

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.
Association for Advanced Life Underwriting PAC (AALU PAC)

ADDRESS (number and street)

 Check if different than previously reported. (ACC) VA

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day Primary (12P) General (12G) Runoff (12R)
PRE-Election Report for the: Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day General (30G) Runoff (30R) Special (30S)
POST-Election Report for the: / / in the State of

5. Covering Period / / through / /

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

Type or Print Name of Treasurer

Signature of Treasurer *[Electronically Filed]* Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Association for Advanced Life Underwriting PAC (AALU PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		<input type="text" value="103928.51"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="193064.51"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="85539"/>	<input type="text" value="252194.6"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="278603.51"/>	<input type="text" value="356123.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="83039.09"/>	<input type="text" value="160558.69"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="195564.42"/>	<input type="text" value="195564.42"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0"/>	

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. 06/2004)

Write or Type Committee Name

Association for Advanced Life Underwriting PAC (AALU PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
03 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2012

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	64500	223800
(ii) Unitemized	4500	10300
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	69000	234100
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	15000	15000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	84000	249100
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	1539	3094.6
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5)	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	85539	252194.6
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	85539	252194.6

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	1539.09	3058.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1539.09	3058.69
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	79000	155000
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2500	2500
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	2500	2500
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	83039.09	160558.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	83039.09	160558.69

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	84000	249100
34. Total Contribution Refunds (from Line 28(d))	2500	2500
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	81500	246600
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1539.09	3058.69
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1539.09	3058.69

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Lawrence Wiener
Full Name (Last, First, Middle Initial)

Mailing Address 3981 N 32nd Terrace

City Hollywood State FL Zip Code 33021-2022

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

Name of Employer Pension Investors Corporation Occupation Life Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200

Date of Receipt 03 / 05 / 2012
Transaction ID : SA11AI-1039-2913-c

Amount of Each Receipt this Period 1200

B. E. Dennis Zahrbock
Full Name (Last, First, Middle Initial)

Mailing Address 738 N Wilson Avenue

City Rice Lake State WI Zip Code 54868-1621

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

Name of Employer Business & Estate Advisers Occupation Life Insurance Underwriter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000

Date of Receipt 03 / 01 / 2012
Transaction ID : SA11AI-1063-2868-c

Amount of Each Receipt this Period 1000

C. James Clary
Full Name (Last, First, Middle Initial)

Mailing Address 18909 N 98th Street

City Scottsdale State AZ Zip Code 85255-6050

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

Name of Employer MullinTBG Occupation Exec. Benefits, Sales & Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000

Date of Receipt 03 / 22 / 2012
Transaction ID : SA11AI-124-2976-c

Amount of Each Receipt this Period 1000

SUBTOTAL of Receipts This Page (optional)..... ▶ 3200.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Milton Cohn
Full Name (Last, First, Middle Initial)

Mailing Address 4444 E Camelback Road #21
City Phoenix State AZ Zip Code 85018-2831

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

Name of Employer CFG Business Solutions, LLC Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3500**

Date of Receipt **03 / 01 / 2012**
Transaction ID : SA11AI-130-2885-c

Amount of Each Receipt this Period **3500**

B. Gus Comiskey Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 5120 Woodway Drive Suite 6002
City Houston State TX Zip Code 77056-1759

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

Name of Employer Clark Consulting Occupation Sr. VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500**

Date of Receipt **03 / 28 / 2012**
Transaction ID : SA11AI-198-2998-c

Amount of Each Receipt this Period **500**

C. Robert Mathis
Full Name (Last, First, Middle Initial)

Mailing Address 5040 Roswell Rd NE
City Atlanta State GA Zip Code 30342-2207

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

Name of Employer Peachtree Planning Corp. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt **03 / 07 / 2012**
Transaction ID : SA11AI-22-2930-c

Amount of Each Receipt this Period **1000**

SUBTOTAL of Receipts This Page (optional)..... **5000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. William Mahoney Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Monarch Place
 Suite 1840
 City Springfield State MA Zip Code 01144-4006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2012
Transaction ID : SA11AI-2418-2923-c
 Amount of Each Receipt this Period
 5000
 Aggregate Year-to-Date ▼
 5000

