

# 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.

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on  /  /  in the State of

(d) 30-Day **POST-Election** Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on  /  /  in the State of

5. Covering Period  /  /  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 JON W DOWIE

Signature of Treasurer JON W DOWIE [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

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-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="2016"/>	<input type="text" value="76289.95"/>	<input type="text" value="76289.95"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="818388.44"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="78923.93"/>	<input type="text" value="284607.38"/>
(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="897312.37"/>	<input type="text" value="1050897.33"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="151853.25"/>	<input type="text" value="305438.21"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="745459.12"/>	<input type="text" value="745459.12"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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. 06/2004)

Page 3

Write or Type Committee Name

NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)

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

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).....	11580.00	40800.00
(ii) Unitemized .....	67012.83	243128.67
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	78592.83	283928.67
(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) .....	78592.83	283928.67
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	331.10	678.71
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	78923.93	284607.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	78923.93	284607.38

**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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	36603.25	73438.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	36603.25	73438.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	115250.00	232000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	151853.25	305438.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	151853.25	305438.21

**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) .....	78592.83	283928.67
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	78592.83	283928.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	36603.25	73438.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	36603.25	73438.21

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

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

FOR LINE NUMBER: PAGE 6 OF 54  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. HESTER W BAIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10104 RHODA RD  
 City NEEDVILLE State TX Zip Code 77461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15209**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. JAN M BAPPE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2957 KALAKAUA AVE #210  
 City HONOLULU State HI Zip Code 96815-4612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15204**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. GEORGE R BARDWIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 417 E SYCAMORE AVENUE  
 City EL SEGUNDO State CA Zip Code 90245-2435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15243**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**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 7 OF 54
	(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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. Mr. JAMES B BELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3200 LAKE JOHANNA BLVD  
 APT 173  
 City ARDEN HILLS State MN Zip Code 55112-7944  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15240**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 CONTRIBUTION

**B. NORMAN I. BORGEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11578 OCULTO ROAD  
 City SAN DIEGO State CA Zip Code 92127-1429  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15238**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 CONTRIBUTION

**C. JOHN BULTSMA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4808 S ASH GROVE AVENUE  
 City SIOUX FALLS State SD Zip Code 57103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15186**  
 Amount of Each Receipt this Period  
 310.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	710.00
<b>TOTAL</b> 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 8 OF 54  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. Mr. RICHARD D CARSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13280 BANNER MOUNTAIN TRL  
 City NEVADA CITY State CA Zip Code 95959-8910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15222**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
**CONTRIBUTION**

**B. HANNI M CORDES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 138 1/2 S 24TH ST  
 City PITTSBURGH State PA Zip Code 15203-2265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer REITRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15203**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**C. JOHN CORNETTE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8818 BUTTONWOOD LANE NE  
 City OLYMPIA State WA Zip Code 98516  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15195**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**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 9 OF 54  
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)  
**A. MYRON DOBASHI**

Mailing Address 4206 HARDY ST

City LIHUE State HI Zip Code 96766-1249

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016  
**Transaction ID : SA11AI.15202**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MERLYN B DOLL**

Mailing Address P O BOX 712722

City SANTEE State CA Zip Code 92072

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016  
**Transaction ID : SA11AI.15213**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. Mr. MICHAEL A DZIADZIOLA**

Mailing Address P O BOX 2363

City BRIGHTON State MI Zip Code 48116-6363

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016  
**Transaction ID : SA11AI.15205**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 54
	<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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. CAROL R EK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 907 SYCAMORE PL  
 City MCPHERSON State KS Zip Code 67460-5804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15181**  
 Amount of Each Receipt this Period  
 365.00  
 Memo Item  
 CONTRIBUTION

**B. BEVERLY ENG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 AUGSBURG AVE  
 City BISMARCK State ND Zip Code 58504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15224**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 CONTRIBUTION

**C. THOMAS F ENGELHARDT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20554 N 101ST AVE #2018  
 City PEORIA State AZ Zip Code 85382  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15216**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	815.00
<b>TOTAL</b> 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 54
	<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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. Mr. EDWARD L FERGUSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9056 E VOLTAIRE DR  
 City SCOTTSDALE State AZ Zip Code 85260-4260  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL GOVERNMENT Occupation FEDERAL EMPLOYEE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15183**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 CONTRIBUTION

**B. ANDREW M FINDLAY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2500 TAYLOR AVE  
 City ALEXANDRIA State VA Zip Code 22302-2905  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15219**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 CONTRIBUTION

