REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

MAR 20 1 46 PM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
National Committee to Preserve Social Security and Medicare - PAC

ADDRESS (number and street) ☐ Check if different than previously reported
2000 K Street, N.W.

CITY, STATE and ZIP CODE
Washington, D.C. 20006

2. FEC IDENTIFICATION NUMBER
C00172296

3. ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☒ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period Feb. 1, 1995 through Feb. 28, 1995		
6. (a) Cash on Hand January 1, 1995		$ 321,028.70
(b) Cash on Hand at Beginning of Reporting Period	$ 250,815.10	
(c) Total Receipts (from Line 19)	$ 1,228.22	$ 1,805.97
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 252,043.32	$ 322,834.67
7. Total Disbursements (from Line 30)	$ 22,513.20	$ 93,304.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 229,530.12	$ 229,530.12
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
John McDavitt

Signature of Treasurer
John McDavitt

Date
3/17/95

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

FEC FORM 3X
(revised 9/93)

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DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE National Committee to Preserve Social Security and Medicare - PAC

REPORT COVERING PERIOD FROM 2/1/95 TO: 2/28/95

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	0	0	11(a)(i)
ii. Unitemized	24.95	24.95	11(a)(ii)
iii. Total (add i and ii) ➤	24.95	24.95	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a iii, b and c) ➤	24.95	24.95	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	750.00	750.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	453.27	1,031.02	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	1,228.22	1,805.97	19
20. Total Federal Receipts (subtract line 16 from line 19) ➤	1,228.22	1,805.97	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)(i)
ii. Non-Federal Share	0	0	21(a)(ii)
b. Other Federal Operating Expenditures	13.20	29.60	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	13.20	29.60	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	20,000.00	77,750.00	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	24.95	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0	24.95	28(d)
29. Other Disbursements	2,500.00	15,500.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	22,513.20	93,304.55	30
31. Total Federal Disbursements (subtract line 21 a II from line 30) ➤	22,513.20	93,304.55	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	24.95	24.95	32
33. Total Contribution Refunds (from line 28d)	0	24.95	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	24.95	0	34
35. Total Federal Operating Expenditures (add 21 a I and 21 b) ➤	13.20	29.60	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	13.20	29.60	37

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 16

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 Committee to Preserve Social Security & Medicare - PAC

A. Full Name, Mailing Address and ZIP Code Democratic Senatorial Camp. Comm. 430 South Capitol Street, S.E. Washington, DC 20003 Receipt For: ☐ Primary ☐ General ☒ Other (specify): Refund	Name of Employer Occupation Aggregate Year-to-Date $ $750.00	Date (month, day, year) 2-28-95	Amount of Each Receipt this Period $750.00
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	$750.00

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare - PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Riggs National Bank 808 17th Street Washington, DC 20006	Occupation	2-28-95	$ 453.27
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Bank Interest	Aggregate Year-to-Date > $ 1,031.02		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) ..... > $ 453.27

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21b-

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare - PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Riggs National Bank 808 17th Street Washington, DC 20006	Payment of bank charges Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2-28-95	$13.20
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

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

TOTAL This Period (last page this line number only) $13.20

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SCHEDULE B ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE(in full) NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND MEDICARE - PAC

COMMITTEE NAME	PURPOSE	DATE	AMOUNT
FRIENDS OF MAX BAUCUS ADDRESS P.O. BOX 586 CITY HELENA STATE MT ZIP CODE 59624	MAX BAUCUS FOR ELECTION PRIMARY DISTRICT YTD	2/9/95	$1,000.00
SAM BROWNBACK FOR CONGRESS ADDRESS P O BOX 2008 CITY TOPEKA STATE KANSAS ZIP CODE 66601	SAM BROWNBACK FOR ELECTION PRIMARY DISTRICT 02 YTD	2/9/95	$500.00
DURBIN FOR CONGRESS COMMITTEE ADDRESS P.O. BOX 1949 CITY SPRINGFIELD, STATE IL ZIP CODE 62705	RICHARD DURBIN FOR ELECTION PRIMARY DISTRICT 20 YTD	2/9/95	$500.00
Gephardt in Congress Committee ADDRESS 11140 South Towne Square; Suite 201 CITY St. Louis, STATE MO ZIP CODE 63123	RICHARD GEPHARDT FOR ELECTION PRIMARY DISTRICT 03 YTD	2/9/95	$2,000.00
FRIENDS OF PATRICK KENNEDY ADDRESS P O BOC 1356 CITY PROVIDENCE STATE RI ZIP CODE 02903	PATRICK KENNEDY FOR ELECTION PRIMARY DISTRICT 01 YTD	2/9/95	$500.00
PETE KING CONGRESS COMMITTEE ADDRESS P O BOX 1421 CITY SEAFORD STATE NY ZIP CODE 11789	PETER KING FOR ELECTION PRIMARY DISTRICT 03 YTD	2/9/95	$500.00
CITIZENS FOR DAVE OBEY COMMITTEE ADDRESS 512 N. 9TH AVENUE CITY WAUSAU, STATE WI ZIP CODE 54401	DAVID OBEY FOR ELECTION PRIMARY DISTRICT 07 YTD	2/9/95	$500.00
COMMITTEE TO RE-ELECT CONGRESSMAN CHRIS SMITH ADDRESS 217 HANCOCK AVENUE CITY BRIDGEWATER, STATE NJ ZIP CODE 08807	CHRISTOPHER SMITH FOR ELECTION PRIMARY DISTRICT 04 YTD	2/9/95	$500.00