B. Brad Seitzinger
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 Wilshire Drive
 Suite 300
 City Troy State MI Zip Code 48084-5611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northwestern Mutual Occupation Managing Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2012
Transaction ID : SA11AI-2428-2944-c
 Amount of Each Receipt this Period
 1200
 Aggregate Year-to-Date ▼
 1200

C. Scott Iodice
 Full Name (Last, First, Middle Initial)
 Mailing Address 1930 Old Court Road
 City Ruxton State MD Zip Code 21204-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northwestern Mutual Occupation Managing Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2012
Transaction ID : SA11AI-2456-2918-c
 Amount of Each Receipt this Period
 250
 Aggregate Year-to-Date ▼
 250

SUBTOTAL of Receipts This Page (optional).....▶	6450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Eric Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 85 Adams Street
 Apt. 14B
 City Brooklyn State NY Zip Code 11201-1408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Winged Keel Group Occupation Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2012
Transaction ID : SA11AI-2468-2967-c
 Amount of Each Receipt this Period
 500

B. Johnny Adcock
 Full Name (Last, First, Middle Initial)
 Mailing Address 311 W Fletcher Avenue
 City Tampa State FL Zip Code 33612-3414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Adcock Financial Group Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2012
Transaction ID : SA11AI-2666-2943-c
 Amount of Each Receipt this Period
 500

C. Melvin Warshaw
 Full Name (Last, First, Middle Initial)
 Mailing Address 39 Chatham Circle
 City Wellesley State MA Zip Code 02481-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Fin. Architects Partners Occupation Sr VP-Advisor Relations/Gen. Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2012
Transaction ID : SA11AI-2669-2940-c
 Amount of Each Receipt this Period
 500

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Mark Siegman
Full Name (Last, First, Middle Initial)

Mailing Address 9270 Waits Ferry Crossing

City Johns Creek State GA Zip Code 30097-2453

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

Name of Employer Principal Financial Group Occupation Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1200**

Date of Receipt **03 / 03 / 2012**

Transaction ID : SA11AI-2721-2911-c

Amount of Each Receipt this Period **1200**

B. Aaron Abrahms
Full Name (Last, First, Middle Initial)

Mailing Address 7 Dundee Road

City Larchmont State NY Zip Code 10538-1422

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

Name of Employer Winged Keel Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500**

Date of Receipt **03 / 22 / 2012**

Transaction ID : SA11AI-2725-2968-c

Amount of Each Receipt this Period **500**

C. Tom Robinson Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 7413 Westview Drive

City Houston State TX Zip Code 77055-5100

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

Name of Employer New York Life Occupation Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt **03 / 01 / 2012**

Transaction ID : SA11AI-2732-2882-c

Amount of Each Receipt this Period **1000**

SUBTOTAL of Receipts This Page (optional).....▶	2700.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Frank Congilose
 Full Name (Last, First, Middle Initial)
 Mailing Address 2431 Atlantic Avenue
 City Manasquan State NJ Zip Code 08736-1014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Congilose & Associates Occupation General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2012
Transaction ID : SA11AI-2733-2910-c
 Amount of Each Receipt this Period
 5000

B. Joseph Guyton
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 416
 City Rye Beach State NH Zip Code 03871-0416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Bulfinch Family Office Occupation Financial Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2012
Transaction ID : SA11AI-2736-2908-c
 Amount of Each Receipt this Period
 1000

C. Mark Eden
 Full Name (Last, First, Middle Initial)
 Mailing Address 5299 Long Island Drive NW
 City Atlanta State GA Zip Code 30327-4909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nease Lagana Eden & Culley Occupation Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 27 / 2012
Transaction ID : SA11AI-274-2996-c
 Amount of Each Receipt this Period
 250

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Michael McNeil
Full Name (Last, First, Middle Initial)

Mailing Address 1 Eliot Place

City State Zip Code
Fairfield CT 06824-5154

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

Name of Employer Occupation
Northwestern Mutual Financial Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200