**C. WILLIAM GANDLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 118 MONROE ST APT 1203  
 City ROCKVILLE State MD Zip Code 20850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15198**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> 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 54
	<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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. HARRY P HEALEY Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1219 42ND STREET NE  
 City CEDAR RAPIDS State IA Zip Code 52402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15230**  
 Amount of Each Receipt this Period 260.00  
 Memo Item  
 CONTRIBUTION

**B. Mr. W RICHARD HIGHTOWER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 316  
 City WATONGA State OK Zip Code 73772-0316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15201**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

**C. Mr. THOMAS N HOBGOOD Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5612 DEBLYN AVENUE  
 City RALEIGH State NC Zip Code 27612-2606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15235**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	710.00
<b>TOTAL</b> 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 13 OF 54  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. ANNETTE IVY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 379 NASH BLVD  
 City SAN ANTONIO State TX Zip Code 78223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15190**  
 Amount of Each Receipt this Period  
 255.00  
 Memo Item  
 CONTRIBUTION

**B. LYLE E JENSEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1817 SW ATHENS AVE  
 City PENDLETON State OR Zip Code 97801-4011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15182**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item  
 CONTRIBUTION

**C. ANDREW J KAPFER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4401 JAYSON LANE  
 City ANNANDALE State VA Zip Code 22003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15192**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 805.00  
**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 14 OF 54  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. RICHARD C KARAKANTAS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 472 PRIMROSE DRIVE  
 City LANSDALE State PA Zip Code 19446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15207**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

**B. Mr. DOUGLAS KIK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2335 DICKENS WAY  
 City EAST LANSING State MI Zip Code 48823-7751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15194**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

**C. WILLIAM J KING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address W5032 GARTON RD  
 City PLYMOUTH State WI Zip Code 53073-2851  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15244**  
 Amount of Each Receipt this Period 220.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 720.00  
**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 15 OF 54  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)  
**A. CAROLYN S KLEIN**

Mailing Address 23445 WATER CIR

City BOCA RATON State FL Zip Code 33486-8548

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11AI.15197**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JEANNE KOWALSKI**

Mailing Address 5410 CONNECTICUT AVE NW #508

City WASHINGTON State DC Zip Code 20015

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11AI.15229**

Amount of Each Receipt this Period  
 200.00

Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. RICHARD D KULHAVY**

Mailing Address 5874 MARETA LN

City LOOMIS State CA Zip Code 95650

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA11AI.15211**

Amount of Each Receipt this Period  
 250.00

Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00

**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 16 OF 54
	<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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. DUANE C LEITER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9115 ACUFF LANE  
 City LENEKA State KS Zip Code 66215-3058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15206**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

**B. HENRY C LESSING**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23400 VIA VENTURA # V22  
 City CUPERTINO State CA Zip Code 95014-6518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15234**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 CONTRIBUTION

**C. Mr. LARRY F LIGHTFOOT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2709 LA STRADA GRANDE HTS  
 City COLORADO SPRINGS State CO Zip Code 80906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15215**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 700.00  
**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 54
	<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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. Mr. PETER MARIOLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2997 FRAZIER COURT  
 City DECATUR State GA Zip Code 30033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FEDERAL GOVERNMENT Occupation FEDERAL EMPLOYEE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15232**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 CONTRIBUTION

**B. MARSHAL L MERRIAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2119 PASEO DEL ORO  
 City SAN JOSE State CA Zip Code 95124-2036  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15233**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. ANDREW MINICZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 233 W SHERIDAN PLACE  
 City LAKE BLUFF State IL Zip Code 60044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15241**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> 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 18 OF 54
	<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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. MARY E MITTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11008 20TH ST E  
 City EDGEWOOD State WA Zip Code 98372  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15220**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 CONTRIBUTION

**B. Mr GEORGE M NOBLIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7927 PLUM ORCHARD WAY  
 City MONTGOMERY State AL Zip Code 36117-4222  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15180**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

**C. Mr. ROGER NORDEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3600 W SAINT GERMAIN ST  
 APT 217  
 City SAINT CLOUD State MN Zip Code 56301-4654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15228**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> 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 19 OF 54  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. Mr. DOUGLAS PHILLIPS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12898 SAPPHIRE PKWY  
 City State Zip Code  
 HOLLAND MI 49424-8229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15212**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. Mr. GORDON K RIEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1216 BAY VIEW CT  
 City State Zip Code  
 EDGEWATER MD 21037-4313  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3025.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15245**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**C. Mr. CHARLES RINKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1610 AHTANUM RD  
 City State Zip Code  
 YAKIMA WA 98903-1220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15189**  
 Amount of Each Receipt this Period  
 270.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 545.00  
**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 20 OF 54  
(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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)  
**A. DENNIS SCOTT**

