

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

National Committee to Preserve Social Security & Medicare PAC

ADDRESS (number and street)

10 G St. NE

Suite 600

☐Check if different
than previously
reported. (ACC)

Washington

DC

20002

4215

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00172296

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
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

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

02

01

2011

through

02

28

2011

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

Ms. Christine Kim

Signature of Treasurer

Electronically Filed by Ms. Christine Kim

Date

03

16

2011

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

Office
Use
Only**FEC FORM 3X**

(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 12

Write or Type Committee Name

National Committee to Preserve Social Security & Medicare PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2011		511328.33
(b) Cash on Hand at Beginning of Reporting Period	400302.28	
(c) Total Receipts (from Line 19)	50.36	321.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	400352.64	511649.33
7. Total Disbursements (from Line 31)	30083.78	141380.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	370268.86	370268.86
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 12

Write or Type Committee Name

National Committee to Preserve Social Security & Medicare PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	2	0	1	2	0	1	1

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	1	1

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)	0.00	0.00
(ii) Unitemized	20.00	232.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	20.00	232.00
(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)	20.00	232.00
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.)	30.36	89.00
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 Transfer (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))	50.36	321.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	50.36	321.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared 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.....	10583.78	59880.47	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	10583.78	59880.47	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	82500.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (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	-1000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared 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))..	30083.78	141380.47	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30083.78	141380.47	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	20.00	232.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20.00	232.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10583.78	59880.47
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10583.78	59880.47

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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare PAC

A. Full Name (Last, First, Middle Initial)
Pete Stark Re-Election Committee

Mailing Address PO Box 75214

City Washington State DC Zip Code 20013

Purpose of Disbursement
Contribution

Candidate Name
Pete Stark

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 13

Transaction ID: 18898497

Date of Disbursement

02 / 03 / 2011

Amount of Each Disbursement this Period

1000.00

Contribution

B. Full Name (Last, First, Middle Initial)
Wasserman-Schultz For Congress

Mailing Address 1071 Twin Branch Ln

City Weston State FL Zip Code 33326

Purpose of Disbursement
Contribution

Candidate Name
Wasserman Schultz Debbie

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 20

Transaction ID: 18898498

Date of Disbursement

02 / 03 / 2011

Amount of Each Disbursement this Period

1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Nancy Pelosi for Congress

Mailing Address 430 South Capitol Street, SE
First Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name
Nancy Pelosi

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 08

Transaction ID: 18898500

Date of Disbursement

02 / 03 / 2011

Amount of Each Disbursement this Period

2500.00

Contribution

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 PageFOR LINE NUMBER:
(check only one)

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<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 Committee to Preserve Social Security & Medicare PAC

A.

Full Name (Last, First, Middle Initial)

NELSON 2012

Mailing Address c/o Senator Ben Nelson
420 C STREET, N.E.

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
ContributionCandidate Name
BEN NELSON011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NE District:

Transaction ID: 18898504

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Amount of Each Disbursement this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

FRIENDS FOR HARRY REID

Mailing Address 426 C Street, NE
Rear Building

City Washington State DC Zip Code 20002

Purpose of Disbursement
2010 US GENERAL ELECTION DEBT RELIEFCandidate Name
HARRY REID011
Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District:

Transaction ID: 18898505

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 0 3 / 2 0 1 1

Amount of Each Disbursement this Period

2500.00

2010 US GENERAL ELECTION
DEBT RELIEF**C.**

Full Name (Last, First, Middle Initial)

Michaud For Congress

Mailing Address 213 Lisbon St

City Lewiston State ME Zip Code 04240

Purpose of Disbursement
CONTRIBUTIONCandidate Name
Rep. Michael H. Michaud011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 02

Transaction ID: 18912843

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

CONTRIBUTION

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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare PAC

A. Full Name (Last, First, Middle Initial)
Mark Critz For Congress Committee

Mailing Address 551 Main Street Suite 120

City Johnstown State PA Zip Code 15901

Purpose of Disbursement

CONTRIBUTION

Candidate Name

Mr. Mark Critz

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 12

Transaction ID: 18912844

Date of Disbursement

02 / 10 / 2011

Amount of Each Disbursement this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Boswell for Congress

Mailing Address 301 4th Street, NE
Suite 202

City Washington State DC Zip Code 20002

Purpose of Disbursement

Contribution

Candidate Name

Leonard Boswell

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 03

Transaction ID: 18913908

Date of Disbursement

02 / 14 / 2011

Amount of Each Disbursement this Period

1000.00

Contribution

C. Full Name (Last, First, Middle Initial)
Dave Camp For Congress 2010

Mailing Address 5915 Eastman Avenue
Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement
Contribution

Candidate Name

Rep. David Lee Camp

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: 18926060

Date of Disbursement

02 / 28 / 2011

Amount of Each Disbursement this Period

2000.00

Contribution

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

National Committee to Preserve Social Security & Medicare PAC

A.