Date of Receipt
03 / 13 / 2012
Transaction ID : SA11AI-2795-2947-c

Amount of Each Receipt this Period
1200

B. Leslie Zuckerman
Full Name (Last, First, Middle Initial)

Mailing Address 1208 SE 7th Street

City State Zip Code
Fort Lauderdale FL 33301-3028

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

Name of Employer Occupation
FDR Management Wealth Management/Insurance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000

Date of Receipt
03 / 01 / 2012
Transaction ID : SA11AI-2815-2889-c

Amount of Each Receipt this Period
1000

C. Mark Connelly
Full Name (Last, First, Middle Initial)

Mailing Address 3040 Post Oak Boulevard
Suite 400

City State Zip Code
Houston TX 77056-6583

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

Name of Employer Occupation
Wealth Design Group Financial Planner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300

Date of Receipt
03 / 19 / 2012
Transaction ID : SA11AI-2816-2962-c

Amount of Each Receipt this Period
100

SUBTOTAL of Receipts This Page (optional).....▶	2300.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Adam Kaufman
Full Name (Last, First, Middle Initial)

Mailing Address 80 Crossways Park Drive W

City Woodbury State NY Zip Code 11797-2000

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

Name of Employer Sound Wealth Financial Group Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2500**

Date of Receipt **03 / 16 / 2012**

Transaction ID : SA11AI-2834-2963-c

Amount of Each Receipt this Period **2500**

B. James Dargusch
Full Name (Last, First, Middle Initial)

Mailing Address 18 Upton Way

City Sewell State NJ Zip Code 08080-3619

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

Name of Employer Northeast Planning Corp. Occupation Managing Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1200**

Date of Receipt **03 / 27 / 2012**

Transaction ID : SA11AI-2841-2997-c

Amount of Each Receipt this Period **1200**

c. R.Graham Self
Full Name (Last, First, Middle Initial)

Mailing Address 1009 Slater Road Suite 210

City Durham State NC Zip Code 27703-8446

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

Name of Employer Penn Mutual Occupation Managing Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250**

Date of Receipt **03 / 01 / 2012**

Transaction ID : SA11AI-2993-2886-c

Amount of Each Receipt this Period **250**

SUBTOTAL of Receipts This Page (optional).....▶	3950.00
TOTAL This Period (last page this line number only).....▶	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Tim FitzGerald
 Full Name (Last, First, Middle Initial)
 Mailing Address 1754 E 70th Street
 City Shreveport State LA Zip Code 71105-5213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New York Life Occupation TFG Financial
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2012
Transaction ID : SA11AI-3018-2926-c
 Amount of Each Receipt this Period
 1200

B. Seth Medalie
 Full Name (Last, First, Middle Initial)
 Mailing Address 758 South Street
 City Needham State MA Zip Code 02492-2775
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Bulfinch Group Occupation Financial Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2012
Transaction ID : SA11AI-3022-2945-c
 Amount of Each Receipt this Period
 500

C. Jonathan Forster
 Full Name (Last, First, Middle Initial)
 Mailing Address 9709 Eldwick Way
 City Potomac State MD Zip Code 20854-2036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Greenberg Traurig, LLP Occupation Life Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2012
Transaction ID : SA11AI-312-2869-c
 Amount of Each Receipt this Period
 5000

SUBTOTAL of Receipts This Page (optional).....▶	6700.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Campbell Gerrish
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 Broadway
 Floor 34
 City New York State NY Zip Code 10019-5905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Winged Keel Group, Inc. Occupation Principal and Founder
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 12 / 2012
Transaction ID : SA11AI-335-2937-c
 Amount of Each Receipt this Period
 1000

B. Gene Gilmore
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 295
 City Grand Rapids State MI Zip Code 49501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Northwestern Mutual Life Occupation Financial Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2012
Transaction ID : SA11AI-341-2957-c
 Amount of Each Receipt this Period
 500

C. George Groome
 Full Name (Last, First, Middle Initial)
 Mailing Address 1127B Hendersonville Road
 City Asheville State NC Zip Code 28803-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Colton Groome & Company Occupation Life Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2012
Transaction ID : SA11AI-367-2978-c
 Amount of Each Receipt this Period
 250

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. John Lagana
Full Name (Last, First, Middle Initial)