Mailing Address 120 PEPITO WAY

City FOLSOM	State CA	Zip Code 95630
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15226**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. BRUCE A SMITH**

Mailing Address 14635 W 79TH TER

City LENEXA	State KS	Zip Code 66215
----------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15188**

Amount of Each Receipt this Period  
275.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. GOLDIALU STONE**

Mailing Address P O BOX 95006

City ALBUQUERQUE	State NM	Zip Code 87199
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.15236**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	675.00
<b>TOTAL</b> 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 54
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

**A. Mr. CLIFFORD K TAMANAHA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7324 NUULOLO ST  
 City HONOLULU State HI Zip Code 96825-2540  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15218**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

**B. Mr. TERRY WAMBAUGH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 48 KINGSBURY CIR  
 City CROSSVILLE State TN Zip Code 38558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15223**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 CONTRIBUTION

**C. Mr. FLOYD A ZIMMERMAN Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 434 KATY LN  
 City ENGLEWOOD State OH Zip Code 45322-2306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.15200**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11580.00

**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 22 OF 54
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)  
**A. NARFE PREMIER FEDERAL CREDIT UNION**

Mailing Address 6462 LITTLE RIVER TURNPIKE

City ALEXANDRIA	State VA	Zip Code 22312-1444
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 462.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2016

**Transaction ID : SA17.15041**

Amount of Each Receipt this Period  
 114.64

Memo Item  
 INTEREST INCOME

Full Name (Last, First, Middle Initial)  
**B. NARFE PREMIER FEDERAL CREDIT UNION**

Mailing Address 6462 LITTLE RIVER TURNPIKE

City ALEXANDRIA	State VA	Zip Code 22312-1444
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 580.74

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 31 / 2016

**Transaction ID : SA17.15055**

Amount of Each Receipt this Period  
 118.49

Memo Item  
 INTEREST INCOME

Full Name (Last, First, Middle Initial)  
**C. NARFE PREMIER FEDERAL CREDIT UNION**

Mailing Address 6462 LITTLE RIVER TURNPIKE

City ALEXANDRIA	State VA	Zip Code 22312-1444
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 678.71

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016

**Transaction ID : SA17.15246**

Amount of Each Receipt this Period  
 97.97

Memo Item  
 INTEREST INCOME

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	331.10
<b>TOTAL</b> This Period (last page this line number only).....▶	331.10

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
BANK CHARGES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.15043**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CREDIT CARD FEES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.15044**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. BANK OF AMERICA**

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
BANK CHARGES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : **SB21B.15057**

Amount of Each Disbursement this Period

Memo Item

**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 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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. BANK OF AMERICA**

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CREDIT CARD FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 23 / 2016

Transaction ID : **SB21B.15066**

Amount of Each Disbursement this Period

1067.74

Memo Item

Full Name (Last, First, Middle Initial)

**B. BANK OF AMERICA**

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CREDIT CARD FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2016

Transaction ID : **SB21B.15249**

Amount of Each Disbursement this Period

1001.05

Memo Item

Full Name (Last, First, Middle Initial)

**C. BANK OF AMERICA**

Mailing Address 730 15th STREET NW 4th Fl

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 15 / 2016

Transaction ID : **SB21B.15248**

Amount of Each Disbursement this Period

498.77

Memo Item

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

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

2567.56



**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. DIRECT MAIL PROCESSORS INC**

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
LOCKBOX CHARGES

003

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2016

Transaction ID : SB21B.15049

Amount of Each Disbursement this Period

1032.29

Memo Item

Full Name (Last, First, Middle Initial)

**B. DIRECT MAIL PROCESSORS INC**

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
POSTAGE

003

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2016

Transaction ID : SB21B.15050

Amount of Each Disbursement this Period

1220.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DIRECT MAIL PROCESSORS INC**

Mailing Address 1150 CONRAD COURT

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement  
LOCKBOX CHARGES

003

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : SB21B.15067

Amount of Each Disbursement this Period

89.90

Memo Item

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

2342.19

**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 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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. Mr. JOHN HATTON**

Mailing Address 606 N WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ATTEND DCC ANNUAL ISSUES CONFERENCE (NM)