SUBTOTAL of Disbursements This Page (optional) _____

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

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SCHEDULE B ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE(in full) NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND MEDICARE - PAC

COMMITTEE NAME	PURPOSE	DATE	AMOUNT
PETER BLUTE FOR CONGRESS ADDRESS P O BOX 246 CITY WORCESTER STATE MA ZIP CODE 01613-9663	PETER BLUTE FOR ELECTION PRIMARY DISTRICT 03 YTD	2/17/95	$500.00
COLEMAN FOR CONGRESS ADDRESS 555 New Jersey Avenue, N.W.; Suite 201 CITY Washington STATE DC ZIP CODE 20001	RONALD COLEMAN FOR ELECTION PRIMARY DISTRICT 18 YTD	2/17/95	$500.00
LINCOLN DIAZ-BALART FOR CONGRESS COMMITTEE ADDRESS 9737 N.W. 41ST STREET; #131 CITY MAMI STATE FL ZIP CODE 33178	LINCOLN DIAZ-BALART FOR ELECTION PRIMARY DISTRICT 21 YTD	2/17/95	$500.00
John D. Dingell for Congress Committee ADDRESS P. O. Box 2884 CITY Washington, STATE DC ZIP CODE 20013	JOHN DINGELL FOR ELECTION PRIMARY DISTRICT 16 YTD	2/17/95	$1,000.00
ELIZABETH FURSE FOR CONGRESS ADDRESS P O BOX 399 CITY HILLSBORO STATE OR ZIP CODE 97123	ELIZABETH FURSE FOR ELECTION PRIMARY DISTRICT 01 YTD	2/17/95	$500.00
BOB NEY FOR CONGRESS ADDRESS P O BOX 490 CITY ST. CLAIRSVILLE STATE OH ZIP CODE 43950	BOB GNEY FOR ELECTION PRIMARY DISTRICT 18 YTD	2/17/95	$500.00
CONGRESSMAN KILDEE COMMITTEE ADDRESS P O BOX 990 CITY WASHINGTON STATE MI ZIP CODE 20044-0990	DALE KILDEE FOR ELECTION OTHER-G DEBT DISTRICT 09 YTD	2/17/95	$500.00
TOBY ROTH FOR CONGRESS ADDRESS 512 W COLLEGE AVENUE CITY APPLETON STATE WI ZIP CODE 54911	TOBY LROTH FOR ELECTION PRIMARY DISTRICT 08 YTD	2/17/95	$500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

9 5 0 3 9 6 9 4 0 3 2

SCHEDULE B ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE(in full) NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND MEDICARE - PAC