Mailing Address 2100 Riveredge Parkway NW
Suite 200

City Atlanta State GA Zip Code 30328-4663

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

Name of Employer Nease Lagana Eden & Culley Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 06 / 2012

Transaction ID : SA11AI-530-2916-c

Amount of Each Receipt this Period
2000

B. William Leisman III
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 549020

City Waltham State MA Zip Code 02454

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

Name of Employer Leisman Insurance Agency, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2012

Transaction ID : SA11AI-544-2904-c

Amount of Each Receipt this Period
2000

C. Michael Liebeskind
Full Name (Last, First, Middle Initial)

Mailing Address 18 Hunting Hollow Drive

City Cleveland State OH Zip Code 44124-5247

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

Name of Employer Winged Keel Group, Inc. Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 12 / 2012

Transaction ID : SA11AI-555-2936-c

Amount of Each Receipt this Period
500

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Douglas McCallum
 Full Name (Last, First, Middle Initial)
 Mailing Address 10900 NE 8th Street
 Suite 1600
 City Bellevue State WA Zip Code 98004-8556
 Name of Employer Financial Resources Group Occupation Life Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2012
Transaction ID : SA11AI-598-2975-c
 Amount of Each Receipt this Period
 5000

B. Patrick McNamara
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 554
 24 Frank Lloyd Wright Dr, H 3050
 City Ann Arbor State MI Zip Code 48106-0554
 Name of Employer Financial Concepts, Inc. Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2012
Transaction ID : SA11AI-612-2909-c
 Amount of Each Receipt this Period
 500

C. William Cassidy
 Full Name (Last, First, Middle Initial)
 Mailing Address 2507 W Prospect Road
 City Tampa State FL Zip Code 33629-5355
 Name of Employer Cassidy & Company, LLC Occupation Financial Professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2012
Transaction ID : SA11AI-65-2946-c
 Amount of Each Receipt this Period
 1000

SUBTOTAL of Receipts This Page (optional).....	6500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. James Morrison
Full Name (Last, First, Middle Initial)

Mailing Address 13321 Chapel Rd

City Lorena State TX Zip Code 76655

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

Name of Employer Jim Morrison Financial Occupation Insurance/ Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500**

Date of Receipt
03 / 29 / 2012
Transaction ID : SA11AI-654-3001-c

Amount of Each Receipt this Period
1500

B. John Mulheran
Full Name (Last, First, Middle Initial)

Mailing Address 8900 Keystone Crossing Suite 550

City Indianapolis State IN Zip Code 46240-7645

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

Name of Employer Highland Capital Brokerage Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt
03 / 13 / 2012
Transaction ID : SA11AI-658-2948-c

Amount of Each Receipt this Period
500

C. John Mulheran
Full Name (Last, First, Middle Initial)

Mailing Address 8900 Keystone Crossing Suite 550

City Indianapolis State IN Zip Code 46240-7645

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

Name of Employer Highland Capital Brokerage Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt
03 / 13 / 2012
Transaction ID : SA11AI-658-2949-c

Amount of Each Receipt this Period
500

SUBTOTAL of Receipts This Page (optional)..... ▶ **2500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Matthew Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Mulberry Lane
 City New Rochelle State NY Zip Code 10804-4316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Winged Keel Group, Inc. Occupation Financial Adviser
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **500**

Date of Receipt **03 / 12 / 2012**
Transaction ID : SA11AI-712-2938-c
 Amount of Each Receipt this Period **500**

B. Jay Pollack
 Full Name (Last, First, Middle Initial)
 Mailing Address 660 Wilmot Road
 City Deerfield State IL Zip Code 60015-3957
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mesirow Financial Occupation Life Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **500**

Date of Receipt **03 / 16 / 2012**
Transaction ID : SA11AI-721-2965-c
 Amount of Each Receipt this Period **500**

C. Reginald Rabjohns
 Full Name (Last, First, Middle Initial)
 Mailing Address 417 Pebblebrook Road
 City Northbrook State IL Zip Code 60062-5512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rabjohns Financial Group Occupation Life Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1000**

Date of Receipt **03 / 06 / 2012**
Transaction ID : SA11AI-738-2917-c
 Amount of Each Receipt this Period **1000**