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

**Transaction ID : SB21B.15179**

Amount of Each Disbursement this Period

1921.61

Memo Item

Full Name (Last, First, Middle Initial)

**B. INTERACTIVE SYSTEM INC**

Mailing Address 2101 GAITHER ROAD  
SUITE 175

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 14 / 2016

**Transaction ID : SB21B.15045**

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERACTIVE SYSTEM INC**

Mailing Address 2101 GAITHER ROAD  
SUITE 175

City ROCKVILLE State MD Zip Code 20850

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2016

**Transaction ID : SB21B.15059**

Amount of Each Disbursement this Period

300.00

Memo Item

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

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

2521.61

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. INTERACTIVE SYSTEM INC**

Mailing Address 2101 GAITHER ROAD  
SUITE 175

City State Zip Code  
ROCKVILLE MD 20850

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2016

Transaction ID : SB21B.15175

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. JESSICA KLEMENT**

Mailing Address 606 N WASHINGTON STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
ATTEND MAIN STREET PAC ANNUAL RETREAT (FL)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2016

Transaction ID : SB21B.15063

Amount of Each Disbursement this Period

1702.93

Memo Item

Full Name (Last, First, Middle Initial)

**C. ALAN LOPATIN**

Mailing Address 4958 BUTTERWORTH NW PL

City State Zip Code  
WASHINGTON DC 20016-4354

Purpose of Disbursement  
ATTEND DCC ANNUAL ISSUES CONFERENCE (NM)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2016

Transaction ID : SB21B.15064

Amount of Each Disbursement this Period

1067.28

Memo Item

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

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

3070.21

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. PAY FLOW PRO**

Mailing Address 6201 POWERS FERRY ROAD  
3RD FLOOR

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2016

Transaction ID : SB21B.15058

Amount of Each Disbursement this Period

139.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. PAY FLOW PRO**

Mailing Address 6201 POWERS FERRY ROAD  
3RD FLOOR

City ATLANTA State GA Zip Code 30339

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 14 / 2016

Transaction ID : SB21B.15174

Amount of Each Disbursement this Period

69.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. PAYMENT SOLUTIONS INC**

Mailing Address PO BOX 30217

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 07 / 2016

Transaction ID : SB21B.15040

Amount of Each Disbursement this Period

298.80

Memo Item

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

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

508.65

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. PAYMENT SOLUTIONS INC**

Mailing Address PO BOX 30217

City State Zip Code  
BETHESDA MD 20824

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.15173**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. PRODUCTION MANAGEMENT GROUP**

Mailing Address 7160 COLUMBIA GATEWAY DRIVE

City State Zip Code  
COLUMBIA MD 21046

Purpose of Disbursement  
POSTAGE FOR PAC JULY MAILING

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.15250**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE AD ANSWER**

Mailing Address 121 CONGRESSIONAL LANE  
6TH FLOOR

City State Zip Code  
ROCKVILLE MD 20852

Purpose of Disbursement  
PAC FULFILLMENT

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

**Transaction ID : SB21B.15178**

Amount of Each Disbursement this Period

Memo Item

**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 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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. THE AD ANSWER**

Mailing Address 121 CONGRESSIONAL LANE  
6TH FLOOR

City ROCKVILLE State MD Zip Code 20852

Purpose of Disbursement  
PAC FULFILLMENT

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21B.15251**

Amount of Each Disbursement this Period

Memo Item

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

Memo Item

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

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. BARON HILL FOR INDIANA**

Mailing Address 3701 PORTER STREET  
NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**Rep. BARON P P HILL**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IN District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

Transaction ID : **SB23.15137**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BENNET FOR COLORADO**

Mailing Address 328 MASSACHUSETTS AVENUE  
NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**MICHAEL BENNET**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CO District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

Transaction ID : **SB23.15166**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BOBBY SCOTT FOR CONGRESS**

Mailing Address 38 IVY STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**ROBERT C SCOTT**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: VA District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

Transaction ID : **SB23.15130**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. BONNIE WATSON COLEMAN FOR CONGRESS**

Mailing Address 918 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BONNIE WATSON COLEMAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NJ District: 12

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SB23.15159**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BRADY FOR CONGRESS**

Mailing Address 104 HUME AVENUE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**Rep. KEVIN BRADY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 08

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SB23.15164**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPUANO FOR CONGRESS**

Mailing Address 38 IVY STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**MIKE CAPUANO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MA District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

**Transaction ID : SB23.15072**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. CARTWRIGHT FOR CONGRESS**

Mailing Address 410 1st St SE STE 310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CONTRIBUTION