COMMITTEE NAME	ADDRESS	CITY	STATE	ZIP CODE	PURPOSE	ELECTION	DISTRICT	YTD	DATE	AMOUNT
NADLER FOR CONGRESS	176 WEST 93RD STREET #16H	NEW YORK	NY	10025	JERROLD NADLER FOR	PRIMARY	06		2/17/95	$500.00
RANGEL FOR CONGRESS COMMITTEE	c/o Richard Brown	WASHINGTON,	DC		CHARLES RANGEL FOR	PRIMARY	15		2/17/95	$500.00
FRIENDS OF JIM SAXTON	P.O. BOX 795	MT. HOLLY,	NJ	08060	JIM SAXTON FOR	PRIMARY	03		2/17/95	$500.00
THURMAN FOR CONGRESS	P O BOX5058	INVERNESS	FL	34450-5058	KAREN THURMAN FOR	OTHER-G DEBT	05		2/17/95	$1,000.00
FRIENDS OF MAURICE HINCHEY	24 MANOR	SAUGERTIES	NY	12477	MAURICE HINCHEY FOR	PRIMARY	26		2/23/95	$500.00
CITIZENS FOR JACK METCALF	12811 8TH AVENUE #A602	EVERETT	WA	98204	JACK METCALF FOR	PRIMARY	02		2/23/95	$500.00
Re-elect Senator Mark Hatfield Committee	James Hemphill	Salem,	Ore	97308	MARK HATFIELD FOR	PRIMARY			2/23/95	$1,000.00
COMMITTEE TO ELECT GARY L. ACKERMAN	P.O. BOX 95	FRESH MEADOWS,	NY	11365	GARY ACKERMAN FOR	PRIMARY	05		2/23/95	$1,000.00

SUBTOTAL of Disbursements This Page (optional) ____

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

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SCHEDULE B ITEMIZED DISBURSEMENTS

FOR LINE NUMBER 23.

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NAME OF COMMITTEE (in full) NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND MEDICARE - PAC

COMMITTEE NAME	PURPOSE	DATE	AMOUNT
BOB FILNER FOR CONGRESS ADDRESS BOX 127868 CITY SAN DIEGO STATE CA ZIP CODE 92112	BOB FILNER FOR ELECTION PRIMARY DISTRICT 50 YTD	2/23/95	$500.00
FRIENDS OF BUD CRAMER ADDRESS P.O. BOX 2621 CITY HUNTSVILLE, STATE AL ZIP CODE 35804	BUD CRAMER FOR ELECTION PRIMARY DISTRICT 06 YTD	2/23/95	$500.00
HUI O ABERCROMBIE ADDRESS 777 KAPIOLANI BLVD; #2420 CITY HONOLULU, STATE HI ZIP CODE 96813	NEIL ABERCROMBIE FOR ELECTION PRIMARY DISTRICT 00 YTD	2/23/95	$500.00
CITIZENS FOR TONY HALL ADDRESS 1812 KETTERING TOWER CITY DAYTON STATE OH ZIP CODE 45402	TONY HALL FOR ELECTION PRIMARY DISTRICT 03 YTD	2/23/95	$500.00
WALLY HERGER FOR CONGRESS COMMITTEE ADDRESS P.O. BOX 123 CITY YUBA CITY STATE CA ZIP CODE 95992	WALLY HERGER FOR ELECTION PRIMARY DISTRICT 02 YTD	2/23/95	$500.00
ILEANA ROS-LEHTINEN FOR CONGRESS 1990 ADDRESS 3969 BEECH DOWN DRIVE CITY CHANTILLY STATE FL ZIP CODE 22021-3348	ILEANA ROS-LEHTINEN FOR ELECTION PRIMARY DISTRICT 18th YTD	2/23/95	$500.00
ENGEL FOR CONGRESS ADDRESS 115 D STREET, S.E.; SUITE 102 CITY WASHINGTON, STATE DC ZIP CODE 20003	ELIOT ENGEL FOR ELECTION PRIMARY DISTRICT 17 YTD	2/23/95	$500.00
RICK WHITE FOR CONGRESS COMMITTEE ADDRESS P O BOX 6156 CITY KIRKLAND STATE WA ZIP CODE 98034	RICK WHITE FOR ELECTION PRIMARY DISTRICT 01 YTD	2/23/95	$500.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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SCHEDULE B ITEMIZED DISBURSEMENTS

PAGE 1 OF 1
FOR LINE NUMBER 29.

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NAME OF COMMITTEE(in full) NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY AND MEDICARE - PAC

COMMITTEE NAME NEW REPUBLICAN MAJORITY FUND	PURPOSE NEW REPUBLICAN MAJORITY FUND FOR	DATE	AMOUNT
ADDRESS 225 S WASHINGTON ST., SUITE 200		2/9/95	$2,500.00
CITY ALEXANDRIA	ELECTION OTHER		
STATE VA ZIP CODE 22314	DISTRICT		
	YTD		

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

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

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☑	Hand Delivered	DATE OF RECEIPT 3-20-95
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

JMH
PREPARER

3-20-95
DATE PREPARED

FEC FORM 70-2 (12/92)