SUBTOTAL of Receipts This Page (optional)..... **2000.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 39
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Richard Ray
Full Name (Last, First, Middle Initial)

Mailing Address 6418 Crystal Point

City Missouri City State TX Zip Code 77459-3055

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

Name of Employer Occupation
Guardian General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000

Date of Receipt
03 / 01 / 2012
Transaction ID : SA11AI-745-2884-c

Amount of Each Receipt this Period
1000

B. Lawrence Raymond
Full Name (Last, First, Middle Initial)

Mailing Address 230 Woodberry Drive

City Bloomfield State MI Zip Code 48304-3561

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

Name of Employer Occupation
Alliance Benefit Group of MI President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000

Date of Receipt
03 / 16 / 2012
Transaction ID : SA11AI-746-2964-c

Amount of Each Receipt this Period
2000

C. James Belk
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1520

City Richmond State VA Zip Code 23218-1520

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

Name of Employer Occupation
BCG Companies Founder/Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000

Date of Receipt
03 / 13 / 2012
Transaction ID : SA11AI-777-2939-c

Amount of Each Receipt this Period
1000

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Paul Berlin
Full Name (Last, First, Middle Initial)

Mailing Address 618 N Armour Street

City Chicago State IL Zip Code 60642-6108

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

Name of Employer Executive Planning Inc. Occupation Life Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **700**

Date of Receipt **03 / 27 / 2012**

Transaction ID : SA11AI-788-2995-c

Amount of Each Receipt this Period **700**

B. Francis Burke Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 640 Spruce Lane

City Berwyn State PA Zip Code 19312-1457

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

Name of Employer 1934 Group Occupation Financial Adviser

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500**

Date of Receipt **03 / 16 / 2012**

Transaction ID : SA11AI-80-2966-c

Amount of Each Receipt this Period **500**

C. Joel Shapiro
Full Name (Last, First, Middle Initial)

Mailing Address 200 E 66th Street Apt. D302

City New York State NY Zip Code 10065-9188

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

Name of Employer Bartmon, Shapiro & Associates Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000**

Date of Receipt **03 / 06 / 2012**

Transaction ID : SA11AI-889-2915-c

Amount of Each Receipt this Period **1000**

SUBTOTAL of Receipts This Page (optional)..... ▶ **2200.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)
A. Simon Singer

Mailing Address 4266 Valley Meadow Road

City Encino	State CA	Zip Code 91436-3439
----------------	-------------	------------------------

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

Name of Employer XEL Fin. & Ins. Services	Occupation Life Insurance Agent
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2012

Transaction ID : SA11AI-907-2974-c

Amount of Each Receipt this Period
500

Full Name (Last, First, Middle Initial)
B. Roger B. Sutton

Mailing Address 1002 Jefferson Wood Lane

City Greensboro	State NC	Zip Code 27410-3549
--------------------	-------------	------------------------

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

Name of Employer The Todd Organization	Occupation Sr VP/General Counsel & Secy
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2012

Transaction ID : SA11AI-948-2905-c

Amount of Each Receipt this Period
1000

Full Name (Last, First, Middle Initial)
C. Jack Turner

Mailing Address PO Box 627

City Clarksville	State TN	Zip Code 37041-0627
---------------------	-------------	------------------------

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

Name of Employer Jack B. Turner & Associates	Occupation President
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2012

Transaction ID : SA11AI-989-2924-c

Amount of Each Receipt this Period
500

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. E. Hardy Vaughn
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 532017

City Orlando	State FL	Zip Code 32853-2017
-----------------	-------------	------------------------

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

Name of Employer The Vaughn Group, Inc.	Occupation Partner
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2012

Transaction ID : SA11AI-998-2867-c

Amount of Each Receipt this Period
1000

B.
Full Name (Last, First, Middle Initial)
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	64500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. Greenberg Traurig, P.A. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 State Street
 Floor 6
 City Albany State NY Zip Code 12207-2510
 FEC ID number of contributing federal political committee. **C** C00266585
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2012
Transaction ID : SA11C-3017-2870-c
 Amount of Each Receipt this Period
 5000

