disbursement				
Mailing Address 1100 Vermont Avenue, 10th Floor	NW					10 02 2018				
City Washington Purpose of Disbursement 2018 IRI PAC Support Candidate Name	Washington Purpose of Disbursement 2018 IRI PAC Support				11 gory/	FEC Identification Number C C00490474 Transaction ID : 78729292 Amount of Each Disbursement this Period				
Office Sought: House Senate President State: District:	Senate     Primary     General       President     Other (specify)     ▼									
SUBTOTAL of Disbursements This Page						10000.00				

SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE						
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	y one) 22 X 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insura	nce Com	pany Politica	I Action C	Committee					
Full Name (Last, First, Middle Initial) A. Denny Heck For Congress Mailing Address PO Box 235	leck For Congress								
City Olympia	State WA	Zip Code 98507		FEC Identification Number					
Purpose of Disbursement Event: November 30, 2018	urpose of Disbursement Event: November 30, 2018 011								
Candidate Name Heck, Denny, , Rep., Office Sought: x House Disburse	ement For: 2	2013	Category/ Type	Amount of Each Disbursement this Period 2500.00					
State: WA District: 10	Primary Other (spec		Event: November 30, 2018 Memo Item						
Full Name (Last, First, Middle Initial) B. People For Derek Kilmer Mailing Address PO Box 1381				Date of Disbursement					
City Tacoma Purpose of Disbursement 2018 Candidate Support	State WA	Zip Code 98402	011	FEC Identification Number					
Candidate Name Kilmer, Derek, , Rep., Office Sought: K House Senate President	ement For: 2 Primary Other (spec	<b>x</b> General	Category/ Type	Transaction ID : 78753493 Amount of Each Disbursement this Period 2500.00 2018 Candidate Support Memo Item					
State: WA District: 06 Full Name (Last, First, Middle Initial) C. Women2Women PAC				Date of Disbursement					
Mailing Address 2201 Wisconsin Ave., NW Suite 320	Mailing Address 2201 Wisconsin Ave., NW								
City Washington Purpose of Disbursement Void - Uncleared Disbursement (dated 4/5/18) Candidate Name	City     State     Zip Code       Washington     DC     20007       Purpose of Disbursement     Void - Uncleared Disbursement (dated 4/5/18)     011								
Office Sought: House Disburse Senate	ement For: Primary Other (spec	General	Category/ Type	Amount of Each Disbursement this Period - 5000.00 Void - Uncleared Disburseme (dated 4/5/18)					

SCHEDULE B (FEC Form 3X)			FC	OR LINE	NUMBER: PAGE 261 OF 261				
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page		neck onl 21b 28a	y one) 22 🗶 23 26 27				
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar									
NAME OF COMMITTEE (In Full) Massachusetts Mutual Life Insurar	nce Com	pany Politica	al Ac	ction C	Committee				
Full Name (Last, First, Middle Initial)         A. Mark Pocan For Congress         Mailing Address PO Box 327	Mark Pocan For Congress								
City Madison	FEC Identification Number								
Purpose of Disbursement Void - Uncleared Disbursement (dated 4/12/18)	C C00502179 Transaction ID : 78847549								
Candidate Name Pocan, Mark, , Rep., Office Sought: <b>x</b> House Disburser	ment For: 2	2018		egory/ /pe	Amount of Each Disbursement this Period				
Senate President State: WI District: 02	Primary Other (spec	General			Void - Uncleared Disbursemen Memo Item (dated 4/12/18)				
Full Name (Last, First, Middle Initial) B. Pascrell For Congress	Date of Disbursement								
Mailing Address Pob 100	10 08 2018								
City Teaneck Purpose of Disbursement Void - Uncleared Disbursement (dated 5/8/18)	FEC Identification Number								
Candidate Name Pascrell, William, J., Rep., Jr. Office Sought:	Cate	11 gory/ pe	Transaction ID : 78847553 Amount of Each Disbursement this Period - 2500.00 Void - Uncleared Disbursemen (dated 5/8/18)						
Full Name (Last, First, Middle Initial)					Date of Disbursement				
Mailing Address									
	State	Zip Code			FEC Identification Number				
Purpose of Disbursement				egory/ /pe	C Amount of Each Disbursement this Period				
Senate President	ment For: Primary Other (spec	General Cify) ▼		-					
State:       District:         SUBTOTAL of Disbursements This Page (optional)         TOTAL This Period (last page this line number only)					- 5000.00				