011

Candidate Name

**MATT MR CARTWRIGHT**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 17

Date of Disbursement

MM / DD / YYYY  
04 / 20 / 2016

**Transaction ID : SB23.15053**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CARTWRIGHT FOR CONGRESS**

Mailing Address 410 1st St SE STE 310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CONTRIBUTION

011

Candidate Name

**MATT MR CARTWRIGHT**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 17

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SB23.15163**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CASTRO FOR CONGRESS**

Mailing Address 220 I STREET NE, SUITE 110

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement CONTRIBUTION

011

Candidate Name

**Rep. JOAQUIN CASTRO**

Category/Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 20

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2016

**Transaction ID : SB23.15171**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. CITIZENS FOR BOYLE**

Mailing Address 499 S CAPITOL ST SW  
SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**BRENDAN F BOYLE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: PA District: 13

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

**Transaction ID : SB23.15125**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CITIZENS TO ELECT RICK LARSEN**

Mailing Address PO BOX 636

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**RICK R LARSEN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: WA District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 20 / 2016

**Transaction ID : SB23.15054**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CLAY JR FOR CONGRESS**

Mailing Address PO BOX 75214

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**WILLIAM LACY JR CLAY**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MO District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SB23.15155**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

4500.00

**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 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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. CLEAVER FOR CONGRESS**

Mailing Address 413 NEW JERSEY AVE, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**EMANUEL CLEAVER II**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MO District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

Transaction ID : **SB23.15121**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO RE-ELECT LINDA SANCHEZ**

Mailing Address 410 1ST ST SE  
SUITE 310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**LINDA SANCHEZ**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CA District: 38

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

Transaction ID : **SB23.15150**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CROWLEY FOR CONGRESS**

Mailing Address 410 1ST STREET SE  
SUITE 310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**Rep. JOSEPH CROWLEY**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 14

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

Transaction ID : **SB23.15162**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. DONOVAN FOR CONGRESS**

Mailing Address 104 HUME AVENUE

City ALEXANDRIA State VA Zip Code 23301

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**DAN DONOVAN**

Category/  
Type

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

Transaction ID : **SB23.15142**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. EDDIE BERNICE JOHNSON FOR CONGRESS**

Mailing Address 3102 MAPLE AVENUE  
SUITE 605

City DALLAS State TX Zip Code 75201

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**EDDIE BERNICE JOHNSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 30

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

Transaction ID : **SB23.15145**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF CHRIS SMITH**

Mailing Address PO BOX 3184

City HAMILTON State NJ Zip Code 08619

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**Rep. CHRISTOPHER H SMITH**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NJ District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : **SB23.15075**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DAVE JOYCE**

Mailing Address 217 THIRD ST. SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**DAVID P JOYCE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District: 14

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

**Transaction ID : SB23.15124**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF DON BEYER**

Mailing Address 499 SOUTH CAPITOL ST SW  
SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**DONALD STERNOFF JR BEYER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: VA District: 08

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

**Transaction ID : SB23.15083**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF MICHELLE**

Mailing Address 7240 EVANS MILL ROAD

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**MICHELLE LUJAN GRISHAM**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NM District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SB23.15158**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF SCHUMER**

Mailing Address 220 I STREET NE  
#250

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**CHARLES SCHUMER**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NY District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : **SB23.15090**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. GERRY CONNOLLY FOR CONGRESS**

Mailing Address PO BOX 563

City MERRIFIELD State VA Zip Code 22116

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**Rep. GERRY CONNOLLY**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: VA District: 11

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : **SB23.15084**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. HANABUSA FOR HAWAII**

Mailing Address PO BOX 636

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**COLLEEN WAKAKO HANABUSA**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: HI District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2016

Transaction ID : **SB23.15167**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. HIMES FOR CONGRESS**

Mailing Address **410 1ST STREET SE  
SUITE 310**

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Candidate Name  
**JIM HIMES**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: **CT** District: **04**

Disbursement For: **2016**  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB23.15134**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOYER FOR CONGRESS**

Mailing Address **499 S. CAPITOL STREET, SW  
SUITE406**

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Candidate Name  
**Rep. STENY HOYER**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: **MD** District: **05**

Disbursement For: **2016**  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB23.15052**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOYER FOR CONGRESS**

Mailing Address **499 S. CAPITOL STREET, SW  
SUITE406**

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Candidate Name  
**Rep. STENY HOYER**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: **MD** District: **05**