B. Metlife Inc. Employees Political
 Full Name (Last, First, Middle Initial)
 Mailing Address Participation Fund A
 1095 Avenue Of The Americas
 City New York State NY Zip Code 10036-6797
 FEC ID number of contributing federal political committee. **C** C00040923
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2012
Transaction ID : SA11C-3032-2999-c
 Amount of Each Receipt this Period
 5000

C. New York Life Insurance PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 51 Madison Avenue
 Room 1109
 City New York State NY Zip Code 10010-1603
 FEC ID number of contributing federal political committee. **C** C00158881
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2012
Transaction ID : SA11C-2248-2921-c
 Amount of Each Receipt this Period
 5000

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	15000.00

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

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

FOR LINE NUMBER: PAGE 25 OF 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

A. AALU
 Full Name (Last, First, Middle Initial)
 Mailing Address 11921 Freedom Dr
 Suite 1100
 City Reston State VA Zip Code 20190
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3094.6

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2012
Transaction ID : SA17-1186-2941-m
 Amount of Each Receipt this Period
 1539
 Merchant Fee Reimbursement

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1539.00
TOTAL This Period (last page this line number only).....▶	1539.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. United Bank

Mailing Address 1801 Reston Parkway

City Reston State VA Zip Code 20190

Purpose of Disbursement
PAC Merchant Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B-2934-3023-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Allyson Schwartz For Congress

Mailing Address PO Box 2232

City State Zip Code
Jenkintown PA 19046-0832

Purpose of Disbursement
Contribution

011

Candidate Name

Allyson Y. Schwartz

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2012

Transaction ID : SB23-2370-2979-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

B. Ben Cardin For Senate

Mailing Address PO Box 21093

City State Zip Code
Catonsville MD 21228-0593

Purpose of Disbursement
Contribution

011

Candidate Name

Benjamin L. Cardin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2012

Transaction ID : SB23-2843-2953-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

C. Ben Cardin For Senate

Mailing Address PO Box 21093

City State Zip Code
Catonsville MD 21228-0593

Purpose of Disbursement
Contribution

011

Candidate Name

Benjamin L. Cardin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		28		2012

Transaction ID : SB23-2843-3008-e

Amount of Each Disbursement this Period

1000

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

3000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Bill Johnson For Congress Committee

Mailing Address PO Box 11496

City Poland State OH Zip Code 44514

Purpose of Disbursement
Contribution

011

Candidate Name

Bill Johnson

Category/
Type

Office Sought: House
 Senate
 President
State: OH District: 06

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2012

Transaction ID : SB23-3019-2933-e

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

B. Blumenauer For Congress

Mailing Address 830 NE Holladay Street
Suite 105

City Portland State OR Zip Code 97232-5105

Purpose of Disbursement
Contribution

011

Candidate Name

Earl Blumenauer

Category/
Type

Office Sought: House
 Senate
 President
State: OR District: 03

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2012

Transaction ID : SB23-1201-2990-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

C. Congressional Trust 2012

Mailing Address 228 S Washington Street
Suite 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2012

Transaction ID : SB23-2642-3012-e

Amount of Each Disbursement this Period

15000

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

18000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. CPE Victory Fund

Mailing Address PO Box 13882

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement
Contribution to JFC

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2012

Transaction ID : SB23-3025-2985-e

Amount of Each Disbursement this Period

3000

Full Name (Last, First, Middle Initial)

B. Crowley For Congress

Mailing Address 8456 Grand Avenue

City Elmhurst State NY Zip Code 11373-4352

Purpose of Disbursement
Contribution

011

Candidate Name

Joseph Crowley

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 07

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2012

Transaction ID : SB23-1198-3007-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