Full Name (Last, First, Middle Initial)

Braley For Congress

Mailing Address PO Box 390

City
Waterloo

State
IA

Zip Code
50704

Purpose of Disbursement
Contribution

Candidate Name
Mr. Bruce Braley

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 01

Transaction ID: 18926069

Date of Disbursement

02 / 28 / 2011

Amount of Each Disbursement this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

RANGEL FOR CONGRESS

Mailing Address PO Box 5577

City
New York

State
NY

Zip Code
10027

Purpose of Disbursement
Contribution

Candidate Name
CHARLES RANGEL

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 15

Transaction ID: 18926082

Date of Disbursement

02 / 28 / 2011

Amount of Each Disbursement this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Courtney For Congress

Mailing Address P.O. Box 1372

City
Vernon

State
CT

Zip Code
06066

Purpose of Disbursement
Contribution

Candidate Name
Mr. Joseph Courtney

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 02

Transaction ID: 18926094

Date of Disbursement

02 / 28 / 2011

Amount of Each Disbursement this Period

1000.00

Contribution

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)

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<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 Committee to Preserve Social Security & Medicare PAC

A.

Full Name (Last, First, Middle Initial)

Friends of Chris Murphy

Mailing Address P.O. Box 127

City
Cheshire

State
CT

Zip Code
06410

Purpose of Disbursement
Contribution

Candidate Name
Mr. Christopher Murphy

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District:

Transaction ID: 18926109

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Contribution

B.

Full Name (Last, First, Middle Initial)

Montanans For Tester

Mailing Address PO Box 1135

City
Helena

State
MT

Zip Code
59624

Purpose of Disbursement
Contribution

Candidate Name
Mr. Jon Tester

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MT District:

Transaction ID: 18926129

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Contribution

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

19500.00

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)

PAGE 11 / 12

<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 Committee to Preserve Social Security & Medicare PAC

A.

Full Name (Last, First, Middle Initial)

NCPSSM

Mailing Address 10 G Street, NE
Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement
REIMBURSEMENT OF POSTAGE EXPENSES

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 18912840

Date of Disbursement

02 / 10 / 2011

Amount of Each Disbursement this Period

0.61

REIMBURSEMENT OF POSTAGE
EXPENSES

B.

Full Name (Last, First, Middle Initial)

NCPSSM

Mailing Address 10 G Street, NE
Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement
REIMBURSEMENT OF TRAVEL EXPENSES

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 18912841

Date of Disbursement

02 / 10 / 2011

Amount of Each Disbursement this Period

504.15

REIMBURSEMENT OF TRAVEL
EXPENSES

C.

Full Name (Last, First, Middle Initial)

NCPSSM

Mailing Address 10 G Street, NE
Suite 600

City Washington State DC Zip Code 20002

Purpose of Disbursement
REIMBURSEMENT OF PAC SALARY & BENEFITS

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 18912842

Date of Disbursement

02 / 10 / 2011

Amount of Each Disbursement this Period

9035.92

REIMBURSEMENT OF PAC SALA-
RY & BENEFITS

SUBTOTAL of Disbursements This Page (optional)

9540.68

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)

PAGE 12 / 12

<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 Committee to Preserve Social Security & Medicare PAC

A.

Full Name (Last, First, Middle Initial)

ERIC KINGSON

Mailing Address 4602 WATERGAP LANE

City
MANLIUS

State
NY

Zip Code
13104-9327

Purpose of Disbursement

NO EXPRESS ADVOCACY, REIMB. OF TRAVEL EXPENSES

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 18922139

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2011

Amount of Each Disbursement this Period

905.15

NO EXPRESS ADVOCACY, REIM-
B. OF TRAVEL EXPENSES

SUBTOTAL of Disbursements This Page (optional)

905.15

TOTAL This Period (last page this line number only)

10445.83