Disbursement For: **2016**  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB23.15119**

Amount of Each Disbursement this Period

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. JACKIE SPEIER FOR CONGRESS**

Mailing Address P. O. BOX 112

City State Zip Code  
**BURLINGAME CA 94011**

Purpose of Disbursement  
**CONTRIBUTION**

Candidate Name  
**JACKIE SPEIER**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CA District: 12

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

**Transaction ID : SB23.15086**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. JAMIE RASKIN FOR CONGRESS**

Mailing Address P.O. BOX 5418

City State Zip Code  
**TAKOMA PARK MD 20913**

Purpose of Disbursement  
**CONTRIBUTION**

Candidate Name  
**JAMIE RASKIN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MD District: 08

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

**Transaction ID : SB23.15139**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. JOYCE BEATTY FOR CONGRESS**

Mailing Address 499 SOUTH CAPITOL STREET, SW  
SUITE 422

City State Zip Code  
**WASHINGTON DC 20003**

Purpose of Disbursement  
**CONTRIBUTION**

Candidate Name  
**JOYCE BEATTY**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: OH District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

**Transaction ID : SB23.15082**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

4500.00



**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 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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. KATIE MCGINTY FOR SENATE**

Mailing Address 10 G STREET NE  
SUITE 470

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**KATHLEEN ALANA MCGINTY**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: PA District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

Transaction ID : **SB23.15144**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. KIRKPATRICK FOR SENATE**

Mailing Address C/O MOLLY ALLEN ASSOCIATES LLC  
412 FIRST STREET SE, SUITE 100

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**ANN KIRKPATRICK**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: AZ District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

Transaction ID : **SB23.15165**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. KUSTER FOR CONGRESS**

Mailing Address 412 1ST STREET SE  
SUITE 100

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name  
**ANN MCLANE KUSTER**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NH District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : **SB23.15087**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. KUSTER FOR CONGRESS**

Mailing Address 412 1ST STREET SE  
SUITE 100

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**ANN MCLANE KUSTER**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NH District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SB23.15157**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LANGEVIN FOR CONGRESS**

Mailing Address 181-A KNIGHT STREET

City WARWICK State RI Zip Code 02886

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**Rep. JIM LANGEVIN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: RI District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

**Transaction ID : SB23.15128**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. LEVIN FOR CONGRESS**

Mailing Address P. O. BOX 37

City ROSEVILLE State MI Zip Code 48066

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**Rep. SANDY LEVIN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MI District: 09

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

**Transaction ID : SB23.15140**

Amount of Each Disbursement this Period

1500.00

Memo Item

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

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

3500.00

**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 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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. LOBIONDO FOR CONGRESS**

Mailing Address **C/O CAROLE GOEAS AND ASSOCIATES LL  
1707 PRINCE ST #5**

City **ALEXANDRIA** State **VA** Zip Code **22314**

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Candidate Name

**Rep. FRANK A, LOBIONDO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: **NJ** District: **02**

Date of Disbursement

/  /

**Transaction ID : SB23.15122**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. MALONEY FOR CONGRESS**

Mailing Address **C/O SILVERBERG ASSOCIATES  
24 EAST 93RD STREET SUITE 4B**

City **NEW YORK** State **NY** Zip Code **10128**

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Candidate Name

**Rep. CAROLYN MALONEY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: **NY** District: **12**

Date of Disbursement

/  /

**Transaction ID : SB23.15089**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. MALONEY FOR CONGRESS**

Mailing Address **C/O SILVERBERG ASSOCIATES  
24 EAST 93RD STREET SUITE 4B**

City **NEW YORK** State **NY** Zip Code **10128**

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Candidate Name

**Rep. CAROLYN MALONEY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: **NY** District: **12**

Date of Disbursement

/  /

**Transaction ID : SB23.15160**

Amount of Each Disbursement this Period

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. MARCIA L FUDGE FOR CONGRESS**

Mailing Address 413 NEW JERSEY AVENUE SE

City WASHINNGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**MARCIA L FUDGE**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: OH District: 11

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : **SB23.15091**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MARK POCAN FOR CONGRESS**

Mailing Address 499 S CAPITOL ST SW  
SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**MARK POCAN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: WI District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 02 / 2016

Transaction ID : **SB23.15092**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MARK TAKAI FOR CONGRESS**

Mailing Address PO BOX 2267

City PEARL CITY State HI Zip Code 96782

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**KYLE MARK TAKAI**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: HI District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : **SB23.15070**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