C. Dave Camp For Congress

Mailing Address 5915 Eastman Avenue
Suite 100

City Midland State MI Zip Code 48640-6824

Purpose of Disbursement
Contribution

011

Candidate Name

David Lee Camp

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 04

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2012

Transaction ID : SB23-1221-2992-e

Amount of Each Disbursement this Period

1000

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

5000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Denham For Congress

Mailing Address 2150 River Plaza Drive
Suite 150

City Sacramento State CA Zip Code 95833-4131

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Jeff Denham

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2012

Transaction ID : SB23-3030-2988-e

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

B. Fitzpatrick For Congress

Mailing Address PO Box 185

City Langhorne State PA Zip Code 19047-0185

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Michael G. Fitzpatrick

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

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2012

Transaction ID : SB23-2830-2989-e

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

C. Friends of Frank Guinta

Mailing Address PO Box 877

City Manchester State NH Zip Code 03105-0877

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Frank Guinta

Office Sought: House
 Senate
 President
State: NH District: 01

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2012

Transaction ID : SB23-2837-3010-e

Amount of Each Disbursement this Period

2500

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

6500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Friends of Mary Landrieu

Mailing Address 700 13th Street NW
Suite 600

City Washington State DC Zip Code 20005-3960

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Mary L. Landrieu

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: LA District:

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2012

Transaction ID : SB23-3034-3005-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

B. Huizenga For Congress

Mailing Address 441 Williams Court

City Zeeland State MI Zip Code 49464-1509

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

William P. Huizenga

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 02

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2012

Transaction ID : SB23-2773-2931-e

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

C. Huizenga For Congress

Mailing Address 441 Williams Court

City Zeeland State MI Zip Code 49464-1509

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

William P. Huizenga

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 02

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2012

Transaction ID : SB23-2773-2932-e

Amount of Each Disbursement this Period

500

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

3500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. John Carney For Congress

Mailing Address PO Box 2162

City State Zip Code
Wilmington DE 19899-2162

Purpose of Disbursement
Contribution

011

Candidate Name
John Charles Carney Jr.

Category/
Type

Office Sought: House
 Senate
 President
State: DE District: 01

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2012

Transaction ID : SB23-2860-2982-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

B. Kind For Congress Committee

Mailing Address 205 5th Avenue S
Suite 428

City State Zip Code
La Crosse WI 54601-4059

Purpose of Disbursement
Contribution

011

Candidate Name
Ron Kind

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 03

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : SB23-1210-3002-e

Amount of Each Disbursement this Period

2500

Full Name (Last, First, Middle Initial)

C. Kinzinger For Congress

Mailing Address PO Box 487

City State Zip Code
New Lenox IL 60451-0487

Purpose of Disbursement
Contribution

011

Candidate Name
Adam Kinzinger

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 11

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2012

Transaction ID : SB23-2851-2934-e

Amount of Each Disbursement this Period

3000

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

6500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Larson For Congress

Mailing Address 29 Ruff Circle

City Glastonbury State CT Zip Code 06033-1437

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

John B. Larson

Office Sought: House
 Senate
 President
State: CT District: 01

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB23-2250-2987-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Majority Committee PAC - MC PAC

Mailing Address PO Box 10134

City Bakersfield State CA Zip Code 93389-0134

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB23-2605-3011-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Majority Victory Fund

Mailing Address (Brooks Fleischmann Huelskamp Labr
25 E Main St

City Richmond State VA Zip Code 23219

Purpose of Disbursement
Contribution to JFC

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB23-3033-3004-e

Amount of Each Disbursement this Period

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

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

Grid for line numbers 21b-30b with checkboxes, where 23 is checked.

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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. McCaskill For Missouri 2012

Mailing Address 700 13th Street NW
Suite 600

City Washington State DC Zip Code 20005-3960

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Claire McCaskill

Office Sought: House Senate President
[Senate checked]

Disbursement For: 2012
Primary General Other (specify)
[Primary checked]

State: MO District:

Date of Disbursement

03 / 13 / 2012

Transaction ID : SB23-2923-2954-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

B. McConnell Senate Committee '14

Mailing Address PO Box 1496

City Louisville State KY Zip Code 40201-1496

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Mitch McConnell

Office Sought: House Senate President
[Senate checked]

Disbursement For: 2014
Primary General Other (specify)
[General checked]

State: KY District:

Date of Disbursement

03 / 21 / 2012

Transaction ID : SB23-1185-2991-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

C. Michael Grimm For Congress

Mailing Address PO Box 270

City Staten Island State NY Zip Code 10310-0270

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name

Michael Grimm

Office Sought: House Senate President
[House checked]

Disbursement For: 2012
Primary General Other (specify)
[Primary checked]

State: NY District: 13

Date of Disbursement

03 / 08 / 2012

Transaction ID : SB23-2903-2935-e

Amount of Each Disbursement this Period

1000

SUBTOTAL of Disbursements This Page (optional).....