4000.00

**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 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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. MATSUI FOR CONGRESS**

Mailing Address 1005 12TH STREET, SUITE H

City State Zip Code  
SACRAMENTO CA 95814

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**DORIS MATSUI**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CA District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

**Transaction ID : SB23.15115**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MCCOLLUM FOR CONGRESS**

Mailing Address PO BOX 14131

City State Zip Code  
ST PAUL MN 55114

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**Rep. BETTY MCCOLLUM**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MN District: 04

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

**Transaction ID : SB23.15074**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MCKINLEY FOR CONGRESS**

Mailing Address C/O CAROLE GOEAS AND ASSOCIATES,  
LLC 1707 PRINCE STREET

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**DAVID MCKINLEY**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: WV District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

**Transaction ID : SB23.15172**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. MIKE THOMPSON FOR CONGRESS**

Mailing Address P. O. BOX 10541

City NAPA State CA Zip Code 94581

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**Rep. MIKE THOMPSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	6

**Transaction ID : SB23.15149**

Amount of Each Disbursement this Period

1	2	5	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. MONICA VERNON FOR CONGRESS**

Mailing Address 228 2ND STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**Rep. MONICA W VERNON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	6

**Transaction ID : SB23.15135**

Amount of Each Disbursement this Period

2	0	0	0	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. NAPOLITANO FOR CONGRESS**

Mailing Address 7240 EVANS MILL ROAD

City McLEAN State VA Zip Code 22101

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**GRACE NAPOLITANO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 32

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	6

**Transaction ID : SB23.15116**

Amount of Each Disbursement this Period

1	5	0	0	0
---	---	---	---	---

Memo Item

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

4	7	5	0	0
---	---	---	---	---

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

4	7	5	0	0
---	---	---	---	---

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. NEAL FOR CONGRESS**

Mailing Address 410 1ST STREET SE  
SUITE 310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name

**Rep. RICHARD E NEAL**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 28 / 2016

**Transaction ID : SB23.15154**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'HALLERAN FOR ARIZONA**

Mailing Address 7240 EVANS MILL ROAD

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name

**TOM O'HALLERAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: AZ District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

**Transaction ID : SB23.15132**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PALLONE FOR CONGRESS**

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name

**Rep. FRANK PALLONE Jr.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NJ District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

**Transaction ID : SB23.15076**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

6000.00

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. PAUL TONKO FOR CONGRESS**

Mailing Address 911 CENTRAL AVENUE  
#221

City ALBANY State NY Zip Code 12206

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**PAUL DAVID TONKO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2016

**Transaction ID : SB23.15123**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PEOPLE FOR PATTY MURRAY**

Mailing Address ATTN: TRACEY BUCKMAN  
1602 BELLE VIEW BOULEVARD #510

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**Sen. PATTY MURRAY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District: 00

Date of Disbursement

MM / DD / YYYY  
05 / 16 / 2016

**Transaction ID : SB23.15085**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PEOPLE FOR PATTY MURRAY**

Mailing Address ATTN: TRACEY BUCKMAN  
1602 BELLE VIEW BOULEVARD #510

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**Sen. PATTY MURRAY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District: 00

Date of Disbursement

MM / DD / YYYY  
06 / 21 / 2016

**Transaction ID : SB23.15147**

Amount of Each Disbursement this Period

2000.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. PEOPLE FOR PATTY MURRAY**

Mailing Address **ATTN: TRACEY BUCKMAN  
1602 BELLE VIEW BOULEVARD #510**

City **ALEXANDRIA** State **VA** Zip Code **22307**

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Category/  
Type

Candidate Name

**Sen. PATTY MURRAY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: **WA** District: **00**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	21	/	2016

**Transaction ID : SB23.15148**

Amount of Each Disbursement this Period

3000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. PETE KING FOR CONGRESS COMMITTEE**

Mailing Address **1525 MERIDIAN AVE #208**

City **MIAMI BEACH** State **FL** Zip Code **33139**

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Category/  
Type

Candidate Name

**PETER KING**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: **NY** District: **02**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	21	/	2016

**Transaction ID : SB23.15141**

Amount of Each Disbursement this Period

2500.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. ROBIN KELLY FOR CONGRESS**

Mailing Address **413 NEW JERSEY AVENUE SE**

City **WASHINGTON** State **DC** Zip Code **20003**

Purpose of Disbursement  
**CONTRIBUTION**

**011**

Category/  
Type

Candidate Name

**ROBIN L. KELLY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: **IL** District: **02**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	28	/	2016

**Transaction ID : SB23.15153**

Amount of Each Disbursement this Period

1000.00
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Memo Item

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

6500.00
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**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. ROB WITTMAN FOR CONGRESS**

Mailing Address PO BOX 999

City State Zip Code  
MONTROSS VA 22520

Purpose of Disbursement  
CONTRIBUTION

**011**  
Category/  
Type

Candidate Name  
**ROBERT J WITTMAN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: VA District: 01

Date of Disbursement

/  /

**Transaction ID : SB23.15129**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. RUPPERSBERGER FOR CONGRESS**

Mailing Address 499 S. CAPITOL ST.,SW, SUITE 422

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
CONTRIBUTION

**011**  
Category/  
Type

Candidate Name  
**Rep. DUTCH RUPPERSBERGER**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: MD District: 02

Date of Disbursement

/  /

**Transaction ID : SB23.15051**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. RUSS FOR WISCONSIN**

Mailing Address PO BOX 620061

City State Zip Code  
MIDDLETON WI 53562

Purpose of Disbursement  
CONTRIBUTION

**011**  
Category/  
Type

Candidate Name  
**RUSSELL D FEINGOLD**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: WI District: 00

Date of Disbursement

/  /

**Transaction ID : SB23.15131**

Amount of Each Disbursement this Period

Memo Item

**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)  
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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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. SALUD CARBAJAL FOR CONGRESS**

Mailing Address PO BOX 1290

City State Zip Code  
SANTA BARBARA CA 93102

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**SALUD CARBAJAL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 24

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : **SB23.15068**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SANFORD BISHOP FOR CONGRESS**

Mailing Address C/O MOLLY ALLEN ASSOCIATES, LLC  
412 FIRST STREET SE, SUITE 100

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**Mr. SANFORD D BISHOP Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: GA District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 02 / 2016

Transaction ID : **SB23.15117**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHATZ FOR SENATE**

Mailing Address 220 I STREET NE, SUITE 110

City State Zip Code  
WASHINGTON DC 20002

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BRIAN SCHATZ**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: HI District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : **SB23.15071**

Amount of Each Disbursement this Period

2500.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. SCHATZ FOR SENATE**

Mailing Address 220 I STREET NE, SUITE 110

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BRIAN SCHATZ**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: HI District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

**Transaction ID : SB23.15168**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHNEIDER FOR CONGRESS**

Mailing Address 3701 PORTER ST NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**BRADLEY SCOTT SCHNEIDER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

**Transaction ID : SB23.15136**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SETH MOULTON FOR CONGRESS**

Mailing Address 410 1ST STREET SE, SUITE 310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**SETH MOULTON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MA District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

**Transaction ID : SB23.15118**

Amount of Each Disbursement this Period

1000.00

Memo Item

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. STEPHEN LYNCH FOR CONGRESS COMMITTEE**

Mailing Address P. O. BOX 15

City State Zip Code  
HYDE PARK MA 02137

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**STEPHEN F LYNCH**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MA District: 08

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

**Transaction ID : SB23.15138**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SWALWELL FOR CONGRESS**

Mailing Address C/O MOLLY ALLEN ASSOCIATES, LLC  
412 1ST STREET SE, SUITE 100

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**ERIC MICHAEL SWALWELL**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 15

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 21 / 2016

**Transaction ID : SB23.15133**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. TITUS FOR CONGRESS**

Mailing Address PO BOX 72454

City State Zip Code  
LAS VEGAS NV 89170

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**DINA TITUS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NV District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

**Transaction ID : SB23.15088**

Amount of Each Disbursement this Period

3000.00

Memo Item

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

5500.00

**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)  
**NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE-PAC)**

Full Name (Last, First, Middle Initial)

**A. VAN HOLLEN FOR SENATE**

Mailing Address 10605 CONCORD STREET  
SUITE 202

City KENSINGTON State MD Zip Code 20895

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**CHRIS VAN HOLLEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Primary Debt

State: MD District: 08

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 01 / 2016

**Transaction ID : SB23.15120**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. VAN HOLLEN FOR SENATE**

Mailing Address 10605 CONCORD STREET  
SUITE 202

City KENSINGTON State MD Zip Code 20895

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**CHRIS VAN HOLLEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MD District: 08

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

**Transaction ID : SB23.15169**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. WYDEN FOR SENATE**

Mailing Address 3612 NEWARD STREET NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

**RONALD LEE WYDEN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

**Transaction ID : SB23.15170**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

10000.00

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

115250.00