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

3000.00

[Empty field]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Moderate Democrats PAC

Mailing Address 303 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-5701

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 13 / 2012

Transaction ID : SB23-3023-2950-e

Amount of Each Disbursement this Period

5000

Full Name (Last, First, Middle Initial)

B. Montanans For Tester

Mailing Address PO Box 1135

City Helena State MT Zip Code 59624-1135

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Jon Tester

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MT District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 13 / 2012

Transaction ID : SB23-2382-2955-e

Amount of Each Disbursement this Period

1000

Full Name (Last, First, Middle Initial)

C. New Democrat Coalition PAC

Mailing Address 607 14th Street NW
Suite 800

City Washington State DC Zip Code 20005-2005

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 13 / 2012

Transaction ID : SB23-2445-2951-e

Amount of Each Disbursement this Period

5000

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

11000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Peters For Congress

Mailing Address PO Box 226

City Bloomfield State MI Zip Code 48303-0226

Purpose of Disbursement
Contribution

011

Candidate Name

Gary Peters

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 09

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2012

Transaction ID : SB23-2363-2952-e

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

B. Pompeo For Congress

Mailing Address PO Box 780146

City Wichita State KS Zip Code 67278-0146

Purpose of Disbursement
Contribution

011

Candidate Name

Michael Richard Pompeo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: KS District: 04

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2012

Transaction ID : SB23-3026-2986-e

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

C. Price For Congress

Mailing Address PO Box 425

City Roswell State GA Zip Code 30077-0425

Purpose of Disbursement
Contribution

011

Candidate Name

Thomas Edmunds Price

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2012

Transaction ID : SB23-2393-2980-e

Amount of Each Disbursement this Period

500

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

4500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Price For Congress

Mailing Address PO Box 425

City Roswell State GA Zip Code 30077-0425

Purpose of Disbursement Contribution

011

Candidate Name

Thomas Edmunds Price

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: GA District: 06

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2012

Transaction ID : SB23-2393-2981-e

Amount of Each Disbursement this Period

500

Full Name (Last, First, Middle Initial)

B. Tiberi For Congress

Mailing Address 2021 E Dbln Grnvll Road Suite 2000

City Columbus State OH Zip Code 43229-3572

Purpose of Disbursement Contribution

011

Candidate Name

Patrick J. Tiberi

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: OH District: 12

Date of Disbursement

MM / DD / YYYY
03 / 28 / 2012

Transaction ID : SB23-2246-3003-e

Amount of Each Disbursement this Period

2500

Full Name (Last, First, Middle Initial)

C. Tom Reed For Congress

Mailing Address PO Box 450

City Victor State NY Zip Code 14564-0450

Purpose of Disbursement Contribution

011

Candidate Name

Thomas W. Reed III

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: NY District: 29

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2012

Transaction ID : SB23-3041-3022-e

Amount of Each Disbursement this Period

1000

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

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Van Hollen for Congress

Mailing Address 10537 Saint Paul Street

City Kensington State MD Zip Code 20895-2625

Purpose of Disbursement
Contribution

Candidate Name
Christopher Van Hollen

Office Sought: House Senate President
State: MD District: 08
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2012

Transaction ID : SB23-1234-3009-e

Amount of Each Disbursement this Period

2000

B. Yoder For Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 26742

City Overland Park State KS Zip Code 66225-6742

Purpose of Disbursement
Contribution

Candidate Name
Kevin W. Yoder

Office Sought: House Senate President
State: KS District: 03
Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2012

Transaction ID : SB23-3036-3006-e

Amount of Each Disbursement this Period

2000

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

4000.00

79000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Association for Advanced Life Underwriting PAC (AALU PAC)

Full Name (Last, First, Middle Initial)

A. Executive Financial Group

Mailing Address 1051 Perimeter Drive
Suite 1125

City Schaumburg State IL Zip Code 60173-5059

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB28a-3016-2956-e

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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